Briefing Regarding Myanmar Peace Team's Meetings with Mae Tao Clinic Team <u>18 September 2012</u>

Summary

In June and August, the Myanmar Peace Team of the Burmese Government led by U Aung Min, then Railway Minister, met with Dr. Cynthia Maung, founder of Mae Tao Clinic, and members of the clinic. They also visited Mae Tao Clinic. The meetings to date have been informal. Nevertheless Dr. Cynthia has already clarified the three key points for her discussions with the team:

- Improvement of local cross border collaborations between health services in Thailand and Burma. Specifically, she discussed the need for a system for referral between Myawaddy Hospital, Mae Tao Clinic and Mae Sot Hospital.
- Developing solutions for addressing statelessness in children born on the Thai-Burma border to Burmese parents. Specifically, the need for the citizenship rights for children born at Mae Tao Clinic or Mae Sot Hospital whose parents are from Burma.
- The need for accreditation and recognition of the skills of those working in health, education, community development and social work on the Thai-Burma border.

These three points remain unaddressed; instead, informal references were made by members of the government team to news media suggesting that Dr. Cynthia return to Burma to set up a hospital there, resulting in widespread public misunderstanding. Dr. Cynthia has never had any intention to officially set up a hospital in Burma, and the Mae Tao Clinic's stance has and continues to be that it is primarily the responsibility of the government to upgrade and strengthen existing health infrastructure, including the primary health work of ethnic health organizations (EHOs) and community based organizations (CBOs), whose long experience, trust and access, via existing health facilities and mobile health teams, to populations is essential for building an effective comprehensive health care system, one which can realize the goal of providing "health for all" in Burma. Thus far, serious discussions to begin the realization of this in ethnic areas of Burma have yet to begin. In particular, the community health approach utilized to expand healthcare access in many ethnic areas of Burma must be acknowledged, recognized and supported, an approach which has, for decades, enabled thousands of Burma's peoples, particularly ethnic peoples living in rural Burma, access to essential basic health services unavailable through the current underfunded and highly centralized government health system. The three priority issues raised by Dr. Cynthia would be a key initial step towards such.

The Mae Tao Clinic welcomes recent efforts by the Burmese government aimed at peace-building, as well as its initiation of dialogue with clinic staff and other health colleagues from Burma. We hope to see such efforts continue, and that they will lead to a genuine partnership to improve the health of the peoples of Burma. We will continue to support and advocate for community-managed primary health care systems in Burma, and are willing to engage in ongoing dialogue with the government Peace Team, in conjunction with our partners, EHOs working in eastern Burma, and others, including the

Mae Sot Hospital and other Thai health institutions in order to continue expanding access to health services for the peoples of Burma. However, such dialogues must be inclusive and formalized, with substantive discussions and time-bound, concrete proposals to begin addressing the three priority areas that have been repeatedly raised by the clinic. We ultimately hope that this very preliminary process will transform into concrete measures that result in benefit for our patients and our communities.

Details on Meetings

On 26th June, Dr. Cynthia, at the request of the Peace Team went to Wattana Resort in Mae Sot for an informal lunch appointment with U Aung Min. It was a very brief meeting, which gave Dr. Cynthia the chance to raise the 3 key issues with the Peace Team. On the 27th June, U Aung Min's team including U Khin Yee, the Minister for Immigration, and leading members of Dawei Princess and Myanmar Egress visited Mae Tao Clinic. These first two meetings were informal and with limited discussions, However, this visit received intense media coverage in the local, regional, and international press despite its lack of substantive dialogue or concrete outcomes.

A meeting was organized on August 5th, at the request of the governmental team, as U Aung Min wanted his wife, Dr. Wai Wai Tha to visit Mae Tao Clinic. Dr. Cynthia requested that the Peace Team also arrange for doctors from Myawaddy Hospital to join the meeting so that the issue of local cross border collaboration could begin to be discussed. This meeting was also informal, and the role of those invited by the Peace Team was not clearly defined. Dr. Cynthia followed up on the three key issues, which were raised on June 26th. After lunch U Aung Min's team arrived to pick up his wife, and there was again a lot of media around this event. There was a lot of attention and questions by local official authorities about this visit. Mae Tao Clinic organized a meeting between Dr. Wai Wai Tha, the doctors from Myawaddy, a doctor from the Ministry of Health (Myanmar), Mae Tao Clinic and the Director of Mae Sot Hospital, to facilitate better discussion on the issue of local coordination.

It was clear from discussions that there is a lot of work to be done to address the three issues:

REFERRALS

When Myawaddy Hospital, Mae Tao Clinic and Mae Sot Hospital shared information on caseloads and facilities, it became evident that the Burmese government hospital needs to upgrade and expand its facilities. Currently, there are only 50 beds at Myawaddy Hospital and no neo-natal facilities. In terms of caseload, currently Mae Tao Clinic delivers around 3,000 babies per year and Mae Sot Hospital also delivers 3,000 babies, nearly half of which are Burmese. Myawaddy Hospital only delivers 1,200 per year. When Myawaddy Hospital cannot treat a patient, they send them to Mae Tao Clinic or Mae Sot Hospital, no referral papers are sent and no follow up discussion between hospitals.

It is clear there is no local coordination allowed, all communication with the hospitals in Thailand must go through the central level, which can take several months.

BIRTH REGISTRATION

Until now, no one from the Peace Team has had real understanding of this issue. Current Burmese government regulations create many barriers to resolving the issue of stateless children on the border.

ACCREDITATION AND RECOGNITION OF SKILLED STAFF

Dr. Cynthia was able to present the standardized health worker accreditation system that is in place on the Thai-Burma border and to explain what level of service health workers are able to provide at each level of accreditation. The members of the Peace Team delegation who are health professionals were impressed and noted a possibility of further coordination on this issue, although no concrete plans or proposals were laid out, and no follow-up plans made.

Conclusions

The Mae Tao Clinic welcomes these initial overtures by the Burmese government to coordinate and collaborate to improve the public health system of Burma. However, there have been no concrete outcomes or progress towards meeting this goal. In order to move the process forward, the Mae Tao Clinic is committed to continue meeting with the Peace Team but only under the following circumstances:

- Future meetings must be official meeting, with a clear agenda agreed upon in advance, though established, clear, official communication channels
- In the interest of patient confidentiality and so as to not disrupt vital health services, future meetings must be held at a neutral location in Mae Sot
- Media coverage of such meetings must be agreed upon in advance by the Mae Tao Clinic
- All Peace Team participants of future meetings must possess the appropriate backgrounds or positions to address the three key priority areas repeatedly raised by the Mae Tao Clinic.
- Prior to future meetings, all participants, their backgrounds, and their roles must be shared in the interest of safety and transparency
- The Peace Team must request prior permissions from Thai authorities to attend future meeting; it is not the role of the Mae Tao Clinic, as a health provider, to obtain such

The Mae Tao Clinic hopes that future discussions will enable concrete steps to be made towards addressing the longstanding problems facing the peoples from Burma, including the three key priority areas raised by Dr. Cynthia at the first meeting on the 26th June. We hope the Burmese government will use this opportunity to truly engage and partner with the clinic and other community organizations in Burma towards such, and towards the ultimate goal of improving the public health the country and the region.

Mae Tao Clinic will make a formal request to President Thein Sein, U Aung Min and the Minister for Health regarding our position on the next steps for discussions with the Myanmar Peace Team. Daw Aung San Suu Kyi and other political parties will also be informed of Mae Tao Clinic's stance.

Mae Tao Clinic hopes that future discussions will enable progress in terms of the issues raised by Dr. Cynthia at the meeting on the 26th June. These are essential for improving the lives of the populations that Mae Tao Clinic serves in our role as a health service provider, training facility for health workers working in ethnic areas of Burma and as an advocate for child protection, in particular for preventing statelessness.

Collaborations with Ethnic Health Organisations should begin as soon as possible for the people in ethnic areas to begin to establish some trust in the peace process. The development of adequate health and education should be a key agenda item for the Myanmar Peace Team in order to establish belief in the peace process, in the war-affected ethnic areas.