

elementary school textbooks.

Given the key role played by NGOs in the drive to eliminate leprosy, I visited the Social Welfare Council, the government agency that coordinates the work of NGOs, and asked that it spread my three messages that “leprosy is curable, treatment is free, and social discrimination has no place” among all NGOs operating in Nepal.

Because this was a short visit, and because of antigovernment demonstrations organized by Maoist rebels, I wasn’t able to travel widely and see what was happening in the field. However, I was able to visit a couple of leprosy-related facilities in the outskirts of Kathmandu. One was the Anandaban Hospital, operated by The Leprosy Mission International (TLMI), and the other was the Khokana settlement, a residential and rehabilitation complex handed over to the Nepal Leprosy Relief Association (NELRA) by the government. Both are closely associated with my late father, Ryoichi Sasakawa. He visited the region in 1979 when he was head of The Nippon Foundation and held the hand of an elderly woman lying on her sickbed to pray for her recovery.

Furthermore, he donated training centers to both the Anandaban Hospital and what is now the government Leprosy Control Department at Teku in Kathmandu. I was delighted to visit these facilities and see they are well maintained and being used for their original purpose.

Khokana settlement is located in the village of Khokana along the Bagmati River about 40 minutes by car from Kathmandu. On the premises are a clinic, the original leprosarium, new nursing homes, and a job training center. I had the chance to visit with the 200 or so recovered individuals

Meeting with a patient from neighboring Bihar, India



and their families and saw people being taught how to make furniture at the training center.

I also paid a short visit to one of two hostels on the outskirts of Kathmandu operated by NELRA for children of rural families affected by leprosy, which enable them to commute to schools in Kathmandu.

Anandaban Hospital, which was established by TLMI in 1957, is Nepal’s biggest leprosy hospital, and the main hospital of the Central Development Region. It has a total of 121 staff (of whom 115 are Nepalese), and 115 beds. The hospital undertakes a variety of activities, including early detection and treatment, prevention of disability and reconstructive surgery, rehabilitation and elimination campaigns. Dr. Yo Yuasa, executive and medical director of Sasakawa Memorial Health Foundation, served as medical superintendent at the hospital in the 1970s when he worked for TLMI.

I visited both inpatients and outpatients, including those with complications and those undergoing rehabilitation. I also saw the laboratory where research is being conducted on a leprosy vaccine. The wards were clean and well-run, and the patients seemed to be in good spirits.

I was interested to learn that some of the patients were from Bihar State in India. Leprosy-affected people living in the border regions of both countries pass back and forth across the frontier, making it difficult to keep track of them and provide treatment. I proposed that the relevant parties of both countries have a meeting on this issue at the earliest possible date.

It was very important for me to see for myself the commitment of senior Nepalese political leaders to achieving the goal of elimination. According to the health officials concerned, the infrastructure to achieve leprosy elimination in Nepal is in place. I was also impressed that education about leprosy begins at elementary school level.*

However, on the human resources front, numbers are lacking, and a lot of training will be needed for the infrastructure to be properly utilized. Another problem is that because of social disturbances, leprosy elimination campaigns are restricted to 25 of the country’s 75 districts.

Still another concern is that cooperation between government departments and NGOs, which have traditionally been at the heart of social activities in Nepal, including leprosy elimination, could be better.

At any rate, I look forward to paying another visit to Nepal, when hopefully time and circumstances will permit me to travel the country and see the situation in the field at first hand. ■

Reference

* The following is summarized from a Nepalese school book: “Leprosy is caused by a bacterium. It is not hereditary, punishment for sin or the result of a curse. Early diagnosis and multidrug therapy cures leprosy without any disabilities or deformities. People who are receiving regular treatment or have completed treatment do not transmit the disease and can lead a normal life. People with leprosy should not be discriminated against; they should be loved.”