



MAE TAO CLINIC

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ANNUAL REPORT 2007

Dear Friends,

It is a pleasure for us to close another year of service at the Mae Tao Clinic (MTC) and present you with our 2007 Annual Report. This past year represented another period of significant growth for MTC, particularly in addressing infectious diseases, collaborating with regional organizations, and strengthening our support for child protection. The recent protests by Buddhist monks in Burma against military rule provided further impetus for urgent action by the MTC in these key areas. Both general instability in Burma and persisting unrest along the border areas, where ethnic minority populations continue to be victims of human rights abuses, contribute to the ever-increasing number of patients coming to MTC.

Despite the efforts of many organizations within Burma to combat the prevalence of HIV/AIDS, tuberculosis, and malaria, these three diseases account for a higher proportion of cases from across the border than among cases from migrant communities in Thailand. In addition to diagnostic testing for adults and children with suspected malaria, MTC also routinely screens pregnant women as part of antenatal care. Voluntary HIV testing and HIV testing for reproductive health patients is available as well, with plans for expansion of this service on site for the coming year. In 2007, MTC entered into a new partnership program with Mae Sot Hospital in treating some HIV positive patients with anti-retroviral medications.

2007 saw a tremendous expansion of collaborative efforts between Mae Tao Clinic and numerous organizations in the region. MTC continues to be a regional leader in health worker training through collaborations with the Back Pack Health Worker Team and the Burma Medical Association, as well as through supporting cross-border community health care services in Karen State at the Pha Hite and Ler Per Her clinics. An example of this past year's efforts was a joint program by MTC and the Burma Medical Association to train and equip lab technicians in Burma in early detection methods for infectious disease cases. Another new initiative

for 2007 was the RAISE project in partnership with Columbia University and the Burma Medical Association to train health workers from six border states in emergency obstetric care. In addition to these accomplishments, MTC with various Burmese community-based organizations (CBOs) and local Thai supporters is planning collaborations for 2008 such as the establishment of a Thai-registered foundation, a community training center, and a forum of border area CBOs to develop a set of common principles for humanitarian assistance.

The influx of more and more children from Burma this past year pressed the issue of improving child protection and support. In response to this urgent need, Mae Tao Clinic worked side-by-side with many local Burmese organizations to raise emergency funding for migrant schools and children's boarding houses. As part of these efforts, child protection policies and standards of care were collaboratively defined. 2007 also saw the primary and secondary schools supported by MTC merge into one structure under the Children's Development Center School. Land was also purchased for a new building to house the entire school system.

As you can see, 2007 was a busy and successful year for Mae Tao Clinic. Thank you for your continued support, and we look forward to working together towards another productive year.

Sincerely,

Dr. Cynthia Maung
Director

The work of Mae Tao Clinic was recognized this past year with two significant awards to Dr. Cynthia Maung: the World's Children's Prize for the Rights of the Child Honorary Award from the Children's World Association, and the Asia Democracy and Human Rights Award from the Taiwan Foundation for Democracy.

VISION AND MISSION

The Mae Tao Clinic is a health service provider and training center, established to contribute and promote accessible quality health care among displaced Burmese and ethnic people along the Thai-Burmese border. In addition to the comprehensive services provided at its onsite facilities, MTC also promotes general health through partnerships with other community based organizations. We work together to implement and advocate for social and legal services, as well as access to education for people living along the border.

The future vision for MTC is to continue providing quality health and social services. MTC is endeavoring to further promote health education, and improve access to and utilization of its health services. MTC will also advocate for improved access to quality education for migrant children in the Mae Sot area and work to strengthen the child rights and child protection network among local and international human rights institutions. MTC serves a broader role as a community center and center for advocacy with respect to issues related to Burma and the migrant community.

SUMMARY OF ONGOING ACTIVITIES



Photo by Thar Win

HEALTH SERVICES

As in previous years, Mae Tao Clinic saw increasing numbers of visits, caseloads, and inpatient admissions in 2007. The total of 114,842 visits represents a 7% increase from visits in 2006. About half of MTC's patients cross the border from Burma seeking health care. For many patients, the decision to come to MTC from Burma is heavily burdened with security risks and the high cost of transportation. Consequently, the Mae Tao Clinic staff continues to see patients whose illnesses are more serious because of delayed treatment. The need remains great, and thus MTC continues to offer quality health services and health education to its patients.

Total	2005	2006	2007
Visits	98,979	107,137	114,842
Cases	64,552	79,096	81,747
Admissions	8,319	8,876	9,066

Clinical

▪ Adult Medicine

Outpatient – 29,459 cases; common diagnoses: acute respiratory infection, gastritis.

Inpatient – 3,481 cases; common diagnoses: anemia, malaria.

▪ Surgery

9,031 cases; common surgeries: abscesses, minor wounds.

▪ Reproductive Health

Outpatient – 4,545 antenatal care clients; 2,673 postnatal care visits; 6,765 family planning visits.

Inpatient – 2,117 delivery admissions.

Other services provided: neonatal care, post-abortion care, STI treatment, gynecological care.

▪ Child Health:

Outpatient – 12,203 cases; Inpatient – 1,533 cases; common diagnoses: acute respiratory infections, malaria, anemia.

Services provided: immunizations, supplemental feeding, vitamin A supplements, de-worming.

▪ Primary Eye Care and Surgery:

6,202 cases; 1,065 surgeries; 2,098 eyeglasses dispensed.

▪ Prosthetics and Rehabilitation:

186 cases (new and replacement).

▪ Laboratory and Blood Bank:

29,728 slides for malaria testing (5,225 confirmed); 931 tests for voluntary HIV counseling and testing; 1,551 blood donations; 1,303 blood transfusions.

▪ Dental Clinic

3,500 cases.

Referrals

Less than 1% of MTC's cases are referred to Mae Sot Hospital, usually for emergency care or complicated surgical procedures.



Photo by Law Du

Social Services

- Counseling services
- Delivery certificate
- Public relations and information
- Orphan care
- Housing for vulnerable long-term patients
- Funeral services

The Mae Tao Clinic offers a variety of social services. Among the most notable are the delivery certificate and counseling services. A delivery certificate is issued for each baby born at MTC to serve as documentation of birth, since official documentation cannot be obtained from the Burmese or Thai governments. Records of these certificates are kept at the Mae Tao Clinic for verification purposes. The Counseling Center offers individual counseling, an amputees support group, and a group that focuses on relaxation techniques. The Center serves more and more people as patients and MTC staff learn more about the benefits of counseling.

Migrant Outreach Health Services

- School health and research
- Adolescent reproductive health
- HIV/AIDS Peer Education
- Home-based care service for people living with HIV/AIDS

MTC is closely connected to the migrant schools in the border areas and provides a number of outreach health services such as first aid kits, vitamin A supplementation, de-worming, and health information on adolescent reproductive health issues. In addition, MTC promotes HIV/AIDS awareness and prevention, and last year provided home care for 211 HIV/AIDS patients. There is also a monthly support group for people living with HIV/AIDS.

Cross Border Primary Health Care Services

These two clinics, which are administered by MTC, are located within Karen State in Burma. Similar to the situation at MTC, acute respiratory infections, malaria, and anemia are the three most commonly treated illnesses at these clinics.

- **Ler Per Her Clinic:** 5,227 cases in 2007
- **Pha Hite Clinic:** 12,761 cases in 2007

Monitoring and Evaluation

Mae Tao Clinic is committed to maintaining its quality of health services and organizational integrity through various monitoring and evaluation activities. Examples in 2007 include:

- Implementation of infection control protocols for each department
- Departmental medical record reviews
- Real-time health data collection by networking the health information systems of all departments

- Development and consistent use of the Integrated Management of Childhood Illness (IMCI) checklist
- External audits of malaria slides and HIV tests for laboratory quality control
- Development and implementation of policies and procedures for logistics, finance, staff support, and transportation
- Annual external consulting and auditing of MTC's financial records
- Community health assessment for the cross border clinics Ler Per Her and Pha Hite



Ma Myant Win's Story

One day in the Myawwaddy district of Burma, Ma Myant Win was out collecting bamboo shoots with a friend. She stepped on a landmine. Her friend who had been a bit behind her ran back to the village to find help. The people who came to help

gave her some herbal medicine, then carried her in a small motorized vehicle from the forest to the Moei River. They took a boat across and made their way to Mae Sot Hospital. Ma Myant Win arrived at the Hospital at 11:30pm, five hours after she was injured. She was stabilized and her two legs were amputated above the knees. She was then sent to the Mae Tao Clinic where she was fitted for prosthetics for both of her legs and learned to walk again. Although she did not enjoy the process of fitting the prosthetics, she was very grateful to be able to walk around on her new legs without pain.

She has now lived at MTC for seven years. Sometimes you can see her rolling bandages, cleaning, helping to direct patients, or simply chatting with people passing by. She is often playful and smiling, raising the spirits of MTC patients. She says she is grateful to the clinic as it provides her with food, housing, and some pocket money. She does not expect to ever return to Burma again. Her dream is to resettle in a third country, but if that does not happen, she would like to work here at MTC. She feels strong now and is ready to do work. She is interested in becoming a counselor and helping people work through family problems. No matter where life takes her, Ma Myant Win has shown tremendous strength and courage, and is a tribute to those struggling to survive the brutality that so many face in Burma.

HEALTH WORKER TRAINING

MTC serves as a regional training center for community health workers and hosts numerous trainings each year. This is because the Mae Tao Clinic's vision includes not only providing health services but also building the health care capacity of migrant and displaced communities along the Thai-Burmese border. Some trainees obtain employment at MTC but the majority return to their communities in Burma to provide urgently and desperately needed health care. Some trainees return later to MTC for advanced training or continued educational opportunities.

Workshops and Lectures

Numerous workshops and lectures are offered throughout the year at Mae Tao Clinic for the professional development of both the staff and trainees. These sessions cover a variety of topics such as specific clinical areas, basic and advanced computer skills, health information systems, environmental health, human rights, and community management.

In 2007, a number of Mae Tao Clinic staff also attended trainings and partner meetings outside MTC, including those provided by the Thai Ministry of Health, International Rescue Committee, Norwegian Church Aid, and Terre Des Hommes.

Ethnic Diversity of Trainees

Because trainees from ethnic areas often return to those areas to serve their communities, Mae Tao Clinic takes care to ensure the ethnic diversity of its trainees. MTC was proud to host health worker trainees from 11 different ethnic areas of Burma in 2007.



Photo by Myat Soe

Training Courses	Duration (classroom & clinical)	Students
Initial Training		
Nursing Training	6 + 3 months	35
Community Health Worker Training	4 + 6 months	80
Community Health Volunteer Training	3 months	40
Laboratory Training	4 months	12
Prosthetics	1 year	6
Advanced Training		
Health Assistant Training	10 months	45
Emergency Obstetrics Care	8 months	41
Intern Training	9 months	40
Total		299

Naw Htoo's Story

In 1988 when the Burmese military demanded that students shut down the democracy movement or face violence, Naw Htoo, Dr. Cynthia, and twelve others left their village to travel to Thailand. It took ten days to walk through the jungles of Burma before reaching a refugee camp. A few months later in 1989, Naw Htoo, Dr. Cynthia, and four other students founded the Mae Tao Clinic. They provided emergency care mainly for students fleeing the democracy crackdown in Burma.



As Naw Htoo now says with a laugh, "Cynthia told me we would stay in Thailand for six months and then we'd go back home." That was twenty years ago and the three original staff still remaining at MTC have yet to return to their village. Naw Htoo is currently in charge of supervising MTC's food program, which turns out meals for 1,000 to 1,500 people every day. She is also the program manager of the Reproductive Health Outpatient Department. In the evenings, she makes the rounds of all the departments, checking in to see that staffing levels are adequate, helping with emergencies, and most importantly chatting with staff to listen to their issues and offer support.

Even after twenty years, Naw Htoo's first hope is to return to her homeland in Karen State. But without a change in the political and social conditions there, she says Mae Tao Clinic will need to train more staff, develop more skills, and increase its capacity even more. And with her guidance, it will certainly meet that challenge.

INFECTIOUS DISEASE RESPONSE

MALARIA

Of the more than 29,728 slides tested for malaria last year, 5,225 (over 17%) were positive. Clearly, malaria persists as one of the most common illnesses encountered at MTC in both adult and child patients.

Malaria in the Thai-Burma border area is more drug-resistant and difficult to treat compared to other parts of the world where the parasite is endemic. Three of the four species of malaria are prevalent here, and someone can be infected with two or three species at the same time. One of the most prevalent species diagnosed at MTC is *P. falciparum*, which is the most aggressive and lethal type and can cause cerebral malaria. In 2007, over 73% of malaria cases at MTC were of this species.

CHOLERA OUTBREAK AND CONTROL

There was a cholera outbreak in Mae Sot and nearby districts in 2007. Of 101 suspected cholera cases admitted to MTC, 31 cases were confirmed. Nineteen (61%) of these confirmed cases resided in Mae Sot, the others came directly from Burma. A rigorous regimen of chlorination, water quality testing and water tank cleaning was conducted. Health education sessions and pamphlets regarding cholera disease and prevention were given as well.

HIV/AIDS PREVENTION AND CARE

In 2007, 264 new cases of HIV infection were diagnosed at Mae Tao Clinic. The median age of patients testing positive was 29 years old, with approximately equal numbers of males and females. About 55% of those testing positive were patients who identified themselves as living in Burma. HIV prevalence among the antenatal care patients tested has remained stable at around 1.5% in last few years. The need for treatment and long-term comprehensive care of HIV-positive patients has grown cumulatively as more and more patients are diagnosed.

	Tested	Number Positive	Percent Positive
Pregnancy	3,421	53	1.55%
Blood donor	1,551	7	0.45%
Voluntary	931	167	17.9%
Emergency	323	39	12%

Antenatal care patients who test positive for HIV are all referred to the program for preventing maternal to child transmission (PMTCT). In 2007, 21 babies born in 2005 and 2006 who reached one year of age were tested for follow up. All but one tested negative for HIV. An investigation of the

one infant testing positive revealed that the mother tested negative during antenatal care but subsequently after delivery was re-tested and found to be HIV positive.

Peer counselors provide home-based care for HIV positive patients and their families. These counselors live with HIV themselves, and are trained to assess the patients' overall physical condition, provide both medical and non-medical supplies, offer health education, and counsel patients and their families on the spectrum of social, family, and economic issues that they face. The challenges are many: some of the patients live in makeshift housing with no electricity, running water, or sanitary facilities; others live in Burma where carrying supplies to patients risks arrest; and the social stigma and discrimination associated with HIV requires counselors to be careful not to reveal the purpose of their visits to neighbors.

Mae Tao Clinic works collaboratively with the antiretroviral (ARV) migrant health program at Mae Sot Hospital by making referrals, monitoring adherence to treatment, and providing additional services for patients. Of the 41 patients referred to the antiretroviral program in 2007, 12 patients are currently receiving treatment. In two other patients there was one death and one who chose not to continue antiretroviral therapy. For most of the remainder, treatment was not indicated either because their CD4 counts were above the threshold required for initiating antiretroviral therapy, or because of medical conditions that precluded antiretroviral medication. Those ineligible for therapy are asked to return periodically for repeat testing and evaluation.

TUBERCULOSIS ALONG THE BORDER

In 2007, Mae Tao Clinic saw 220 confirmed cases of tuberculosis. One of the most significant changes in tuberculosis treatment that occurred in 2007 was that MTC now has no treatment option for patients from Burma suspected of tuberculosis. Previously, MTC referred out all suspected cases of tuberculosis to other health service partners who confirmed the diagnosis, initiated treatment, and gave antiretroviral therapy for those patients co-infected with HIV. The main concern for cross-border treatment of tuberculosis is that there is currently no means of referral to local health operations for follow up care, to ensure patients complete a full course of therapy. Without adherence to treatment, multi-drug resistance will certainly become an issue. Because health service organizations working within Burma have limited access to populations on the eastern Burma border, and face particularly severe restrictions in Karen areas, this problem is likely to continue until conditions within Burma change considerably.

SERVICE COLLABORATIONS

Mae Tao Clinic is one of the leaders of community-based organizations in regards to capacity building for border area initiatives. As such, the list of service collaborations grows longer each year. This year was particularly eventful with respect to new partnerships, such as the HIV ARV treatment program with Mae Sot Hospital and the Cross-border Emergency Obstetrics Program with Columbia University.

Networking among local organizations is another area in which significant progress was made this past year. A good example of this is the Health Assessment Training for community health workers, which was conducted jointly with the Burma Medical Association, the Back Pack Health Worker Team, the National Health and Education Committee, and the Global Health Access Program. Another new local initiative is the Community Based Organizations Forum for Humanitarian Assistance, through which many organizations in the area come together to establish shared principles for humanitarian assistance.

Another program that gained momentum this year was the Chiang Mai referral program for children who require complex surgery. Many of these children require cardiac surgery for congenital heart diseases. This program is in partnership with the Burma Children's Medical Fund, which acquired much higher funding for this program this past year, allowing more children to be referred. About 130 children have so far been treated in Chiang Mai for conditions currently untreatable at Mae Tao Clinic.

- **Cross Border Health Services** with the Back Pack Health Worker Team and the Burma Medical Association
- **Preventing Mother-to-Child Transmission** with Mae Sot Hospital
- **HIV Anti-Retroviral Migrant Health Project** with Mae Sot Hospital
- **Cross-Border Emergency Obstetric Training** with Columbia University and Burma Medical Association on the RAISE initiative
- **Delivery Certificate** with the Committee for the Protection and Promotion of Child Rights
- **Referrals for Children Requiring Complex Surgery** with Burma Children's Medical Fund
- **Eye Surgery Program** with Karen Aid
- **Prosthetics Workshop** with Clear Path International and Help Without Frontiers
- **Homes for Abandoned Children** with Social Action for Women
- **School Health** with Burmese Migrant Workers Education Committee
- **Adolescent Reproductive Health** with Burmese Migrant Workers Education Committee and the Adolescent Reproductive Health Network
- **Child Protection Research** with the Committee for the Protection and Promotion of Child Rights
- **Community Based Organizations Forum for Humanitarian Assistance:** MTC in conjunction with a number of CBOs is working to draft principles for humanitarian assistance on the border. The Finance Network within this group is working to define standard finance policies for organizations working in the area.



Khwar Nyo Thin's Story

At the age of 2, Khwar Nyo Thin was diagnosed with Tetralogy of Fallot (TOF), a congenital heart malformation that causes children to grow poorly, tire easily, and die prematurely if the defects are not corrected. When she first came to Mae Tao Clinic, she was very tiny (weighed only 1.4kg at birth) and could not walk at all, but was very bright and talked a lot. Like so many families who come from Burma, her parents have a difficult time making ends meet. A serious illness in the family is an incredible burden on their resources. In 2004, she underwent a surgical procedure called "the Blalock-Taussig shunt," a temporary measure that allowed her to grow big enough to withstand the major cardiac surgery she needs to survive.

In 2007 at the age of 6, Khwar Nyo Thin had her second surgery through the support of the Burma Children's Medical Fund. She is now growing stronger each day. She has even caught up to her twin sister's size, and loves to play with other children, which she was unable to do prior to the second surgery. For the future, she dreams of becoming a doctor and joining the work of Mae Tao Clinic. She hopes to attend the school run by Mae Tao Clinic, because they teach Thai and English. Right now, she really likes helping her mother in the house. "I'm getting water for mother and help her with making dinner and serving it to our family," she says. Her family is very happy to see her so active, lively, and healthy.

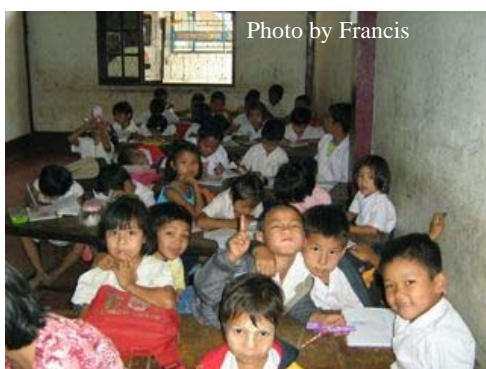


CHILD PROTECTION PROGRAM

2007 was a challenging year for the Child Protection Program. More and more unaccompanied children came across the border seeking care. By June 2007, it was apparent that all the boarding houses around Mae Sot, within refugee camps, and in IDP areas did not have enough resources to support and educate the increasing numbers of children. An emergency appeal was put together in collaboration with many local CBOs to raise funding in response to this urgent need. Fortunately, the emergency appeal has received a generous response from the donor community, but much remains to be done to support these boarding houses and schools with long-term, sustainable funding sources.

In the 2007-2008 academic year, the Children's Development Center (CDC) served 762 students and housed 281 students, representing about a 20% increase in enrollment. In addition, the Bamboo Children's Home in the Umphiam Mai refugee camp cared for 146 children, a 17% increase from 2006. Through emergency appeal efforts, Mae Tao Clinic also supported food costs for approximately 1,600 children in the IDP areas within Burma, in the refugee camps, and in the migrant communities around Mae Sot. The urgent need to care for unaccompanied children this past year stimulated MTC to work with local organizations to establish minimum standards of care and other child rights and protection policies.

Dr. Cynthia's nomination for the World Children's Prize for the Rights of the Child served as a catalyst for children at the CDC school and numerous other local migrant schools to participate in the voting process for the prize. Many children expressed their delight at being able to vote freely for the first time in their lives. Their participation in the annual vote is expected to continue for many years. Other new initiatives at the CDC school included a weekly prayer session on Sundays for peace and political change following the protest of Buddhist monks in Burma, monthly efforts by the entire student population to pick up trash on and around the school grounds, and data collection for research on child protection issues.



Saw Doh Moo's Story

Saw Doh Moo is a 17-year-old student from a small village in Pa Pon District of Karen State in Burma. He describes how every summer, soldiers would come to his village, burning down the homes and destroying their crops. The soldiers would fight with the local people and kill people in his village.

Because of this violence, no teachers were willing to come to his village, so education was not available. At age 8, he left his family and fled to Thailand to stay at Mae La Ooh refugee camp in order to receive an education. This past year, Saw Doh Moo and his brother traveled with a backpack medic who brought them to the CDC school. He is grateful to the CDC school for his education and finds the living conditions much better than the camp. He is happy that he can use technology such as computers at the school, noting that such things were not accessible in Mae La Ooh camp.

Saw Doh Moo really enjoys studying English and mathematics. When asked how long he intended to stay in school, he said that depends on the school. He will finish high school and if they offer college classes he will stay. When he finishes school, he wants to become a leader and teacher. He does not want to become a soldier. He would like to help raise the standard of living and bring more knowledge to his people. For his village, he hopes to see a day when there is no more fighting.

CHILDREN'S DEVELOPMENT CENTER SCHOOL COMES UNDER ONE STRUCTURE

In October of 2007, the Children's Development Center nursery and primary programs combined with the Mae Tao Clinic High School to form a comprehensive educational system under one administrative structure. Although the schools are currently still located in separate compounds due to space issues, construction will soon start for the new building on the land purchased last year by Child's Dream. Once built, these new grounds will house the entire school system from day care to grade 12.

The second term of 2007 also saw the implementation of a new curriculum incorporating the Thai Ministry of Education program for English, math, Thai, and science. Grade 11 was offered for the first time, with a curriculum divided into two tracks, Art and Science, from which students could choose. Grade 12 will be offered for the first time this coming academic year.

MAE TAO CLINIC STAFF

	Male	Female	Total
Clinical	97	169	266
Administration/Logistics	81	26	107
Outreach Services	29	18	47
Training/Library	12	2	14
Child Protection Services	43	53	96
Total	262	268	530

Program Managers in 2007

Clinical Services

- Adult Medical In-Patient - Saw Muni
- Adult Medical Out-Patient - Saw Kyaw Kyaw
- Trauma Surgery - Saw Eh D'Mwee
- Child In-Patient Services - Naw Mu Dan
- Child Out-Patient Services - Naw May Soe
- Reproductive Health In-Patient
 - Naw Sophia
- Reproductive Health Out-Patient
 - Naw Htoo
- HIV Prevention and Care - Naw Shine
- Eye Care - Naw Tamla Wah
- Dental Care - Su Oun
- Laboratory - Saw Hsa K'Paw
- Pharmacy - Naw Klo
- Prosthetics - Saw Maw Ker
- Counseling Center - Saw Than Lwin
- Referral Service - Saw Tin Shwe
- Registration - Saw Moe Oo
- Library - Hla Thein
- Publications - Saw Lin Kyaw
- Health Information System - Saw Lin Yone
- Public Relations and Social Services
 - Saw Tin Shwe
- Pha Hite Clinic
 - Saw Kyi Soe
 - Naw Pale Paw
- Ler Per Her Clinic
 - Saw Ah Nge

Training

- Nursing Training - Eh Eh
- Internship Program - Saw Hser Nay Blute
- Basic Medical Training - Naw Eh Thwa

Office

- Logistics - Aung Phe
- Water/Sanitation - Tin Htun
- Food - Naw Htoo
- Transport - Saw Sunny
- Office Administration - Saw Win Tin
- Finance Manager - Lisa Houston
- Accounts Manager - Naw La La

Outreach

- CDC - Mahn Shwe Hnin
- School Health Project
 - Saw Nay Oo
 - Saw Thar Win
- Bamboo Children's Home - Saw Kywe Poe

MTC was supported by the following volunteers:

- Yumi Aikawa
- Thomas Buckley
- Lynda Campbell
- Patrick Connaughton
- Susie Costello
- Lobke Dijkstra
- Dr. David Downham
- Barbara Eagles
- Lisa Houston
- Aiko Kaji
- Jolene Lansdowne
- Daniel Makover
- Dr. Thi Ha Maung
- Autumn Mochinski
- Dr. Niels Mosbech
- Duane Nelson
- Jess Nguyen
- Dr. Simon Pollett
- Kathy Ragless
- Neeltje Rosmalen
- Sandy Sandell
- Kerry Shannon
- Dr. Terry Smith
- Pattinee Suanprasert
- Akiko Tanaka
- Tomoaki Taoka
- Yoshiko Taoka
- Annie Thacker
- Sofia Orasa Thongmaneerat
- Dr. Win Myint Than
- Kanchana Thornton

MTC hosted 46 medical students from the following institutions:

University of Adelaide
 Albany Medical College
 Albert Einstein College of Medicine, Yeshiva Univ.
 University of Birmingham
 University of Copenhagen
 University of Edinburgh
 Flinders University
 Guy's, King's, and St Thomas' School of Medicine
 University of Hamburg
 Hull York Medical School
 Johns Hopkins University
 Kansai Medical University
 The Keck School of Medicine of USC
 King's College London
 University of Liverpool
 University of Manchester
 McGill University
 University of Melbourne
 University of Michigan Medical School
 University of Nottingham
 University of Otago
 University of Pennsylvania Health System
 Queen Mary, University of London
 University of Queensland
 University of South Australia
 St George's Hospital
 University of Tasmania

FINANCIAL INFORMATION

Income in Thai Baht

Grants and Donations >B10,000	73,928,552
Donations <B10,000	145,096
Client Contributions	876,124
Bank Interest	16,469
Miscellaneous Income	7,964

TOTAL INCOME 74,974,206

Disbursements in Thai Baht

Health Services

Medicine and medical supplies	7,247,393
MSH Referral and Testing	9,234,818
Patient Social Support	5,658,544
Health Education & Outreach Services	1,493,411
Health Information & Quality Services	454,548
Health Worker Capacity Building	3,235,709
Facilities Improvement	463,159
Logistics	6,788,525
Staff Support	17,430,242
Technical Support	1,409,100
Administration	1,749,905
IDP Clinics	3,870,421
Post Abortion Research	700,000
Land Purchase	750,000
Advance write off	7,000

Child Protection Services

Children's Development Center	4,947,825
Bamboo Children's Home	800,706

Support to Partner Organizations

Health Sector

Back Pack Health Worker Team	400,000
Burma Medical Association	300,000
Nightingale	115,235
Thay Baw Boe Clinic	277,289

Child Protection Sector

Burmese Migrant Worker Education Committee	578,230
Committee for the Protection and Promotion of Child Rights	344,272
Emergency Fund for Schools	1,830,402
Karen Youth Organization	23,650
Mae Tao High School	1,197,986
General Donations	5,000

TOTAL DISBURSEMENTS 71,313,370

Editorial contributions to this Annual Report by:

Atsuko Fitzgerald

Tao Kwan-Gett

Kerry Shannon

Dr. Terrence Smith

*Special thanks to Susan and Nathaniel Tileston,
and their MTC photography students.*

MTC FUNDERS IN 2007

Over US\$ 100,000

- International Rescue Committee/USAID (USA)
- Scott and Tiffany McDonald (USA)
- Dietrich Botstiber Foundation (USA)
- Burma Relief Centre/Interpares/CIDA
- Thailand Burma Border Consortium (Thailand)
- Columbia University, RAISE Project (USA)
- ICCO (Netherlands)
- Norwegian Church Aid (Norway)

US\$ 50-100,000

- Stichting Vluchteling (Netherlands)
- International Committee of the Red Cross (Switzerland)
- CUSO/Pure and Co (Canada)
- Rotary Club Eastern Seaboard (Thailand)
- Safe Abortion Action Fund (UK)
- Terre Des Hommes (Netherlands)
- SOLCO (Denmark)
- Help Without Frontiers (Italy)

US\$10-50,000

- Family Health International (USA)
- World's Children's Prize for the Rights of the Child (Sweden)
- Daw Suu Foundation
- Karen Refugee Camp Women's Development Group (Scotland)
- Clear Path International (USA)
- Children's World (UK)
- Lonely Planet Australia
- Burma Medical Association North America (USA)
- Medical Mercy Canada (Canada)
- Jun Kobayashi
- Ramon Magsaysay Award Foundation (Philippines)
- BRC/Just Aid Foundation (Canada)
- Paula Bock and Tao Kwan-Gett

US\$1-10,000

- MOM Project (BMA/GHAP)
- Planet Care/GHAP (USA)
- The Brackett Foundation (USA)
- Tan Geok Hwa
- John Hussman Foundation (Thailand)
- Burmese organizations in Japan
- Julian
- University of Washington (USA)
- Maltesers International (Germany/Thailand)
- Australia Burma Friendship Association
- Shannon and Sebastien Sirois

Less than US \$1,000

The MTC is grateful for the many donations that were made in this category which are too numerous to list in this report.

DONATIONS IN KIND

The following organizations and individuals provided donations of equipment, supplies or human resources to MTC:

- AA Bulapa Company
- AA Company and Khun Putsapa
- Action Medeor
- Ami Zarchi
- Australian Volunteers International
- Beatemoore
- Bed Net Limited
- Ben Lee
- Boonyisa Boonyakiaibutr
- Bucheon City Pharmacists Committee and Seo Yong Seok
- Burma Border Projects
- Burma Children's Fund
- Burmese Relief Centre Japan
- Busara Makomol
- Calgary University
- Child Messenger
- Child's Dream
- Colgate - Palmolive Company
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- Darson Marketing
- Dr E Mann
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- Dumex Company
- FCI Company
- Foam;Chiao Fu, Fabric and Production; Tel-Dan
- Geraldine Pachis
- Help Without Frontiers
- Internatioal Committee for the Red Cross
- International Rescue Committee
- K Kuk
- Kanna
- Karen Aid
- Khun Akechai
- Khun Anna
- Khun Janjira Thonglairuam



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- Khun Mi
- Khun Nung
- Khun Pam and Anna
- Khun Prateep
- Khun Somchai
- Khun Tom
- Khun Vinai
- KIRF and Dr Phil Kroll
- KN Company
- Larry Mueller
- Links Australia
- Mae Sot Hospital
- Medicins Sans Frontiers
- Mitwelt Netzwerk
- Mr. Nuch
- Mr. Manmohan Singh Thakral
- MY STORY Photo Project
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- Operation Smile
- Pai/Lin
- Pam
- Payathai Company
- Peter Federsen
- Pfizer Global Health Fellows
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- SIT International Company
- Songsati Company
- Soungsabun Company
- Steve Blum and many Friends
- Suncarector Company
- Taipei Overseas Peace Services
- Tel Den
- Tesco Lotus
- ThaiTha Sung
- Thatapon Polyester Company
- Thonburi Hospital
- United Global Agency (Thailand)
- UN High Comission for Refugees
- University of Queensland Medical School