跨国合作把慈怀疗护带进穷乡僻壤

Bringing palliative care to developing countries through the multi-region Lien Collaborative for Palliative Care Programme

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志愿医生(右二)到孟加拉教导当地医疗人员慈怀疗护技巧。(亚太慈怀疗护网络提供) Professor Yoshiyuki Kizawa, Doctor (2<sup>nd</sup> from right) visited Bangladesh to teach local medical professionals palliative care. (Source: Asia Pacific Hospice Palliative Care Network –APHN)

2018年,范锦棠到孟加拉贫民窟为当地人治病,让他印象深刻的是,病患家门口的通道窄得连担架都过不去。"病患住在狭小且闷热的陋室,屋舍又排得密密麻麻,住在里头的,得走过好一段泥巴路才能到达停在大路的救护车。之后还得开车约一小时,才能到最近的医院。"当时的经历让他坚信,每个人都有看病的权利.

Dr Gilbert Fan recalled visiting a patient's home in the slums in Bangladesh back in 2018. The walkway was so narrow that even a stretcher was unable to get through. He vividly remembered the poor living conditions of the closely packed huts, the muddy road that led to the main road, and a 1-hour drive just to reach the nearest hospital. This experience further strengthened his belief that all patients should have equal access to healthcare.

教导当地医护及社工 如何与病患家属沟通

<u>Training the local healthcare and social workers on how to communicate with patient's family members</u>

新加坡国立癌症中心社会心理服务高级医务社会工作者范锦棠医生参加连氏慈怀合作项目,跟随一组医生和护士前往孟加拉,主要教导当地医疗人员及社工如何与病患者沟通,助病患和他们的家人了解并接受病情。范锦棠也随计划去过缅甸。

Dr Gilbert Fan, Master Medical Social Worker at the Department of Psychosocial Oncology, National Cancer Centre Singapore, was part of the faculty team which includes doctors and nurses. His main role was to teach the local medical professionals and social workers on patient communication skills, which includes topics such as helping the patients and their families to cope and accept their diagnosis. Besides being on the Bangladesh faculty team, he had also been to Sri Lanka to teach under the Lien Collaborative for Palliative Care programme (Lien Collab).

连氏基金与亚太慈怀疗护网络(Asia Pacific Hospice Palliative Care Network,简称 APHN)在 2013 年携手创立连氏慈怀合作项目,旨在与私人、机构及基金会合作,推进南亚和东南亚的慈怀疗护工作。

The Lien Foundation and the Asia Pacific Hospice Palliative Care Network (APHN) partnered to start the Lien Collab in 2013. This programme aimed at capacity building in South Asia and Southeast Asia through bringing together like-minded individuals, corporations, and the Foundation for a common cause.

在不丹、孟加拉及老挝的山区或贫民窟,重病患者为了确诊或者接受疼痛管理,都得翻山越岭。

Patients with serious illnesses living in the slums or mountainous areas in Bhutan, Bangladesh, and Laos had to travel great distances to get themselves properly diagnosed or to receive pain treatment.

全球过半的慈怀疗护需求位于亚洲,每年估计有2400万人需要这类医疗服务。

More than half of the world's palliative care needs reside in Asia, with an estimated 2.4 million people needing supportive and palliative care services yearly.

连氏慈怀合作项目召集来自不同国家的医生、护士及社工志愿者,出动他们到少有或没有慈怀疗护的国家,观察并向当地的医生及社工传授慈怀疗护知识,也与相关政策制定者探讨如何改善当地的止痛药物管制系统等,协助各国建立起自己的慈怀疗护能力。

The Lien Collab gathered volunteer doctors, nurses, and social workers from various regions as faculty to regions that have little or no palliative care to do bedside teaching and impart palliative care knowledge. The faculty leads also work with the local champions and policymakers in areas such as opioid medication access, building blueprints for a system to use controlled pain medications such as opioids, and supporting them in starting palliative care services.

项目目前有超过87名志愿者,来自新加坡、英国、印度、澳大利亚、加拿大、日本、马来西亚、中国、香港和台湾。他们已培训超过480名医疗人员,来自150个机构,所帮助的国家包括孟加拉、缅甸、斯里兰卡、印度、不丹,以及中国。

Currently, the programme has more than 87 volunteers from regions such as Singapore, England, India, Australia, Canada, Japan, Malaysia, China, Hong Kong, and Taiwan. They had trained more than 480 medical care workers from 150 institutions across Bangladesh, Myanmar, Sri Lanka, India, Bhutan, and China.

医疗护理融入当地文化 Integration of care model into the local culture

想提升各国的慈怀疗护水平,志愿医疗团队必须考虑当地社区是否愿意配合,其中有文化磨合的 过程。

When building capacity, the volunteer faculty team also has to consider the acceptance of the locals to this new model of care for the seriously ill and dying, which includes being culturally sensitive.

在本地国立癌症中心支援及慈怀疗护部担任顾问的临床助理教授周雪莲 2018 年加入项目,两次到访不丹。Dr Jamie Zhou, Consultant at the Division of Supportive and Palliative Care, National Cancer Centre Singapore, joined as Lien Collab faculty in 2018 and had since travelled twice to Bhutan.

她除了向当地人传授疗护知识,也学习到他们如何把文化纳入护理方式,像是与宗教或精神领袖合作,让病患及家属更易接受。While sharing her clinical knowledge, she also learned how the locals integrated their culture into care, such as engaging religious or spiritual leaders as partners in care to make this new concept of care more palatable to the patients and their family members.

"不丹人一般生病时会先咨询宗教领袖(khenpo)才寻求医疗帮助,因此当地的医疗决定都是在充分考虑了患者的信仰后才做出,对于患者的精神层次需求非常敏感。"

"In Bhutan, for this group of patients who are seriously ill, they would first consult a religious leader (khenpo) before going to seek any medical help. As such, any palliative care plan is closely entwined to that of a patient's religious belief. The spiritual aspects of the patient become the key need of patients in such cases."

志愿医疗团队在城市内提供护理的方式也不一定完全适合山区等偏僻地区,不丹医疗人员就会灵活变通,如积极设立流动医疗小组,提供疫苗接种及体检等服务。

Care provided in the urban areas might also not be suitable for the mountainous rural areas in Bhutan. Hence, the local care team would come up with innovative models of care, such as setting up mobile clinics to provide vaccination and routine medical check-up services.

曾几次在其他机构的安排下到访越南教导社会心理学的范锦棠,发现越南人不擅长表达情绪,因此他会和当地医疗人员沟通,一起探讨如何更有效地接近重病患者与他们的家属,助他们勇敢打开心房,找到内心平静。

Dr Gilbert Fan, who had been to Vietnam to teach at the invitation of other organisations, realised that in Vietnamese culture, people are less likely to express their emotions outwardly. Hence, he would discuss with the local medical team how better build trust with palliative care patients and their family members to help them be more open to talking about their emotional struggles and find that reconciliation with their inner self.

"每次的出国机会不只是我们为他们提供帮助,也是一种文化交流的机会,可让我们相互学习及 大开眼界。"

"Every opportunity I get to go overseas as a faculty, I see it as a cultural exchange, where were can learn from each other and also broaden my horizon. It is not just about us going there to help them."

靠当地医疗人员对孟加拉贫民窟的熟悉度且配合意愿,范锦棠与队员才有机会亲临现场,让他们 发掘更多给予护理的方式。当地人在逆境中的乐观态度及亲切感也深深打动了范锦棠。 It would not have been possible to explore other models of care without the help and support of the local medical team, as they are most familiar with the situation at the slums and could offer support to his team during their visit to the patient's home. Gilbert was deeply touched by the positivity and friendliness of the patients even in their adversity.

## 疫情下以线上方式提供培训 Providing online training during the pandemic

鉴于冠病疫情,志愿团队自去年已无法出国亲自走访并了解当地情况,但团队仍通过线上方式与当地医疗人员沟通和进行慈怀疗护培训。

During the COVID-19 pandemic, the volunteer faculty team was unable to travel on-site since last year. But, the team continued to provide palliative care training using an online platform and support the local palliative care teams through various online channels. The volunteer faculty team did all of this while battling with the pandemic in their own backyard as frontline healthcare workers in their own regions.

周雪莲指出,比起亲自登门拜访与病患面对面接触,视频通讯等远程方式的体验非常不同,包括人与人之间能进行的互动有限,以及志愿者也较难在线上进行示范。

Dr Jamie Zhou pointed out that it is a different experience teaching online (such as via video conferencing) compared to bedside teaching where they can meet the patients face to face at their homes. Even with telemedicine, the faculty are still unable to connect readily with the patients and it was also difficult to demonstrate to the local medical team's certain clinical procedures.

"能亲临病患生活的地方,更加了解他们,当然有助于提供慈怀疗护。不过,视频通讯也能让当 地医疗人员更独立,有更多机会自行应用所学到的沟通等技巧照料病患。"

"To be able to be present in patient's living environment can help the volunteer faculty understand them better. Clinical bedside teaching definitely helps to show palliative care in action. However, online teaching also enabled the local medical team to be more independent as they have more chances to practice what they learn, such as communication skills, in patient care."

面对疫情的反复,当地医疗人员难以每月进行视讯,志愿团队不时会通过聊天群组查看学员们的情况,一起讨论所遇到的复杂病例,从而建立起跨国友情。

In view of the uncertainties due to the pandemic, it was difficult for the local medical teams to join the coordinated video conference monthly. Hence, the volunteer faculty would supplement the teaching with online group chats. This channel allowed them to get regular updates on the local medical team's progress, discuss any complex cases and also build cross-border friendships.

志愿团队也针对印度的疫情局势提供建议,包括照料重症病患的步骤,尤其当医疗人员处理加护病房病患时所遇到的问题。

The volunteer faculty team also provided suggestions to the local medical teams on how to care for their patients during the period where India was badly hit by the pandemic wave, including caring for patients in the ICU, such as clinical protocols and guides.

项目将推展至更多发展中国家. Expanding the Lien Collab to other developing countries

连氏慈怀合作项目已计划下来几年继续在印度和中国努力推广慈怀疗护,并且把项目扩展到东帝汶和老挝等其他发展中国家。

The Lien Collab has plans to continue training in India and China in the coming years and are looking to expand its programme to developing areas like East Timor and Laos.

亚太慈怀疗护网络执行总监严常锋也是连氏慈怀合作项目的项目总监。他透露,项目在选择到哪个国家推广慈怀疗护时,得考虑当地卫生当局和医疗机构的意愿。

Mr Giam Cheong Leong, the current Executive Director the Asia Pacific Hospice Palliative Care Network, is also the main liaison person for the Lien Collaborative for Palliative Care. He said that it is important to consider the needs of the local health authority and medical organisation before reaching out to them.

## 不丹国王亲自接见团队 The invitation from His Majesty the King of Bhutan

让周雪莲印象深刻的是,不丹国王旺楚克(Jigme Khesar Namgyel Wangchuck)亲自接见志愿团队,大力支持推广慈怀疗护。

The King of Bhutan, His Majesty Jigme Khesar Namgyel Wangchuck, in the expression of his support of the palliative care programme, invited the faculty team to visit. This had etched in the memory of Dr Jamie Zhou.

严常锋指出,印度目前正结束第四回的合作项目,从 2016 年至今,22 名志愿者已在印度的 20 个邦和两个联邦属地接触 48 个机构,培训 173 名学员,并开始或扩展了 36 间癌症治疗中心的慈怀疗护工作。

According to Mr Giam, India will be completing its 4<sup>th</sup> run of training. Since 2016 till date, 22 volunteer faculty had trained 173 participants from 48 cancer treatment centres across 20 states and 2 union territories in India. Of which, 36 cancer centers had begun or expanded their palliative care service.

项目的目标是在 2022 年的第五回后,共接触 65 个机构,尤其在缺乏慈怀疗护的印度北部和东北部地区。

The aim of the program is to kick off its 5<sup>th</sup> run in 2022, increasing its current total of trained cancer treatment centres to 65, especially in the northern and north eastern part of India.

项目目前也已在中国通过虚拟方式展开,共 21 家当地医院参与,学员包括 46 名医生、38 名护士和 18 名社工。

The Lien Collab has also started its virtual online palliative care training in China, including 46 doctors, 38 nurses and 18 social workers from 21 local hospitals.



一对母女在缅甸的一家医院交谈。连氏慈怀合作项目提供的慈怀疗护培训,主要协助病患和他们的家人了解并接受病情。 (亚太慈怀疗护网络提供)

Mother and Daughter conversing at a hospital in Myanmar. Lien Collab focus in helping the patients and their caregivers improve their quality of life. (Source: APHN)