



# Project Lokun 20 Post-trip Report



5th - 14th December 2016  
Cambodia, Pursat Province

Project Lokun is a Medical bi-annual Overseas Community Involvement Project (OCIP) that serves the region of Pursat, Cambodia, as part of the National University of Singapore Medical Society. The project started in 2006 and is now entering its 11th year of serving the people of Cambodia.

<http://www.projectlokun.com/>

# FOREWORD

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Project Lokun is a medical bi-annual Overseas Community Involvement Project (OCIP) that serves the region of Pursat, Cambodia, as part of the National University of Singapore. The project started in 2006 and is now entering its 11<sup>th</sup> year of serving the people of Cambodia.

As part of the National University of Singapore's GoHelp initiative, Project Lokun aims to create positive and sustainable changes in the health of the Cambodian villagers in Pursat. Our primary aims are to reconnect the Cambodian villages back to their own healthcare system, and to cultivate within them an interest in their own health.

To achieve this, Project Lokun has formed strong partnerships with many local organizations, schools and healthcare facilities. Examples include local medical and pharmacy students from the University of Puthisastra (UP), as well as Sustainable Cambodia (SC), an NGO that focuses primarily on infrastructural development in villages.

In this booklet, there are reflections, pictures, and post-trip reports written by Lokuners to give you a better insight on what we do in Project Lokun.

Project Lokun has come a long way since its initiation, and none of this would have been possible without the kind assistance provided by our Cambodian partners and local partners such as you over the past few years. It is our sincere hope that you will continue to help us in the years ahead.



Yours Sincerely,  
Sean Tsi and Ng Shi Hui  
Project Directors of Project Lokun 20

# WHAT'S NEW?

# CAMBY WING

## Cambodian Lokuners

Many UP Lokuners commended the workshop for its useful and practical content, and some even expressed interest to start up their own community projects in the future. In addition, it was a major factor in successfully bonding NUS and UP Lokuners, and many UP Lokuners felt connected to the team and the project and even expressed interest to sign up for future trips again to better contribute to Lokun.



## Camby Wing Workshop

The workshop consisted of three lessons:

- Logic Model,
- Assessing Needs (i.e. baselines),
- Sustainability

each lasting 1.5 hours and held at every night.

The lessons were conducted in small group discussions where the Singapore team functioned as facilitators for each of the small groups.



The final night culminated in a mini competition where the groups work together to design and give a presentation on a hypothetical project, to demonstrate understanding and application of the concepts discussed. The winning group was presented with Certificates of Distinction.

A new initiative in L20 was the Community Leadership Experience workshop ("Camby Wing workshop") conducted for the University of Putrisastra (UP) Lokuners during the stay at CROAP.



It has long been the wish of many of Lokun's seniors to set up a Cambodian student committee with our partner university- UP (referred to as "Camby Wing"), as this would benefit Lokun in terms of sustainability by empowering local ownership, with the ideal aim in the very long term to hand over the responsibility of achieving Lokun's objectives to the local students. But in the past, our seniors had reached the conclusion that this is near impossible, because of the very nature of the Cambodian student culture which lacks the same level of interest in community service compared to students in Singapore.

However, in L20, the idea was revived, this time with a specific and promising strategy: to gradually pique and develop interest within our UP Lokuners in community service, project management and specifically Lokun itself, through a workshop, which was inspired by and modelled after the School of Public Health's OCIP workshop. We set up a Camby Wing committee to design and implement the workshop with the advice and guidance of A/Prof Sri Chander.

Working towards L21 and beyond, Lokun would continue to work closely with UP to come to an agreement and establish an official Camby Wing together, as soon as possible such that the inaugural Camby Wing will be part of the team by L21. In addition, Lokun will continue to refine the workshop's content and conduct together with our mentors, and also explore possible ways of allowing our UP Lokuners to become better integrated with the NUS Lokuners, e.g. through an exchange programme.

# SURVEYING NEW VILLAGES

## Working with Sustainable Cambodia

Sustainable Cambodia is a local Cambodian non-profit organization that we have been trying to collaborate with in the past few trips, to enhance our impact in Cambodia in the long-run, ensuring sustainability of our project.

In this L20 trip, our development and education committee visited Sustainable Cambodia to discuss our plans.



Lokun intended to find new villages to serve in the future, because the current villages were already showing signs of independence (i.e. health status and healthcare accessibility is sufficient) as well as dependency (e.g. attending Lokun's clinics for the sake of collecting free medications). As supported by the results from the Health Needs Assessment (HNA) in L18 and L19, the broad idea was to continue serving Kampong Luong, Ruluoh and Takeo while moving out of Chuk Meah and Keov Monih, and to serve at least one new village.

Having sought recommendations of villages to serve from Sustainable Cambodia (SC), L20 explored three new villages – Prey Omal, Othkov and Toul Makak. L20 visited the village chiefs and primary school principals, went house-to-house to conduct HNA, and also conducted Health Facility Assessments (HFA) on the nearby health centres the villagers depend on. The results would serve as baselines for monitoring and evaluating Lokun's impact in the future, as well as for comparison to current villages.

The L20 HNA assessed the areas of general health, musculoskeletal health, tuberculosis and natal care, as well as the extent of involvement and impact of NGOs like SC operating within the area. Generally, prevalent health conditions in these areas involved musculoskeletal and gastrointestinal problems. There were only occasional cases of TB but with poor follow-up, especially in Toul Makak. There were also a number of patients who had severe skin and soft tissue infections, which can be attributed to poor aseptic techniques and poor patient education at local healthcare centres and the provincial hospital. Also, many villagers expressed interest in learning about hygiene.

Ultimately, The HNA results, which are currently being compiled and analysed by the Development committee, would serve to guide L21 and future trips in terms of deciding which villages Lokun could serve and how Lokun could provide help and target specific needs for these villages, for instance targeting the local healthcare centres and provincial hospital to provide better patient education to prevent post-operative infections.

# DEVELOPMENT COMMITTEE: RECONNECT ISOLATED RURAL VILLAGERS TO THEIR OWN LOCAL HEALTHCARE SYSTEM



Over the many years, the Development committee has formed and maintained working relationships with a number of partners in Pursat, especially hospitals which Lokun can refer our patients to. This aims to build the villagers' confidence in the local healthcare system which can then take ownership of the healthcare needs of their own people, especially for chronic conditions.



For L20, the Development committee took charge of designing and conducting the key assessments, namely the HNA and HFA, to survey the new villages as previously mentioned. In L21, the Development committee is looking to work more closely with a local Cambodian NGO - Sustainable Cambodia to identify and target the needs of the new villages. The committee is also planning to establish ties with the health centres in the region (Prey Nit and Roleap Health Centres), for instance to help publicise the centres, improve the nurses' skill levels and to establish referral linkages.

Of note, during L20, the committee incidentally conducted a HFA at a private dental clinic at Krakor, further inland of Kampong Luong. The clinic had a high

level of cleanliness, far higher than most households or even other healthcare facilities within Pursat. It is a viable clinic to refer future dental patients at Lokun's clinics.

The committee also conducted a HFA at the Krakor Referral Hospital. The committee found out that the hospital has in place a mandatory tuberculosis education programme for all patients diagnosed with tuberculosis, and has a satisfactory standard of education and follow-up, which was uncommon in most other health centres. Lokun is currently looking to establish a referral linkage with Krakor Referral Hospital, and also potentially collaborate in terms of designing and conducting education materials on tuberculosis, and also on nutrition.

# EDUCATION COMMITTEE: RECONNECT ISOLATED RURAL VILLAGERS TO THEIR OWN LOCAL HEALTHCARE SYSTEM



Over the many years, the Education committee has developed a definitive and final health education syllabus for the village primary school students, based on feedback conducted during previous and ongoing trips regarding which aspects of health education the villagers need and wish to learn. The syllabus is also pitched at different levels for students of different ages. Lokun hopes to ensure continuity of our syllabus by visiting these schools yearly such that the primary school students eventually graduate having learnt the full range of health education topics.

In addition, the Education committee also corresponded with Sustainable Cambodia via email and met up with them during L20 itself. It was our interest to build rapport with SC and interest them in adopting at least part of our education materials to teach the primary schools in the many villages they serve, thus expanding our impact and outreach in terms of education. Both parties agreed that there is great potential to collaborate in terms of health education and to work on further developing health education materials for the village primary schools together. We shared our existing materials with SC and invited them to observe the lessons we conducted at the village primary schools.



For L21 and beyond, the Education committee is planning to continue corresponding with SC, for instance to identify health education needs, develop materials targeting such needs and jointly conduct lessons together to encourage them to take up our materials. The committee will also work to refine existing materials based on the L20 HNA analysis done by the Development committee.



## Primary School Topics Covered

- Pri 1: Oral Hygiene
- Pri 2: Eye Care
- Pri 3: Mosquitoes & Musculoskeletal Stretches
- Pri 4: Food Hygiene
- Pri 5: Alcohol & Smoking
- Pri 6: Hypertension & Tuberculosis



## Collaboration with Youth Club from Sustainable Cambodia

A few Cambodia Youth Club members came down to watch Project Lokun conduct our education lessons in the village. We hope to conduct future education lessons along with the Youth Club members.

# CLINICS COMMITTEE:

## PROVIDE PRIMARY HEALTHCARE SERVICES IN THE SHORT RUN



In L20, the Lokun team worked with 6 Singaporean doctors and 1 Cambodian doctor to conduct free health clinics for 6 villages in Pursat Province - Keov Monih, Chuk Meah, Takeo, Ruluoh, Kampong Luong (Land & Sea Villages).

In total, we saw a total of almost 900 villagers over three days. The turnout is shown below:

- Chuk Meah saw 150 patients.
- Takeo saw 300 patients.
- Keov Monih saw 120 patients.
- Ruluoh saw 90 patients.
- Kampong Luong (Land) saw 150 patients.
- Kampong Luong (Sea) saw 30 patients.

The L20 Clinics committee is currently compiling data on the prevalence of the different types of health conditions seen in the villages. This data could be used to identify more deeply rooted issues in these villages, for instance food hygiene causing a spike in diarrheal disease.



### Health Education Programme:

The villagers also underwent a short health educational segment as part of the clinics. After undergoing each of these lessons, each villager would go home with an accompanying item to apply their knowledge in their daily lives – items such as muscle rubs, antiseptic cream and oral rehydration satchels were given.

### Topics Covered

- Food Hygiene
- Musculoskeletal Stretches
- First Aid



### Almost 900 villagers screened

Villagers with ailments ranging from Upper Respiratory Tract Infections, Gastrointestinal problems and Musculoskeletal issues, to infected wounds and abscesses.

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FOLLOWING SPONSORS FOR THEIR  
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