

Photo: Kyodo News



Japanese doctor Tsumagari Kenji checks the leg condition of an Indonesian woman he treated earlier at a hospital in Gunungsitoli on Nias Island hit by killer tsunami in the 2004 Sumatra earthquake.

In 1999, Okayama City in western Japan received separate but successive visits from two rival Afghan figures: the health minister of the Taliban group, which then controlled most of Afghanistan, and the deputy foreign minister of the Northern Alliance, its battlefield opponent. The Japanese city became the setting for quiet efforts to broker peace.

Their visits were in endorsement of the concept "Let's observe a ceasefire while inoculations are given to Afghanistan's children" advocated by AMDA (the Association of Medical Doctors of Asia), a nongovernmental organization headquartered in Okayama. This footnote in history deserves attention even though the scheme failed to materialize because it was overtaken by events, namely the 2001 terrorist attacks on the United States and the consequent US-led attack on Afghanistan.

AMDA's activities over the last 23 years have been both dynamic and strategic. With chapters in 29 countries, it is joined by as many as 2,000 doctors and other personnel. Besides dispatching doctors and staff to render emergency assistance amid natural disasters, it also undertakes long-term projects for healthcare, medical treatment, education and improvement of living conditions.

AMDA's "Peace Building through Health Projects" is an extension of this line. Aid activities undertaken on a governmental basis can only be undertaken by the government side. But AMDA extends

teers rushed to the disaster area to help, revolutionized the way Japanese people view social contribution activities. "Before, we volunteers lacked social acceptance and were sometimes treated with suspicion, but this all changed," said Dr. Matono Hidetoshi, AMDA's vice president. "Amid the earthquake disaster, foreign doctors abroad mobilized themselves to help. Alas, problems surfaced on the receiving end, such as with recognition of medical qualifications. But this became an opportunity

Multidirectional Help by Multinational Doctors

By Matsunaga Tsutomu

assistance not only to the government side but also to people who live under the sway of anti-government forces. In the case of the Afghan peace experiment, AMDA accomplished what it sought to do because it had open lines of communication with both the Taliban and the Northern Alliance through its daily activities. In Sri Lanka, it liaises with both the government side and with the rebel Liberation Tigers of Tamil Eelam, and carries out assistance in areas under control of each of them. In its "health newspaper" distributed to civilians, it also appeals for an early resolution of the conflict.

AMDA's 500 overseas members are a religiously diverse lot including Christians, Muslims and Hindus. In relief activities carried out in response to a big flood in Kenya, AMDA's Kenyan doctors took the initiative and doctors from outside the country supported them. Local initiative is a key principle, in line with the Japanese saying, "When in a local area, do as the locals do."

Hospitals are built in the host country, and their management is left to local doctors. The hospitals also serve as AMDA chapters and their doctors and staff participate in AMDA activities. The emphasis is on mutual assistance.

The 1995 Great Hanshin Earthquake, in which many citizen volun-

teers rushed to the disaster area to help, revolutionized the way Japanese people view social contribution activities.

Japan's doctors are wealthy and its medical system is reliant on the most modern equipment. But when they go to disaster-stricken areas overseas, nothing is available and the range of medical treatment they must provide is broad, so it can be a daunting experience. "Some doctors returning from the field look as if they underwent a personal transformation," Dr. Matono said. "In places like India, China and Tibet, they get a chance to familiarize themselves with traditional medicine, and it's meaningful that they're able to shed their over-reliance on Western medical practices." In addition to techniques of negotiation with local authorities and know-how on base establishment while overseas, AMDA offers survival training to enable doctors to function even in places where there is no electricity.

To encapsulate its guiding philosophy, AMDA insists on the Japanese words "sogo-fujo" instead of their English rendition "mutual assistance." According to Dr. Matono, the words incorporate Japanese values such as "ninjo" (human empathy) that reflect the natural inclination of human beings to help others in need. It is AMDA's dream to see these words enter the vocabulary of the international community like "mottai-nai" (too valuable to waste). **JS**

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