

ROMAC REPORT – JANUARY 2006

Wilson aged 7. Solomon Islands.

Wilson arrived with a "hole in the heart" and had restricted movement, as he would quickly tire. To the point he had to be carried on even short trips. He also had severely impacted life expectancy.

On pre operation examination it was discovered Wilson had infected "baby" teeth and the infection may have spread after an operation. He had 14 teeth removed and later underwent the operation.

Less than ten days later he was "racing" around the zoo without any signs of his heart problem.

By any surgical standard he made a very quick recovery.

During the stay his mother, Mary, and Wilson resided at a unit opposite the Royal Children's Hospital.

Mary could speak English and despite little experience with electricity, and prepared foods, she soon settled in.

The ROMAC organisation provides funding and support. The support includes a group of volunteers that are rostered to visit each

day and ensure the day to day needs of the family is met.

In a recently highly publicised case a young person died within 24 hours of arriving in Australia. It was not a ROMAC patient but was being handled by an experienced and caring operation. There was a claim that there was a lack of appreciation of the degree of his illness and the inference the father was not adequately briefed on what to do in an emergency. There will be a lot of time before we know the true facts but to try and avoid such situations the ROMAC plan involves daily visits to check the child and carer have food and any emergency situations is under control.

Last week Wilson and Mary returned to the Solomon Islands. They brought with them a "plastic bag" containing all their clothes and took back suitcases full of gifts.

They bid a very tearful farewell to Australia and the ROMAC team that had become close friends in a short period of time.

Mary aged 4. Solomon Islands.

They arrived for a similar hole in the heart operation. Like Wilson, Mary needs to have 16 baby teeth removed. This will occur 16th and then an operation date will be scheduled.

Unfortunately Mary's father, Joseph, can not speak English and in keeping with their local customs he has never cooked. Certainly never with electricity. The defined roles of male and female also created potential communication problems. The combined issues created an immense problem. But fortunately ROMAC has a link with a local Solomon Island community so instead of putting Mary and Joseph into the unit it was arranged they be hosted by a series of local ex Solomon Islanders living in Australia. This will continue after the operation.

ROMAC are thinking of specifying that it must be a mother that accompanied the child in future. Not only from a cooking and care point of view but in some societies it is the mother that does all the child care and it is impossible to get any health history from the father.

The coordinator of the local care aspect is Rotarian Jenny Penno and she does an incredible job. It is not simply arrangements but it is having the skills to rearrange with only hours of notice (eg operation off so accommodation needed for four nights). Not only getting accommodation but also doing the appropriate checks that the volunteered support comes from a responsible person.

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Apart from the teeth Mary is in excellent health although there are pre operation medications she needs to take to kill off certain infections. These exist without problem in Island people but are not in Australian people and they could cause problems after the operation.

An observation: Four year old Mary and seven year old Wilson are friends to everyone. There is no fear of adults and they will readily sit on anyone's knee or hold hands, as they are lead around the hospital. It is a bit sad to observe our local customs, which are based on potential childhood abuse, and limit the contact between children and adults.

A number of Rotarians and friends have volunteered to help out with Mary's visits but less will be required as the issue of the father's cooking, and his lack of English, will probably involve most hosting being by the local Solomon Island community.

We have been involved with attendance during hospital visits to handle their visits to the various departments such as MRI, Xray, dental, blood testing etc.

A Solomon Anglican Priest, Father Sam, and a doctor at the Royal Children's who could speak pigeon English have been great help.

The next patient is due but has not been allocated to District 9800. It is possible we will get called on for some support but not for the major carer roles. This patient is from Timor Leste and it was just coincidence that our last two patients were from the Solomon Islands.

It is well worth of mention that most Solomon Islanders were aware of the work done in erecting the clinic that involved some Richmond Rotary members.

When you see basics like infected teeth you wonder why this is not taken care of before patients arrived. It is only when you get details that you realise these people may be two days by boat from medical care.



Wilson, with mum Mary, hugs Rotarian soft toy gift prior to operation

The clinics are an exceptional development in the care of people in the Solomon Islands and more credit to the volunteers from Rotary that were involved in their erection.

More on the progress of Mary later.

Valente – Timor Leste

Valente and his Grandmother have now arrived and will be looked after by District 9820 but we may get asked to provide some assistance with visitors.

Short term they are being supervised by ROMAC but ex-pat Timorese are actually doing the hosting.

Neither Valente nor his Grandmother speaks English and having them in a home that speaks their language certainly lessens the initial trauma.

Valente is a very, very sick boy and at 13 he weighs 13kgs. He needs to be piggy backed when travelling any distance. Due to the lack of capacity of his heart his extremities have started to deteriorate so the available resources can support his brain and digestive system.

Surgeon has high hopes for total recovery.

John Bengner