Where It's Needed Most

Dr Cynthia Maung was born in Insein Township, Rangoon, in 1959 but grew up in Moulmein in Mon State. She graduated in medicine in 1985 and practiced in Bassein, Irrawaddy Division, and Karen State before fleeing to the Thai border when the military assumed power in September 1988. There she treated Burmese



Dr Cynthia Maung

QUESTION: You've won several international awards and were chosen as a *Time* magazine Asian "heroine" last year. Now you have been nominated for the Nobel Peace Prize. How do you feel about that?

ANSWER: I am just one of 1,000 women nominated for the prize, including four women working along the border. We have the opportunity to share our experiences and learn from each other and can collectively build our communities by working together with other women and other groups to achieve our goals. We still have a lot to do though, to raise awareness about human rights.

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Q: Your clinic has been operating since 1989. How has it developed and what are the main diseases you treat?

A: When we started out we had six staff working



Patients line up for treatment at Dr Cynthia's clinic

at the clinic, and we provided only very basic medical services. Gradually the service we provide has extended, as has the target area. In Mae Sot we have 100 in-patient beds and every year we treat around 60,000 cases.

At the moment we are working very closely with local health organizations to provide cross border health assistance for internally displaced persons. We have 70 health schemes providing services for IDPs, schemes like reproductive health, prosthetic workshops, HIV prevention and counseling programs and also initial and ongoing training for health workers.

Malaria is the biggest public health problem, but we are seeing an increasing number of preventable diseases like HIV/AIDS along the border. Among women of reproductive age there are more and more health problems like sexually transmitted infections.

Population displacement is a major problem. People are moving around and you can't finish some treatments, like for tuberculosis, if they move a lot. It is difficult to [monitor] progress, especially in IDP areas where we cannot set up TB programs. In the Mae Sot area the situation is better because there are already TB programs conducted by Medecins Sans Frontieres.

With malaria, about 50 percent of cases come from Burma and we cannot [implement] preventative care. If we can treat [patients] early and make an early diagnosis then we can save lives but many cases from Burma [are problematic] because of late presentation and the threat of arrest and deportation and also the financial constraints.

Q: When you look back over your life in exile, what do you think has been your greatest achievement?

A: We [have been able to build] networks with our people and neighboring countries like Thailand. The Thai public health system supports us and helps to promote the health of migrant people. Our service provides a health service

Nobel Peace Prize nominee's work far from complete

pro-democracy activists, many of whom were suffering from severe malaria, and went on to open a small medical center. In 1992-93 her health care service expanded to cater for internally displaced people in Burma, coordinating with other Burmese exile groups involved in providing public health care. She talked to *The Irrawaddy* about her work and her nomination for the Nobel Peace Prize.

for thousands of people, we can save the life of people and at the same time we can build networks with other people who are working towards peace and democracy, the future of our country.

Q: In the past, there have been reports of you relocating your Mae Sot clinic to a refugee camp on the Thai-Burma border. What's happening on this front?

A: No, we have never planned to move to a refugee camp because the program, the service we are providing, is for the most needy people, like the migrant workers and internally displaced people. In the refugee camps there are already international NGOs. We are working together with the international community by helping them to train health workers to work in the camps. At the same time we continue to work with migrant workers and internally displaced people who cannot access health and other social services. So we are working with the most needy people along the border.

Q: What kind of obstacles do you come up against in your work?

A: Many of our health workers do not have the official documentation to live in Thailand [and] this situation is very risky as people can be arrested and deported. So, especially traveling in Mae Sot or if we have to go to a meeting or seminar in another province, it's very difficult for us to do this kind of work. The clinic can provide a service but travel is difficult. We still need to solve this problem. Some people have work permits, but not everyone.

Q: What's your assessment of Burma's public health care system?

A: In Burma right now the main problem is equality. Health services are available for people who live in the cities and are rich. However, in remote villages, along the border area and in ethnic areas, the health service is very poor and there are no international NGOs or government services. At the same time, the people [in these areas] are often faced with food shortages or forced relocation so they don't think too much about preventative medicine or health services. Mostly they only seek attention when they are really sick.

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We can build networks with other people who are working towards peace and democracy, the future of our country

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-Dr Cynthia Maung



Migrant workers crowd Dr Cynthia's clinic

Learning with the Irrawaddy 4

To accompany July 2005 Issue of Irrawaddy Magazine Selected article: *Where It's Needed Most*, page 26

Activities to do Before Reading

Activity 1 What do you know? What do you think you know? What do you want to know?

You are going to read an article about Dr Cynthia Maung, who runs a medical clinic for people from Burma, in Mae Sot. What do you know about Dr Cynthia and her clinic? What do you think you know? What do you want to know? Complete the chart.

Dr Cynthia Maung	
Things I think I know	Things I want to know

Activity 2

Prediction: True or False

- a) Do you think these sentences are true or false?
 - 1. Four women from Burma have been nominated for the Nobel Peace Prize.
 - **2.** Dr Cynthia's clinic started with 70 medical staff.
 - 3. Malaria is the biggest health problem in Mae Sot.
 - 4. Dr Cynthia's clinic is going to relocate to a refugee camp.
 - 5. Most clinic staff have documents to live and work in Thailand.
 - 6. There are no international health NGOs along the border areas of Burma.
 - 7. People in border villages often go to clinics.
- **b**) Read the article, and check whether you are right or wrong. If the sentence is false, write the correct information.

Activities to do During Reading

Activity 3 Words from context

Here are some excerpts from the article. Find the phrase in the text, and choose the best synonym or definition for the underlined words.

- 1. We still have a lot to do though, to raise <u>awareness</u> about human rights. (answer 1)
 - a. knowledgeb. peoplec. informationd. media
- **2.** ...many cases from Burma are problematic because of late presentation and the threat of arrest and deportation and also the financial <u>constraints.</u> (answer 2)
 - a. moneyb. difficultiesc. accountsd. arguments
- **3.** We have been able to build <u>networks</u> with our people and neighbouring countries like Thailand. (answer 3)
 - a. internetb. groupsc. connectionsd. hospitals
- **4.** We continue to work with migrant workers and internally displaced people who cannot <u>access</u> health and other social services. (answer 4)
 - a. see c. discover
 - **b.** pay for **d.** get to
- **5.** *The clinic can provide a <u>service</u> but travel is difficult.* (answer 5)
 - a. useb. assistancec. doctord. operation
- 6. At the same time the people in these areas are often faced with food shortages
- or forced relocation (answer 6) **a.** lacks **c.** costs
 - **b.** excess **d.** theft

Activity 4 Rephrasing

Students choose the sentence or phrase that means the same as the sentence or phrase from the article.

- **1.** *Gradually the service we provide has extended, as has the target area..* (answer 2)
 - **a.** We have got bigger, and need more money.
 - **b.** Now we have more programs in more places.
 - **c.** We now have more staff and bigger offices.
 - **d.** At the moment, we have many more clinics than before.
- **2.** It is difficult to monitor progress, especially in IDP areas where we cannot set up TB programs. (answer 2)
 - **a.** People in IDP areas have difficulties to get TB treatment.
 - **b.** TB is becoming a bigger problem in IDP areas because people can't get treatment.
 - **c.** We have programs in IDP areas, but we have many problems treating TB in these areas.
 - **d.** We cannot easily get information if our TB treatment is effective in IDP areas, because we don't have programs there.
- **3.** We have never planned to move to a refugee camp because the program, the service we are providing, is for the most needy people. (answer 3)
 - **a.** We are not moving to a camp because we want to work with people who need us the most.
 - **b.** We want to move to a camp, but people don't need us there.
 - **c.** We don't need to move to a camp, as our programs are easier to run in Mae Sot.
 - **d.** We don't want to move to a camp because our programs are not appropriate for refugees.
- **4.** In remote villages, and along the border area and in ethnic areas, the health service is very poor and there are no international NGOs or government services. (answer 6)
 - a. Some areas of Burma have more health services than other areas.
 - **b.** Some parts of Burma don't have access to good health care as there are no NGO or government services.
 - **c.** Some border villages have NGOs providing health services, and some have government health services.
 - **d.** In some border areas, people don't have enough money to pay for health care.

Activity 5 Comprehension questions

Answer these questions. Some of the answers are not in the article. If the answer is not in the article, write 'don't know'.

- 1. How many people are nominated for the 2005 Nobel Peace Prize?
- 2. What types of training programs does the clinic have?
- 3. Why is TB less problematic in Mae Sot than IDP areas?
- 4. Why do people from Burma often die from malaria?
- 5. Does the Thai health system give money to help Dr Cynthia's programs?
- 6. In what ways do international NGOs co-operate with Dr Cynthia?
- 7. Why is it difficult to travel to meetings?
- 8. Do the hospitals in Burma offer good quality services?

Activity 6

Cause and Effect

- a) The Mae Tao Clinic has many problems. What are some of these problems? Read through the article, and think of a list of problems.
- **b**) Here are some of these problems:
 - **1.** Patients are always moving from place to place.
 - 2. Patients don't come to the clinic until they are very sick.
 - 3. Clinic staff don't have official documents .
 - **4.** In Burma, there is a lot of inequality between rich and poor people.

Here are some consequences (effects) of these problems. Match the consequence with the problem.

- It is sometimes too late to treat them.
- It is difficult to monitor treatment.
- They can get arrested and deported.
- They can't finish their treatments.
- *health services are only available to people with money.*
- there are no health services in border and ethnic areas.
- *it is hard for them to travel to meetings.*
- clinic staff cannot make an early diagnosis.
- *it is difficult for them to travel to other provinces.*
- c) Make sentences using *so*, e.g.

Patients are always moving from place to place, so it is difficult to monitor treatment.

d) Can you think of any more consequences of these problems?

Activities to do After Reading

Activity 7

Extra Reading: What is the Nobel Peace Prize, and who is nominated for it?

This is extra background information on the Nobel Peace Prize. You may want to design some reading activities to go with this information.

The Nobel Peace Prize

The ways and means to achieve peace are as diverse as the individuals and organizations rewarded with the Nobel Peace Prize. Henry Dunant, founder of the Red Cross, shared the first prize in 1901 with Frédéric Passy, leading international pacifist of the time. Aside from humanitarian work and peace movements, the Prize has been awarded to a wide field of work including advocacy of human rights, mediation of international conflicts and arms control and disarmament.

Nomination

The process of selecting a winner of the Nobel Peace Prize starts in September, about a year before the prize announcement. At this time, the prize-awarder in Oslo, the Norwegian Nobel Committee, composed of five members selected by the *Storting* (Norwegian Parliament) sends out letters to individuals and organizations qualified to nominate candidates.

The nominations reach the Nobel Committee between September and February.

Selection

During the spring, the proposals are examined by the Norwegian Nobel Committee with the help of specially appointed permanent advisers.

In October, the Norwegian Nobel Committee makes its choice.

Announcement

The prize winners are contacted and a press conference is held.

Nobel Peace Prize Award Ceremony and Nobel Lectures

In December, the prize winners are invited to Oslo where they take part in the festivities and receive their medal, personal diploma, and a monetary award. In return, they give a lecture

Four Women from Burma Nominated for Novel Peace Prize

Paw Lu Lu was born in 1948 in Taungoo, Burma. Although she only completed primary school, she trained as a nurse when she went to live in Karen state. She fled to the Thai border when the repression in Burma worsened and has since been taking care of patients in the Sangklaburi district of Kanchanaburi province. She runs the Baan Plod-Phai (Safe-House) there.

Cynthia Maung (born 1959), a doctor from Karen State in Burma, fled to Thailand in 1988 and set up the Mae Tao Clinic. Every year the clinic saves the lives of thousands of refugees and migrant workers. It supports remote field clinics in Burma serving internally displaced persons and sponsors women's organizations and health education. It trains medics to provide health care throughout the Thai-Burma border. Dr Cynthia has set up an orphanage, and supports schools and boarding houses. Charm Tong was born in 1981 in southern Shan State, Burma. When she was young, her family moved to the Thai border. After completing the ninth grade in Chiang Mai, she joined the Shan Herald Agency for News as an intern and worked with various human rights organizations. In 1999, with her colleagues in Chiang Mai, she formed the Shan Women's Action Network (SWAN). As a member of the Advocacy Team of SWAN, her responsibilities include fact finding, training, campaigning and advocacy on human rights and democracy in Burma.

Naw Zipporrah Sein was born in 1955 at Saw Kar Der Village, Kler Lweh Htoo District, Karen State, Burma. She was home educated by her mother before she went to school in the conflict zone in Karen State where she completed her teacher education. For safety reasons, she sought refuge in Thailand in 1995 where she promoted education for Karen women in refugee camps. In 1998, Zipporah moved on to work for the Central Committee of the Karen Women's Organization (KWO) as coordinator and executive secretary.

Activity 8

More questions

What other questions would you like to ask Dr Cynthia? Brainstorm a list of questions.

Activity 9

Roleplay an interview

Work in pairs. Partner A is a journalist, Partner B is Dr Cynthia. Do an interview, using the new questions from Activity 8.

Activity 10

Write to the Nobel Prize Committee

Do you think Dr Cynthia, Charm Tong, Naw Zipporah Sien or Naw Paw Lu Lu should win the Nobel Prize? Why? Choose one of these women, and write a letter to the Nobel Prize Committee explaining why you think they should receive the 2005 Nobel Peace Prize.

If you like, send you letter to the Nobel Prize Committee.