Tromsoe Mine Victim Resource Center

University of Tromsoe, NORWAY
- in collaboration with WHO
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www.traumacare.no
WHERE DO WE WORK?

- Battambang, Cambodia
- Liberated Karen State, Burma
- Kurdistan, Northern Iraq
- Eylam, Iran
- Tromsoe Mine Victim Resource Center
Four areas for assistance:
Standing Committee 2001-2002

• emergency care and continuing medical care
• rehabilitation, prosthetics and assistive devices
• employment and socio-economic reintegration
• legislation and national planning
What have we done?
Emergency care

140 advanced medics

3000 village first responders
Results so far
Emergency care

Mortality

Teaching aids
CD, illustrations
Video, Animal training

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Four areas for assistance:

✓ emergency care and continuing medical care
  • rehabilitation, prosthetics and assistive devices
  • employment and socio-economic reintegration
  • legislation and national planning
Employment and socio-economic reintegration

- Persisting pain
- Lack of social contact
- Loss of family income
- Demand for action to support victims
Employment and socio-economic reintegration

• Systematic review:

Chronic pain in land mine accident survivors in Cambodia and Kurdistan

Hans Husum, Kirsten Resell, Gyri Vorren, Yang Van Heng, Mudhafar Murad, Mads Gilbert, Torben Wisborg

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"Trauma Care Foundation, House 610, Romchek 4 Village, Battambang, Cambodia

"Trauma Care Foundation, Suleimaniah, Northern Iraq, Iraq
Employment and socio-economic reintegration

• No relation between chronic pain and:
  – pre-injury trauma exposure
  – severity
  – quality of care

• Chronic pain related to:

  **Loss of income**

  Nevertheless, the study demonstrates that the real end point for quality control in land mine victim assistance is not the time of hospital discharge. The end point is the poor peasant village, months and years after the injury. Studies of long-term effects of land mines and mine accidents on the local community will be necessary in order to address the problem of chronic pain in mine accident survivors.
Implications for our further work

- Community based rehabilitation:
  - in the village
  - by villagers and trained personnel
Formation of self-help groups

A simple form of micro-credit

• Interest-free loans
  – goats, chicken
  – money (less than 300 US $)
• Under local control
• Follow-up (2 yrs)
  – significantly reduced pain
  – dignity and self-esteem
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