History

MCNV was established in the Netherlands in 1968 to support health development in Vietnam ever since. The first years of MCNV were devoted to the fall-out of the Vietnam-American war. Most of the support consisted of medical supplies to Vietnam. During the post-war reconstruction period MCNV contributed to rebuilding and equipping of hospitals, as well as development of national disease control programmes. In the past ten to fifteen years, the focus has shifted to community health & development, and capacity building, with special attention to the disadvantaged groups in Asian societies who have not yet benefited from the economic transition proceeding rapidly in the region. Since 2004 MCNV also has programmes in Lao PDR, and from 2011 onwards, MCNV works through partners in Georgia, Tajikistan, and Sri Lanka as well.

1968 – 1973 solidarity

From 1965 onwards the inhumane warfare in Vietnam sparked protests all over the world. In the Dutch capital city Amsterdam there were protest manifestations almost every week and all the facts and events about the Vietnam war and the protest movement were being published in a bi-monthly magazine called ‘Vietnam Bulletin’. In many cities local groups started collecting money for different purposes in Vietnam. In 1968 the Medical Committee Netherlands-Vietnam (MCNV) was founded, enabling the public to “put their money where their mouth was” with the intention of providing large-scale emergency medical aid to the suffering Vietnamese people. In the first five years of its existence, MCNV grew rapidly. A “committee of recommendation” was formed and was eventually joined by 625 doctors, pharmacists, college professors and nurses. MCNV’s income from donations in the first full year was €60.000. In the following years that amount more than doubled each year. In 1969 the first shipments of medicines (quinine and tetracycline), equipment (surgical trouses) and milk powder were being sent by boat to Haiphong harbour. In the years that followed, MCNV has been sending quinine and antibiotics and equipment on a regular basis, as requested by the Vietnamese medical authorities through their embassy in Paris. Especially after the year 1972, MCNV became a household name in the Netherlands. As a reaction to the Christmas bombardments on Hanoi and Haiphong, as well as the Paris peace agreements from januari 27th 1973, many people in the Netherlands expressed their support for the work of MCNV. The annual income went up to € 2.600.000 in 1973. In the 2 weeks alone after the signing of the Paris agreements alone MCNV got 10.000 donations, totalling € 700.000. From 1969 to 1973 the number of individual donors in MCNV’s files reached 67.000 people, thus outnumbering many of the existing Dutch political parties in those years. In addition, different groups throughout the Netherlands organised all kind of actions for Vietnam. A group of medical students asked all Dutch doctors to donate the free medicine samples that the pharmaceutical industries were mailing to them in large quantities. This resulted in extra shipments of useful medicines valued at approximately € 25.000 per year. Another group of medical students started collecting medical textbooks for the Vietnamese medical universities. There were shipments of revised sewing machines (500 per year) and some 2000 Dutch women
were knitting clothes for Vietnamese children. And there were Musicians for Vietnam, Photographers for Vietnam, Writers for Vietnam, Artists for Vietnam and Churches for Vietnam, all protesting against the war and supporting the work of MCNV. At the end of 1973, MCNV was a strong organisation with 40 voluntary workers in its head office and another 600 throughout the country. It had its own quarterly newspaper and had become a knowledge centre on Vietnam. It had grown up to become a authoritative solidarity committee.

1973 – 1976 a hospital for Quang Tri

In 1973 MCNV felt strong enough to take a next step. Inspired by board member Dr. Nick van Rhijn, a plan was made to donate a hospital to the province of Quang Tri, that was particularly hard hit by the war. A big fundraising campaign resulted in €500,000 and the same amount was donated by the Dutch minister of development cooperation Mr. Jan Pronk. On top of that all the Dutch universities ‘adopted’ parts of the hospital, thus making this effort a national one. Dutch architect Carel Weeber and his students at Delft technical university designed the construction of the hospital. It was to be made of aluminium prefab parts with wooden walls, on a concrete foundation. In the spring of 1974 the Minister of Health of the Provisional Government of the South, Mrs. Duong Quynh Hoa, visited Amsterdam and MCNV. She returned to Vietnam with the pictures of the model of the hospital. In Quang Tri a location was being surveyed for the hospital; several dozens of unexploded bombs had to be removed before the terrain could be levelled with bulldozers. During the summer, four Vietnamese technicians were staying in the Netherlands to receive a training for the assembling of the prefab parts. These parts of the hospital were produced in the summer of 1974 and packed in 380 wooden crates. The designer of the hospital, architect Carel Weeber, visited the construction site at the start of the assembling and building of the hospital near Dong Ha town in Quang Tri, which took the better part of the year 1975. The building and maintaining of the so-called Benh Vien Ha Lan (Holland Hospital) in Quang Tri was the starting point of a special relation between MCNV and this province, which is still going strong after 30 years. At the beginning of 1975, Mrs. Pham Thi Minh (from the Provisional Government of the South) and American actress Jane Fonda were in the Netherlands to speak at MCNV meetings “two years after the Paris agreements” calling for the US government to withdraw all their troops from Vietnam and end the war. All over the Netherlands groups of people were organising meetings and supporting the work of MCNV. The protests against the US warfare in Vietnam led to many conflicts between the “Vietnam generation” and their parents, who were still thankful to the US because they liberated Holland from the German occupation in the second world war. Apart from the hospital project, MCNV was still sending all types of medicines and equipment to Vietnam. Most of the cargoes were sent by boat, but when the war was finally over, MCNV chartered nine airplanes over the course of three years to send large quantities of relief aid more quickly.
1976 – 1985 problems with popular diseases

After the end of the war, the shocking consequences of the war for Vietnam became clear. A European “donor conference” was organised by the European secretariat of the Medical aid committees for Vietnam and each European country (or NGO) was given one or more specific tasks. After that conference, MCNV focused on the heavy problems of tuberculosis and malaria. Vietnam emerged from the war with an estimated 200,000 tb patients. Only 30 years earlier, the Netherlands had 20,000 tb patients as the aftermath of the WW II years. MCNV launched a campaign urging its donors to give 10 guilders (€4.5) per month to cure one Vietnamese tb patient. Nearly 10,000 donors responded to this, marking the start of a 25 year long tb campaign, in which MCNV co-operated with the major tb-hospitals in Hanoi and Ho Chi Minh city. Malaria was a big killer disease in Vietnam and had to be dealt with on a large scale. Dutch minister of development co-operation Jan Pronk decided that MCNV could very well perform this task in Vietnam, and he therefore gave 2.5 million euro each year for malaria control. Thus MCNV was able to send large quantities of insecticide for spraying houses. In 1977 a delegation of MCNV went to Hanoi and Dong Ha, where the Dutch hospital was formally opened by MCNV chairman Prof. Jaap de Haas. For this achievement the Vietnamese government gave Prof. de Haas the Order of Friendship. When the Dong Ha hospital was built, the contribution of the Dutch universities to MCNV came to an end and the medical faculties then started a project of training for Vietnamese physicians. For the next ten years, each year some 20 Vietnamese doctors came to the Netherlands for a 9 month stage in different cities. Right after the war ended, MCNV launched a big campaign to convince the donors and the Dutch public that “In Vietnam the war is not over yet… it must now be fought against tuberculosis and malaria”. About half of the 60,000 private donors of MCNV had decided that their support now should go to some other cold-war underdog country. Many other political issues like Vietnam’s border war with Cambodia, the boat-people and the short war with China further divided public opinion in the Netherlands about Vietnam. But the work could go on thanks to 30,000 donors who stayed true! In 1978 MCNV celebrated its 10th anniversary, and on that very day Prof. Ben Polak succeeded Prof. De Haas as chairman of the board. Ben Polak also stayed with MCNV for 10 years. Every year all the members and voluntary workers got together on April 30th, the Vietnamese liberation day that coincides with the Netherlands’ Queens day. Vietnamese guests on those occasions were Prof. Ton That Tung, who visited Europe in the wake of the Seveso (Italy) dioxin disaster, and Vietnamese vice-minister of health Dr. Hoang Dinh Cau. After heavy rains and severe flooding in South-East Asia there were serious food shortages in 1979-1982, and MCNV responded to this situation by sending extra supplies of rice, sugar and of milk powder to Vietnam and Cambodia. After this, MCNV was asked by the Vietnamese Ministry of Health to concentrate all it’s efforts on the struggle against the popular diseases tb and malaria. Therefore the collecting and sending of baby clothes, sewing machines, books and other non-medical materials gradually stopped.
1983 – 1993 tackling tuberculosis

In MCNV’s information bulletin of July 1983, board member Go Lam San wrote on the occasion of the 15th anniversary of MCNV: “Vietnam has changed my life”. This is certainly true for the donors of MCNV: they are and remain true to the cause of helping the Vietnamese to rebuild their country. At that time the struggle against tb and malaria in Vietnam was being funded by MCNV for about 70%. And the total of the donations from the public and the Netherlands government from 1968 – 1983 had reached 50.000.000 euro. 1983 marked the beginning of the collaboration between MCNV and the Royal Dutch Tuberculosis Association (KNCV). In that year Tb specialist Dr. Jaap Broekmans visited Vietnam for the first time and together with Dr. Nguyen Dinh Huong from the national tb institute in Hanoi the foundation was laid for what would become the NNP, the New National Programme for Tb control. In the Netherlands, a conservative government succeeded the labour-led governments of the 70’s, and it became clear to MCNV that government funding for Vietnam was going to end in 1984. In 1984 and 1985 several visits to Vietnam were made by tb specialists, and this resulted in a contract between the Ministry of Health of Vietnam and MCNV for the implementation of the New National Programme of tb-control. A study was made during several years in which the new strategy for identifying and treating tb-patients was tested in several provinces and compared with the current method used in other provinces. Ultimately this resulted in a very successful new method of tb-control that has become a world standard, and it is nowadays being used everywhere in Vietnam with funding from the World Bank. In the meantime the Dutch hospital in Dong Ha was partly destroyed by a typhoon in 1985 and it was rebuilt thanks to funding by ‘friends of the Dutch hospital’. Smaller scale projects in the 1980’s included an artificial eye project and a vitamin A project. In 1987 an epidemic of very dangerous brain-malaria occurred which led to a renewed campaign for malaria control.

1992 – 2006 manipulating mosquitos

The treatment and prevention of infectious diseases like malaria and dengue has become one of the major concerns of MCNV in the 1990’s. According to Ron Marchand (MCNV), who is responsible for these projects: “In Vietnam, like everywhere in South-East-Asia, the occurrence of dengue has risen sharply since 2000. This disease has become a major threat for public health. The mosquito that transmits dengue from human to human (Aedes Aegyptii) lays its eggs in fresh water. Wherever fresh water is not abundant, for example in the river deltas, it is commonly being collected and stored in big earthenware pots, that, when not properly closed, make ideal breeding-ponds for the larvae. No cure exists for this disease, which makes prevention all the more important”. Since 1992 MCNV works together with the National Institute of Hygiene and Epidemiology in Hanoi. Projects mainly focus on information and prevention and the promotion of biological methods of preventing the mosquito larvae to grow.

1994 – 2006: challenging communities

After a long period of isolation the Vietnamese authorities opened up the country for foreign investors, and on february 14th, 1994 the US imposed trade embargo was lifted by president
Clinton. From then on the Vietnamese economy started to grow and many international companies now have established their businesses in one of the big cities. Roads are being improved and the future looks bright for a good part of Vietnam’s population. Despite these hopeful developments a gap can be seen growing between the rich and the poor, and the difference in development of the cities and the rural areas are evident. The people in these remote areas, children with handicaps and farmers who have to work on the land, often far from (medical) facilities, they cannot profit from these economical developments. MCNV is mainly focusing its efforts on these groups. Pamela Wright (MCNV)：“We started various projects in Ben Tre to support women who lost their husband or child. Through the mediation of the local Women’s Union the women can get a loan with which they can buy a cow or a pig, or start some other kind of trade. From their earnings they can buy food and medicine and other necessities. Every month the women gather in a meeting at the Women’s Union and exchange experiences and every month they pay back a part of their loan.” With these small scale ‘revolving fund’ projects MCNV strives towards a structural improvement of the health situation of these women and their families. The Bank for the Poor has further developed and extended this credit and loan scheme for women. The main goal in the projects “Community Managed Health Development” (CMHD) is taking responsibility for your own health situation. In about 300 of the 1000 villages in the province of Quang Tri the villagers are actively participating in the planning of the projects to improve their health situation. Ho Sy Quang, who works at MCNV office in Dong Ha:“Momentarily we are busy evaluating the present situation. Workshops and training have been organised in these past three months, in which all kind of subjects are being looked at: health, family planning, fresh water, housing, schools and for instance the proximity of a health post”. These last years MCNV supports this kind of approach that caters for the needs of the population: good health and well being.

Looking toward the future

While Vietnam was changing fast, MCNV changed with it. Instead of the large scale shipments of materials such as microscopes and medicines and powdered milk, nowadays the focus has shifted towards capacity building; more doctors and nurses, more health posts and above all making it all within everybody’s reach. In trying to achieve this MCNV closely cooperates with the Vietnamese health services and –very important– with the people. For a good co-operation and logistics, MCNV has set up three offices in Hanoi, Dong Ha and Nha Trang, with Vietnamese staff and Dutch experts. In 1968, the Medical Committee Netherlands-Vietnam was founded on a feeling of solidarity with the Vietnamese people and supported by many in the Netherlands. And at present, 45 years after the war, MCNV can continue its support to many medical projects in Vietnam, thanks to a large group of faithful donors. Many of those started 45 or more years ago and still donate monthly to help cure a tb patient. Others joined later because of their compassion with handicapped children, or the victims of the use of agent orange. Their structural support is MCNV’s lifeline that makes it all possible, now and in the future.