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CIOMAL

CAMPAGNE INTERNATIONALE DE L'ORDRE DE MALTE CONTRE LA LÈPRE

from the world but also to put an end to people carrying the marks of leprosy be perceived as "disabled persons" and not as "lepers" anymore.

CIOMAL works not only to eliminate leprosy the discrimination against those that were affected and their families. It is crucial that

Your generous support helps them regain dignity and find their place in society. We thank you most sincerely for supporting us in our fight against this often neglected disease.

Dear donor,

Today, leprosy is 100% curable with a medical treatment. But even when they are healed, those who were affected often continue to suffer severe disabilities. Together with their families, they are excluded from society, lose their jobs and houses, are rejected by hospitals, or are unable to send their children to school. These multiple forms of exclusion represent serious violations of their fundamental rights.





The CIOMAL Foundation has been active in the fight against leprosy in Cambodia for over 25 years. Its work is centered around the early detection of new leprosy cases so that those affected may be treated as soon as the first signs of the disease appear and thus avoid permanent scars.

"The most horrible thing about having leprosy is that you don't die of it." These words were spoken during a conference by an Indonesian man himself deformed by the disease. The admission captures the tragedy lived by those affected by this affliction. If they are not treated in a timely fashion, they will see their body and limbs become distorted and be lifelong targets of rejection and stigmatization.

In Cambodia, CIOMAL is tackling the active search for new cases of leprosy. To do so, together with staff from the National Leprosy Elimination Programme (NLEP), a CIOMAL team visits former patients in order to detect new leprosy cases among their neighbours and relatives and treat them as soon as possible so that the bacillus does not spread to healthy people.

Until 2011, CIOMAL had implemented a passive detection policy (information campaigns, trainings for healthcare personnel, admission and treatment of patients at the center) and sought to have its pro-



grammes integrated into the national health service. But the Ministry of Health does not have sufficient budget funding to fight the disease. And the national health staff lacks training.

A first cycle of early detection took place from 2011 to 2015 and resulted in the detection of over 500 new cases. The data collected was also used to determine the scope of action for a second cycle and consolidate statistics on the situation of leprosy in Cambodia.

The 2nd cycle started at the end of 2017 and is currently ongoing. In 2018, five campaigns were carried out in the provinces of Kampong Thom, Kampong Chhnang, Kampot and Kampong Cham. In 8 weeks, 57 new leprosy cases were detected, including 6 children under 15. The CIOMAL and NLEP teams visited 268 former leprosy patients and examined 470 relatives of theirs and 3,743 neighbors.

In 2019, the teams travelled to Rattanakiri in the Northeast of Cambodia in order to carry out a pilot project there. In the neglected province, which is inhabited by indigenous minorities that do not speak Khmer, the fear of exclusion runs so deeply that villagers would flee when they realized they had leprosy. Local beliefs require that any person struck by a serious disease be banished from the village so that other members of the community may avoid the same fate.

In these remote areas, a huge work remains to be done to raise awareness and spread information so that villagers are no longer scared and may be convinced to receive treatment. The teams had to use interpreters to convey information to the locals. CIOMAL is just getting started on this long-term endeavour.



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