



Surmang Foundation

2011

Annual Report



[www.Surmang.org](http://www.Surmang.org)

# Annual Report: 2011

## Overview.

It is very difficult to communicate the kinds of geographic, language and cultural challenges that we work with. Even the advent of air transport in Yushu doesn't mitigate that fact. When I left Surmang in late September, it was 8:30 in the morning. When I arrived at Beijing it was 1:30 the next morning. It is a shorter ride from LA to Beijing than from Yushu.

Generally in 2011 we continued to go about our business operating a remote/high performance clinic and CHW public health outreach projects. But there was a twist. Unlike previous years, 2011's activities were framed by strategic objectives defined in our government partnership --because of the Boston Consulting Group (BCG) Strategic Plan. It was not just a matter of getting doctors or MPHs to our site, it was a matter of looking at our work so that its successes could be exported, where appropriate, to the 4 other clinics we are now partnered with. So our doctor training became prototype doctor training; our CHW training became more of a prototype for Village doctor training in the four townships we are partnered with.

In addition we were lucky to get the hands-on participation of very high-level MD/PH experts such as Ray Yip, Amy Levi, Dawn Factor, Mary Wellhoner, Mariette Wiebenga, Karen Deutsch, Tim and Cat Silbaugh. Joining us from the business community were John Holden of Hill & Knowlton, Jim Zimmerman of Sheppard Mullin, Rachel Lee of BCG, Ed Sun of Milbank, Bill Valentino of Beijing City University, and Julie Hu, Nike. So we expanded our connection to stakeholders, both in the government, PH profession, and business community.



## What we tried to achieve.

### General:

- *continued support and expanded capacity of clinic and clinic doctors*
- *continued input and training of CHWs.*
- *continued and expanded capacity of CHWs*
- Strategic: a shift from training of Clinic docs and CHWs to prototype training of docs and CHWs to use across our 4 township partner clinics
- Including broad sectors of stakeholders from public and government



### How we went about it.

- Treating about 1,000 patients per month for free, no questions asked
- Maintaining low-cost clinic services (about \$7/patient visit vs. \$35 for government township clinics).
- Maintenance of Clinic: Repair of Clinic roof and Clinic solar electrical system
- Gathering information about the catchment from BCG and summarized in their Strategic Report
- Continued CHW training focusing on maternal risk factors, prenatal counseling, delivery
- Gathering information on needs and opportunities for our partnership from the on-site work at Xiewu Township Clinic by Ray Yip and Dawn Factor.
- Gathering 80 people for China's first *Rural Health Festival*
- Using the results and recommendations of the Festival to focus on *mobilizing community public health* through CHW and Village doctor training.
- Changing the training of our Clinic docs from pure primary care to managing training of docs (Phuntsok) to managing the training of CHWs (Drogha)
- Hiring the retired Yushu Director of Public Health to manage Village doctor and the Xiewu Clinic training and Surmang prototype implementation.

## History of Success.

- Generally, advancing the legitimacy and respect among the stakeholders: patients, CHWs, doctors (our own & at Xiewu), government buy-in (through open-ended participation in transparent process and analysis.)
- 1000 patient visits/month at Surmang Clinic
- High number of CHW (home) deliveries: 126
- Low infant mortality 9.8% vs. 16% for hospital deliveries
- Low maternal mortality --0%
- Providing training at the Xiewu Clinic for clinic doctors and village doctors.



We could not do this without your help. Your share of support is your share in our success story. Please contact me so that we can get your input and advice on how we can be more successful, and how we can work together to attract wider support.

best wishes for 2012,

*Lee*