



## Denzil Sprague Pichey Rangsey Primary School Development Project

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### **GENERAL INFORMATION AND OBSERVATIONS RELATING TO HEALTH AT THE SCHOOL**

Perhaps the most important issue to address as the school develops is that of the health of the students. The negatives of poor health care are too obvious to highlight – rather the positives are better for discussion.

#### **First medical examination - 2011**

The students had a good settling in period at the school from 2009 before their first medical testing in January 2011 followed by another in June 2011. The most significant figure to be taken from the broad data is the one of Weight for Age. In January, 64.17% were found to be under weight for age. Treatment given was Anti Parasite tablets, Vitamin A, iron and multivitamins (where necessary), fluoride and dental care instruction.

6 months later, after further testing, the figure of 64.17% had dropped to 32.49%. A Cambodian National figure shows that 39% of all children are stunted in their growth. Arguably, this can be attributed to poor nutrition in a child's developing years together with the long term effects of parasites. Given that the majority of the population in Cambodia live in rural provinces where domestic animals live either under houses or in close proximity, the parasite factor is most certainly a significant one.

#### **Second medical examination- 2012/13**

The medicines have been continued albeit reduced where costs had to be considered and another medical test was conducted in Dec 2012 and Jan 2013. The underweight for age figure had again dropped further to 16.69%. These figures are not entirely conclusive because there are far more underweight for age students in the grouping up to grade 2 which possibly indicates that the younger the child is, the more dependent they are upon those feeding them compared to older children who can feed themselves more readily and so obtain more food.

#### **Dental needs**

The medical tests consistently found an urgent need for dental treatment for at least one third of those examined. It has been found that parents in Cambodia don't think that first teeth matter! Note the figures on the statistics sheets. We had indications that a pro bono dental team were to visit earlier this year but this has been postponed. When we conducted the dental hygiene program, most students had never had a toothbrush or toothpaste before.

#### **Positive effects of the medical program**

The overall effect and result of the health program has been a marked rise in school attendances reflecting better health. Attentiveness and general alertness has significantly improved as has the eagerness to learn.

### **Extended awareness**

There is still much to be done to lift the awareness of what are better ways to improve the nutrition of food cooked. Green vegetables are plentiful but invariably overcooked, thus destroying the Vitamin B1 benefit. Iron is not absorbed due to overcooking of green vegetables. Lack of iron contributes to the development of anaemia, hence our supplement to our students. Very small fish are cooked and eaten whole. There is an enzyme in the gut of the fish that destroys Vitamin B1. There is not enough calcium in the Khmer diet. All these are issues that must be conveyed to the families of our students. The students are taught personal hygiene. So, although the students are being treated for various deficiencies in their health at school, good health awareness needs to be transferred to the families as discussed in the report attached to the 2011 statistics.

### **Conclusion**

The statistics taken from the 2011 and 2013 medical examinations clearly show the positive results of giving the students basic medicinal supplements. They also show that reducing the incidence of treatment, because of cost constraints, will have an immediate detrimental effect – even by reducing fluoride. The cost of the program since 2010, even with service reductions, has amounted to \$12,000.

The school needs assistance in many areas, particularly in educational equipment, but the health program should, I think, take priority.

#### *Prepared by:*

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