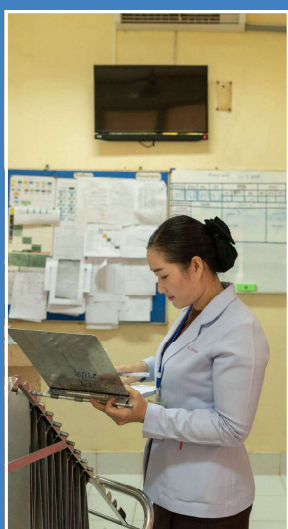


See Lor

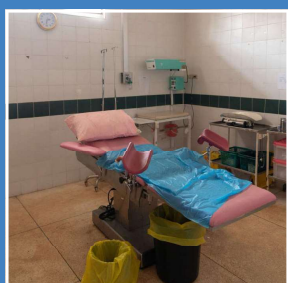
Three countries, nine stories

As an obstetrician and a mother of two, See Lor says she can relate to her patients, and often feels for them, particularly if what was meant to be a simple delivery turned into a complicated surgery. „Especially if they needed a C-section, they'd have to sell their land or cattle to pay for it," she says.



Now people no longer need to worry about the costs, as everyone is covered by the national health insurance. The change has been tremendous, See Lor says. She remembers treating a woman who was experiencing complications in her last trimester, but couldn't afford antenatal care. Shortly after the diagnosis, however, national insurance was introduced, and she was able to get the care she needed. „The hospital even sent an ambulance to pick her up. All her costs were covered, and she was able to have a safe delivery," See Lor recalls.

As her unit now sees about twice as many patients, waiting times can be longer, and some get flustered and impatient. For staff, an increase of the work load means more stress, and See Lor says she's a lot more tired now. Still, she wouldn't have it any other way. „Even if at the end of the day I am tired from working," she says. „I am happy."



Boun Pone & Kham Meung

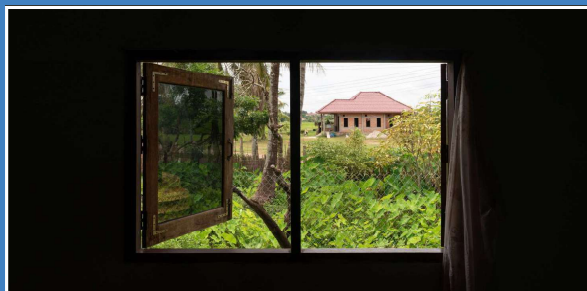
Three countries, nine stories

With a brother who emigrated to the US, Boun Pone and his wife Kham Meung, were already luckier than most. If they really needed medical care, the income from their goats, their small fish pond and their rice field, supplemented with some money from his brother, would likely suffice. Even so, they never went to a hospital, and typically just picked up medication at the local pharmacy.



This June however, Kham Meung noticed that her menstruation didn't stop. Following a friend's advice, she sought treatment at the military hospital, which takes private patients. After a week of running tests, she was given medicine – and a bill of 5 million kip. „But it only stopped the bleeding for a bit, and then it came back,” she says. When she learned from a neighbour that treatment at public hospitals was now free of charge for all Laotians, she went to the Maria Theresa Hospital.

This time, the treatment was successful, and her expenses totalled 30,000 kip – the nominal sum charged to every patient per night. Both were satisfied with the treatment, with one small criticism: Boun Pone has caught the doctors and nurses playing on their phone. „They should focus a bit more on their work,” he says, laughing.

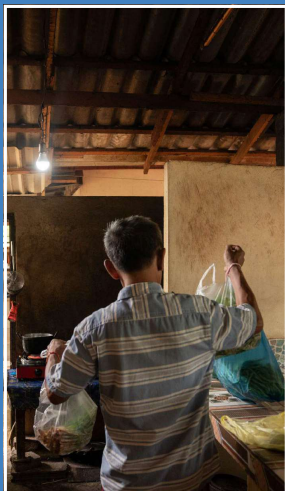


Soutima Chang

Three countries, nine stories

A driven student who had gotten a government scholarship to study business administration in Hanoi, Soutima Chang was enjoying life and excelled at her studies despite the difficulty of having to learn Vietnamese.

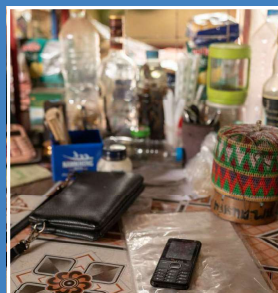
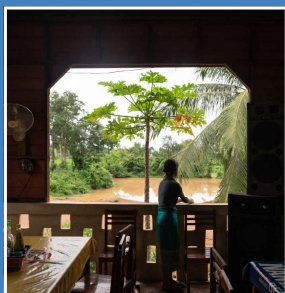
One day however, her stomach started to ache as she sat in class. „The pain didn't stop, so I went to the hospitals to get tested,“ the 22-year-old says.



The diagnosis came as a shock to her and her entire family: a cervical tumour. Five days after a provincial hospital in Vietnam confirmed the diagnosis, she was undergoing surgery. While the treatment was free, patients pay a nominal sum for every treatment they receive in the hospital, which, in Soutima's case, amounted to 30,000 kip. „We are very happy to get this kind of support,“ her mother Kham Chang, says.

serve workers of a garment factory that had just opened nearby. „But it isn't easy to make money in Laos, and to afford health care, so this scheme is incredibly helpful,“ Kham Chang says. Sitting by her daughter's side along with her husband, the family talked about Soutima's recovery and was making plans for her return to university this summer. If all goes well, she will graduate in early 2021. „Then, I hope to work for the Lao-tian government,“ she says.

Four years ago, the family went from raising pigs to running a small restaurant, hoping to



Nguyen Thi Quyen

Three countries, nine stories

Sweet longan and jackfruit are no longer part of Nguyen Thi Quyen's diet. Instead, she eats rice and vegetables and drinks bean juice, as recommended by her doctors. Mixed with the medication she takes each morning and evening, the elderly woman is managing her diabetes well. The tiredness she felt before she was diagnosed is gone, and she's back to being the spritely homemaker who cooks, cleans, and looks after her grandchildren. "Now, I feel good," she says.



But she remembers the worry when she was first diagnosed with diabetes. Without insurance, her first stay at a Hanoi hospital cost 10 million dong – about twice her and her husband's annual income. "We are just farmers, we can't afford this. It would have been too much," she says.

After much consolidation with her family, they asked health professionals for advice and promptly learned about in-

surance schemes. Now that she signed up, she pays under 100,000 dong for her monthly health check-up, including all blood and urine tests and new medication – a significant saving that makes it possible for her to be treated and live a healthy life in the first place, she says. Nyugen Thi Quyen was so impressed, she says, that she got her entire family of six to join. "Since we got insurance, things have been so much easier."



Scan for more information on social health protection

Vuong Quoc Nhat

Three countries, nine stories

One day in November, not long after he fed his family's chickens, Vuong Quoc Nhat began feeling nauseated. Shortly after, he had to vomit. "Everything I ate, I just vomited," he says. Together with his mother, he went to the hospital where a kidney disease was diagnosed. On his journey to recovery, he was transferred from hospital to hospital, and quickly realized that he needed to get insurance to continue his treatment.



"I didn't have any health problems before so I didn't think insurance would be important," he says. "It wasn't on my mind."

Once he signed up, he had to wait 1 month for the insurance plan to come into effect. Now, he only has to pay a small percentage of the dialysis he receives three times a week. He had to quit his job due to his poor health, but he is making a living producing fake eyelashes for the

cosmetics industry, a job he can carry out from the comfort of his own home. He hopes to receive a kidney transplant, but doesn't know how long he might have to wait – or if he qualifies for a transplant at all. "I hope my health will improve again, so that I can apply for jobs in companies," he says.



Vu Thi Nguyet

Three countries, nine stories

Early in the morning Vu Thi Nguyet places her two-year-old daughter, the last of her three children, in the care of her parents-in-law, gets on her motorbike, and rides 14 kilometres to the hospital to start her shift. She loves her job because she gets to help others, she says, but as the head nurse she also faces difficult decisions about the type of care her patients receive.



While she sees it as her duty to treat every patient as best as she can, her ten years' experience have taught her that this is, at times, at odds with people's financial needs - especially if they lack insurance, she says. Sometimes, the restrictions can be as small as turning on the air-conditioning unit, a service the hospital only renders to paying patients. Sometimes, she's turned it on for non-paying patients too. "At times, we just feel pity for them," she says. But when it comes to

larger expenses, making such exceptions isn't possible.

Vu Thi Nguyet remembers a patient in urgent need of treatment for his failing liver. After two days at the hospital, he removed the IV drip from his arm and left, knowing that he lacked insurance, and that his savings wouldn't suffice to cover the growing costs. Two days alone had cost him 1 million dong. "That's already more than an entire year of health insurance," she says.



Scan for more information on social health protection

Nguyen Van Hong

Three countries, nine stories

Growing up with a father who suffered from liver cirrhosis, Nguyen Van Hong wanted to provide care for him and decided to become a doctor. "It's like humanitarian work," he says, "you really need to care."

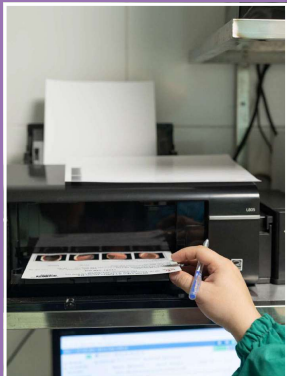
Today, he's been working at the same private hospital for 17 years. As he examines a patient, he points to state-of-the-art equipment and explains that VSS



often covers only basic services. As a doctor, this means that he regularly has to weigh the costs and necessity of carrying out tests and exams not covered by the VSS. Still, the fact that almost 90 percent of people in his province have health insurance has eased his work, and he's well-aware that not every part of the country has such high coverage rates.

In other provinces fewer people have coverage, and he

distinctly remembers an out-of-province patient who was diagnosed with a liver tumour. Because the man lacked insurance, Nguyen Van Hong requested that the hospital waive the fees for his treatment, saving the man's family a crippling bill of about five million dong. "He was poor and he didn't have much, but he gave me a duck and some eggs as a gift," Nguyen says, before thoughtfully adding, "I wish everyone had health insurance."



Scan for more information on social health protection

Thein Min Hlaing

Three countries, nine stories

Thein Min Hlaing had quit his job as a painter and mason to work in the garment factory that was employing his wife. Being able to get to and from work on the same bicycle, the couple thought, would make their lives easier -- until one night in June 2018.

The young pair had just finished an extra shift at around 10 pm and was pedalling down a dark street when a truck hit them.



His wife was thrown to the side and sustained minor injuries, but Thein Min Hlaing was run over by the truck. The broad, heavy tires crushed his arm, his back and his skull, leaving his left side paralyzed. It took a total of three complicated surgeries to reconstruct his skull. "Everyone thought I would never recover, but now I can walk and talk without any disability," he says, as he takes off a baseball cap to reveal the thick, long scar that stretches from his right ear over the back of his head.

As a member of the Social Security Board, Thein Min Hlaing received benefits and a monthly stipend – but he still had to pay more than 10 million kyat for his surgeries, and he now owes money to friends and relatives. His financial situation worries the 27-year-old, but he knows he's gotten through worse. "Event though I was scared," he says of his long road to recovery. "I never gave up. My spirit was always high."



Yu Mar

Three countries, nine stories

Two months ago, Yu Mar gave birth to a beautiful baby girl. She lacks sleep she says, because she needs to get up every couple of hours to feed the new born and cradle her back to sleep. Being a mother is exhausting and tiring, but she radiates joy.

Overall she says, she feels blessed that she is able to take a total of 14 weeks maternity leave, and that she receives 300,000 kyat to cover her absence



from work. It's more than she'd make at the printing company where she has worked as a clerk for more than six years. The slight anger she used to feel about the 2,800 kyat that were automatically deducted from her monthly salary to pay her Social Security Board membership, has now abated. "Since I got pregnant I don't feel that way anymore because I understand the benefits of the scheme," she says, her husband cradling their baby girl.

The different types of care she received during her pregnancy were for the most part also covered by her insurance, and the biggest expense was a 60,000 kyat contribution to the cost of her C-section. The extra money she can save during maternity leave will be spent on the baby girl's future, she says. "I am thinking to buy some gold for her but I am also thinking about investing the money and asking her grandparents to keep it for her."



Yin Yin Win

Three countries, nine stories

Hailing from a family in which almost everyone worked in the medical sector, it seemed only natural for Yin Yin Win to become a nurse. Her father was particularly encouraging as he kept telling Yin Yin Win what a noble profession it is to help others. Thankfully, Yin Yin Win didn't need to be convinced: Being a nurse allows her to follow her passion. "I don't know how to express this, but I feel satisfied when I have to care for the patients -- this is making me happy and I am enjoying giving care to the patients," she says.



She treats patients with hypertension, seasonal flus and chronic disease on a daily basis, and notes that the majority of her patients work in the country's growing garment industry. Those patients, she says, have seen tremendous benefits from joining the Social Security Board, as most of them are young women who will go through at least one pregnancy, and will receive free pre- and ante-natal care and medication through the SSB.

She acknowledges that the job can be hard, especially when poor patients are so worried about the costs that they deter their treatment until the last minute. "But when they register with the Social Security Board, they get treatment in time," Yin Yin Win says.

