CMF supports the United Nations Sustainable Development Goals (SDGs) for 2030, specifically Goal 3: Ensure healthy lives and promote well-being for all ages.

Established in 2006, CMF provides access to life-saving operations and medical interventions for infants and children. In promoting the health service, we prioritise treatments of congenital disorders as it is one of the leading causes of child mortality. The surgical procedures are normally expensive and complex; the majority of families cannot afford the necessary medication, let alone the costly operations.

With approx. 150 patients annually, our targeted beneficiaries are children aged 0-12 who have been diagnosed with cardiac disorders, anorectal malformations, and neural tube defects. Without financial support and access to quality health care, many of these children either die prematurely or are crippled by disability, and are unable to attend school, perpetuating the cycle of poverty.
A GROWING PROGRAMME

As of the end of 2019, the program counts a total of 1,959 cases, which corresponds to 1,890 patients. One patient can present multiple cases. The majority (92%) of the cases are from Myanmar or are from Myanmar descendants. The remaining 8% are from Laos.
EVALUATION METHODOLOGY

Once patients are officially registered in the programme, they will start treatment and will be monitored and supported by the staff. Patients’ cases and information are recorded in a database that keeps track of the treatments provided and the outcome of these. For monitoring purposes, information is cross checked against medical reports every six months and programme statistics are then produced to understand output and outcome.

1,890 PATIENTS FROM 2006-2019
1,959 CASES FROM 2006-2019

Sometimes, one patient suffers from more than one disease which results in more than one case per patient.

56% MALE
44% FEMALE

73.6% TREATMENT SUCCESSFUL
A WIDE RANGE OF MEDICAL CONDITIONS

Counting 59% of the overall cases, cardiac disorders are the predominant medical condition. Another 16% are general or unspecified cases. These were recorded between 2006 and 2008, when patients were welcomed in the programme regardless of their medical condition. Among the general or unspecified cases, we had patients with bone fractures, cancer, severe fevers etc. The remaining 25% of the cases are other congenital disorders, such as anorectal malformations or neural tube defects.

CLOSED CASES VS OPEN CASES

Of the overall 1,959 cases recorded, 88% (1,719) have been closed and another 12% (240) are ongoing.
CLOSED CASES BY REASONS
2006-2019 | Total % | n=1,718

- TREATMENT SUCCESSFUL: 73.6%
- DEATH RELATED: 6.9%
- NO TREATMENT REQUIRED: 5.4%
- CANNOT CONTACT ANYMORE: 4.5%
- UNABLE TO TREAT: 3.0%
- REFUSED TREATMENT: 3.0%
- RESETTLEMENT: 1.6%
- REFERRED TO PARTNER: 1.2%
- TREATMENT POSTPONED: 0.6%
- DEATH UNRELATED: 0.2%

SUCCESSFUL CASES
2006-2019

1,264

81% LIVES SAVED
19% LIVES IMPROVED

SAVING LIVES
When successfully closing a case, depending on the severity of the condition treated, the programme has either saved a life or has improved it. Having seen the severity of the majority of the cases recorded, 81% of the successful treatments are lifesaving.

DIFFERENT CLOSING REASONS
Cases can be closed for a wide range of reasons. Often is because of the patients’ full recovery and, indeed, 73.6% of the cases were closed because of successful treatments. Yet, there have been different cases where, unfortunately, patients have passed away because of the severity of their conditions. Other instances were instead luckier, with patients being able to heal without any treatment. Along these lines, other closing reasons include patients’ refusal of the treatments, patients’ resettlement to a third country, patients’ referral to other partners, inability to contact patients or inability to treat the medical condition.