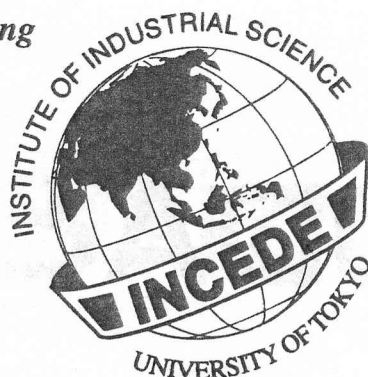


# INCEDE NEWSLETTER

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## AMDA - What do you know about it ?-

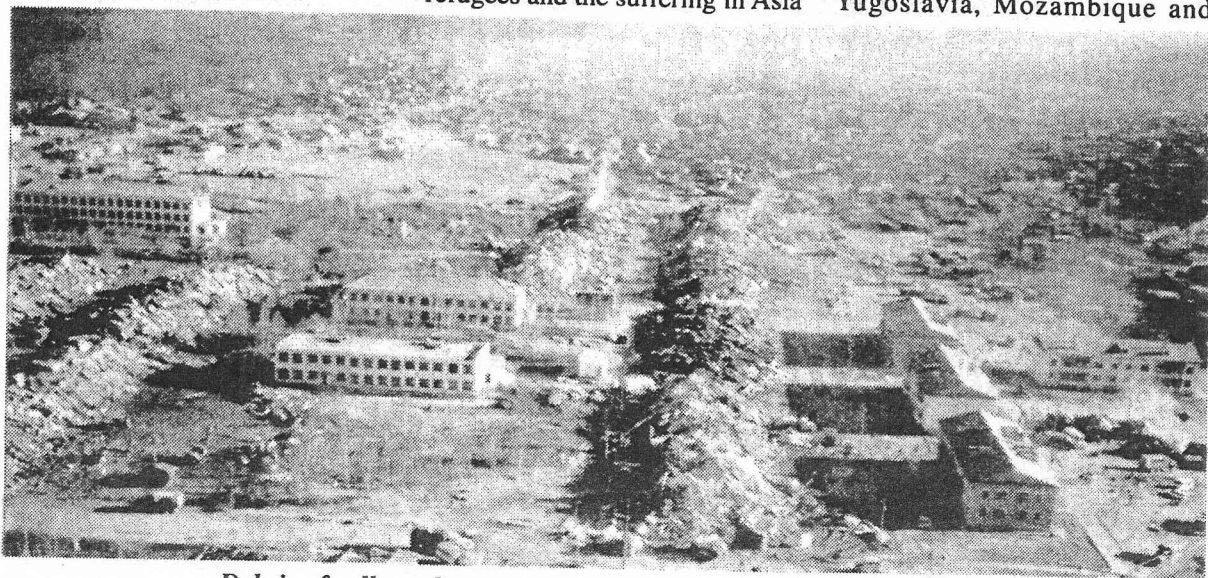
The Association of Medical Doctors of Asia (AMDA) is a medical NGO working for improvement in health and related areas in Asian and African local communities. AMDA was first conceived when a Japanese doctor and two medical students rushed to Thailand in 1979 with the intention of extending a helping hand to Cambodian refugees evacuated from the civil war. In spite of their good will, they found themselves unable to do anything. The helplessness they then experienced became the motive to establish AMDA in 1984.

The motto of AMDA is "Better medicine for better future", which should be realized through mutual understanding, assistance and well being. The association is based in Okayama city in western Japan and has 900 members in 15 Asian countries, of which 700 are in Japan. AMDA projects include rendering humanitarian assistance to victims of natural disasters and to refugees of wars and civil strife.

AMDA established the Asian Multinational Medical Mission (AMMM) in May 1993 to help refugees and the suffering in Asia

and Africa. When an emergency occurs, a group of doctors from AMDA country chapters is formed and sent to the site. Member doctors have multilingual, multi-religious, and multi-cultural backgrounds. Their professional ethics and the requirement for humanitarian assistance activities take precedence over the inherent diversity among themselves and their patients.

At present, such groups are carrying out medical relief action for refugees in Somalia, former Yugoslavia, Mozambique and



*Debris of collapsed structures due to the 1995 Sakhalin earthquake  
(Courtesy of Dr. J. M. Eisenberg, Russian National Delegate to IAEE)*

Rwanda as well as in other countries.

AMDA also gives medical advice to foreign residents in Japan. There are about 1.28 million registered foreign residents in Japan. When illegal residents are added, the number exceeds 1.5 million. Medical care for these people has now become an important issue in the general medical service of local communities. The AMDA International Medical Information Center, established in Tokyo in April 1991, performs telephone consultation for foreigners in Tokyo concerning the Japanese health care system. The center provides medical information in eight different languages, and it receives over 200 calls monthly.

### **AMDA's Medical Mission to Sakhalin**

On May 28, 1995, at 01:03 local time (GMT 13:03, May 27), an earthquake of M7.6 occurred in the northern part of Sakhalin island, Russia. More than 2,000 casualties were reported.

AMDA immediately responded to the disaster and sent a medical mission on May 29, the day following the earthquake. This first team was dispatched by a chartered small aeroplane from Okayama airport with 80kg of emergency medical supplies.

The first mission visited Neftegorsk, the most severely damaged town, and Ocha, the central city of Northern Sakhalin. They also observed the regional hospital of Yuzhno-Sakhalinsk to which many severely injured patients were transferred.

Rescue and relief activities by Russian government were going well, but the international support was necessary for the earthquake victims. Due to the economical crisis in Russia, the amount of medicine and medical supplies were insufficient to cover up the massive medical demand from the victims.

Based on the report of the first

A similar office was also opened in Osaka in 1993.

Today's society, both domestic and international, is confronted with a difficult problem of "How to make a diversity of values coexist." A variety of values may coexist only when people try to cooperate to reach a common goal. AMDA is a proactive NGO that is undertaking to realize it.

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mission, the second medical mission was organized and departed Okayama on June 2. Several Japanese NGOs collaborated with the World NGO Network, which had been in Kobe to help the sufferers of the Great Hanshin earthquake, in the relief activities for the Sakhalin earthquake initiated by AMDA.

Eight personnel flew by a Russian aeroplane with 13 tons of medicine and relief materials (shelter, blankets, food, heaters, etc.). In the second mission, emphasis was given on the distribution of relief materials and medical supplies since it had been already known from the reconnaissance of the first mission that there were sufficient medical personnel and that the crisis had been well managed by the Russian govern-

### **ACTIVITIES OF AMDA (1988-1995)**

*1988: Travelling examination project for doctorless regions of Karnataka, India.*

*1991: Relief of Myanmar refugees in Bangladesh, Kurdish refugees of the Gulf War and those suffering from the eruption of Mt. Pinatubo; Regional health and medical project for a rural village in Nepal.*

*1992: Relief of Tigray State refugees in Ethiopia, Bhutan refugees in Nepal and Cambodian returnees.*

*1993: Relief of Somali refugees, flood victims in Nepal and Bangladesh, and earthquake victims in western India.*

*1994: Projects for earthquake victims in southern Sumatra, Indonesia, Mozambique returnees, and Rwandan refugees; Project to support the restoration of mental disease facilities at Sihanouk Hospital, Cambodia; Health promotion project for mothers and children in Tarlac State, the Philippines; International conference of local NGOs, "94 Okayama NGO Summit."*

*1995: Projects for earthquake victims in Hyogo, western Japan, and displaced people in Chechnya; Regional medical project for Zambia.*

ment. Distribution of the relief material was performed by the State government of Sakhalin.

The concept of the emergency assistance by NGO was initially not well understood by the Russian people, because such relief activities in Russia had usually been done in the public sector. After the aims and activities of the AMDA's mission were realized, however, its relief work was greatly appreciated. The Friendship Association of Japan and Sakhalin much contributed with their logistics and administrative support in AMDA's activities in Sakhalin.

*(Hideki Yamamoto, AMDA)*