

Service Fraternel d'Entraide ~ Laos

Newsletter ~ April 2012



Women and men working alongside the people of Laos

Laos... isn't it simply a destination for tourists seeking a rugged nature reserve? You could think so: with 2.7 million tourists and 272 travel agents in the country in 2011, compared to 130 agents in 2010 and... just 2 in 1975! Nevertheless, Laos is reeling with modernism: mobile phone network covering 80% of the country, access to 3G network in 130 of the 143 districts, soon to be served by two satellites installed by a Chinese company... But there is also a downside to this: a giant casino on the border with China closed down due to too much criminal activity..670 new cases of AIDS were diagnosed in 2011, 10% up on the previous year..and more statistics could be added. But the Laos where SFE is working isn't the touristic side, or the casinos, but is in places like the Sekong Province, far away from the touristic routes! However, looking at the huge growth of the hard wood exploitation and rubber tree plantations, by the Chinese and Vietnamese, leaves one to believe that development is in full swing. But in fact, this frenzied growth doesn't involve the local poor population.. Since 2006, SFE has been working on a development project in that province based on silk production. About 200 families from several villages around Tatheng have been trained and are now totally self supporting... (growing mulberry trees, raising worms, silk reeling from cocoons, selling the silk)

This allows these families to have a more varied diet, more medical care and education for their children. Remaining in the Sekong Province, in our last November's newsletter, we mentioned some difficulty in the health sector and SFE's involvement. Consequently last February, training sessions were organised at the Sekong Hospital, thanks to a team of volunteers led by radiologist, Claude Gauthier and his wife Christine who is an optician, and including dentists

Jean-Gabriel and Sylvie Chillès. At the same time, we became aware of some obvious needs: protective aprons for the Xray technicians and need to repair old mattresses.

Your response surpassed our expectations! A radiologist's office offered free protective aprons and financial gifts reached 4.250 euros.

Greatly encouraged by this gift, SFE decided against repairing the old mattresses, and has equipped the 45 beds with new ones, for a total of 4.160 Euros. The remaining 90 euros will no doubt be put to good use! SFE is also active in the battle against TB in the same Province, plus in Attopeu and Savannakhet. SFE is also active in the battle against TB in the same province, plus



in Attopeu and Savannakhet. In Attopeu, we are involved in two projects: hospital work training and community development for isolated villages: access to clean water, basic hygiene, farming and breeding animals.



To become blind because of cataract.



Can we accept it in 2012?

In Savannakhet, SFE has been working with the eye hospital since 2003. SFE is involved in developing new technology for diagnostic and treatments..e.g. training on maintaining the equipment, sizing corrective lenses etc Training nurses who work in remote areas. Training an ophthalmologist who can take over.. Another organisation recently registered 4360 blind people in this province, 3285 of these due to cataracts. They could regain their sight due to the advances in technology, but the distance plus cost of transport is prohibitive for the poor. The delay in the diagnosis can lead to serious consequences. So we have supported the creation of a mobile surgical unit with high-tech equipment, along with a temporary operating theatre in the most remote areas. It is no longer a question of not being able to treat patients due to equipment lack, or lack of personnel, but a question of financing the mobile clinics. A cataract campaign in one area costs about 1.100 euros. This is for ten days, operating on 70 patients, that is about 600 per year.



In Europe, surgery is performed long before vision is blurred by cataract .



Patients detected in this project can be considered blind, as they often cannot distinguish anything except light from darkness

Thanking you in advance for all your help.

Dr Philippe Klopfenstein, President.

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