



Summary of Report on ASCoN conference -2005

1. Back ground of financial request :

On November 30, December 1-2-3 , 2005, the Fifth Asian Spinal Cord Network conference was held in Ho Chi Minh City – Vietnam .

This conference was organized by the HCM Hospital for Rehabilitation and Professional Diseases through an organizing committee made up between the hospital administration staff and Handicap International Project.

ASCoN consists of a group of organizations in the Asia region that have come together to share and learn from each other in all aspects of spinal cord injury management, from initial treatment of the patient to re-integration of the person.

2. Rationale for the conference to be held in Vietnam :

The main objectives for this meeting were:

- To strengthen spinal injury services and human resource development for organisations and people working in spinal injury management in the Asia region by including Vietnam in this development .
- To share information, ideas and knowledge of best practices in spinal cord injury management among members and have this information available in Vietnamese language as well.
- To highlight the latest achievements of the set up of a Spinal Unit in Ho Chi Minh City for the benefit of the Vietnamese health authorities and staff working in the field of rehabilitation .

3. Meeting preparations

An organizing committee ensuring the local organization was set up by the hospital direction. This committee managed all the organizational aspects of the conference necessary in a country like Vietnam (local authorizations , invitations sending , rentals of conference venue , logistics , etc...) .

A conference organizer agency needed to be recruited to be able to obtain official clearance for the meeting to be held in Ho Chi Minh city . This allows a smooth organization and decreases red tape issues significantly .

The call for abstracts was done through a website and a written invitations send through a mailing list of the Ministry of Health and Handicap International .

Selection of abstracts, presentations , workshops, posters and panel discussions were overseen by ASCoN executive members , members of the organizing committee .

In regard to selection of conference venue and location of workshops , special attention was given to accessibility for persons with wheelchairs . Transportation during the conference needed to be kept at a minimum in order to avoid clogged traffic conditions and challenges in relation to accessibility for wheelchair users attending the conference . The main language used at the conference was english . Simultaneous translation in Vietnamese was available through earphones for the Vietnamese delegates. Thanks to the secretariat of ISCoS , we could benefit from the use of the guidelines for organizing and hosting ISCoS conferences . This extensive document was very helpful throughout the preparation process.

4. Conference programme and schedule (see annexe 1)

The conference book details the schedule and abstract presentations. during the opening sessions , an emphasis was put on the main subjects handling critical issues in SCI management ranging from surgical management , assessment of SCI , standards of care , Asian experience of SCI management, networking , active rehabilitation (sports and psycho – social approach , urological management and sexual dysfunction . The 8 key speakers that kindly arranged their time for these sessions were of top quality !

The abstract presentation in the afternoon of the first day were selected from the calls , they covered medical rehabilitation , treatment of complications mainly with an emphasis on experiences achieved in Vietnam .

The second day was organized at the Spinal Unit department of the HCM hospital for Rehabilitation and Professional Diseases . It started with a one hour visit of the premises and a video presentation of the activities . It was followed by a set of three two hour blocks of workshops that participants could choose from according their availability . Each participant could choose 3 workshops from a choice of 12 subjects .

The third day continued with abstract presentations around mobility aids , SCI management in Asian countries (Lao PDR , India , ...) and adoption of standards of care (clinical guidelines) . This was followed by a panel discussion around wheelchair design and production in Vietnam.

The afternoon session started with a consensus formulation by the key speakers in regard to Management guidelines for SCI care in Vietnam . The provisional outcomes were presented to the audience.

A concurrent meeting for 9 provincial hospital representatives was organized to present the selection procedure for future SCI care expansion in 6 selected provinces in the two

upcoming years . This meeting was managed by the Director of Medical Rehabilitation department from the Ministry of Health and Handicap International representatives .

5.Outcomes and indicators after the conference

On the first day of the conference , 335 delegates had registered for the conference , 67 among them were coming from 19 different countries , the other part from Vietnam. (see annex 2) . For the workshop sessions, 146 persons registered for attendance to the three presentations blocks . The session on cushion design, urological management and Autonomic Dysreflexia – DVT attracted most of the delegates .

Two special demonstrations on endoscopic infiltration of bladder relaxant on the sphincter as well as urodynamic investigation for real patients were considered as an exclusivity for the Medical community in Vietnam.

The active participation of delegates to the Active rehabilitation session (where delegates played the role of wheelchair users) were seen as an original way to promote this type of activity for the health professionals .

The panel discussion on the third day, highlighted the plight of promotion for local wheelchair producers that have to resist the pressure of donations of wheelchairs that are poorly adapted to the local users and markets . This position was explained by Whirlwind International and Motivation representatives in sometimes passionate debates .

The need for clinical practice guidelines to be used in Vietnam was steered by the introduction to the public of the PVO clinical practice guidelines (one of the authors – Doctor [redacted] - of the guidelines introduced them in person) . The discussion around the SCI management principles (presented by Doctor [redacted]) got also attention as they were forwarded to the audience as a statement issued from the ASCoN executive committee . These principles will be published for distribution and information in english and Vietnamese to the benefit of centers and institutions that are planning to create and/or improve their care .

Networking activity was discussed and defined as means to enhance exchange . This was one of the reasons why ASCoN was created . In regard to some countries , networking is a means to come out of isolation for some countries while for others it is an ultimate tool for re-inforcing their recognition of their level of care practiced .

A consensus statement in regard to main SCI care guidelines was gathered among the key speakers and presented by the Chair of the organizing committee . It was however inspired from the draft of the principles for SCI management drafted by Doctor [redacted] .

As to the special session for provincial hospitals localization of SCI care , the selection process resulted in 3 hospitals that showed sufficient conditions for implementation. The representatives of the Ministry of Health of Vietnam , somewhat overwhelmed by the

importance of the conference and its stakes , decided to open a second call for another three provinces where the care could be implemented also by March 2006 .

A list of 21 posters were on exhibition during the breaks and lunches of the conference. A special mention needed to be given to the delegates from Thailand from Chiang Mai University who presented 6 posters with a very high educational value in the field of SCI management .

6. Networking and information sharing

This "torch-bearer" feature of the ASCoN conferences was promoted through four main calls for the delegates (see annexe 3) :

- All delegates had to provide their coordinates in order to receive copies of the SCI care principles as soon as they become available through ASCoN
- A call for subscription for the Asia Pacific Journal of Rehabilitation and Disability was answered by 68 delegates
- A call for becoming member of ASCoN was answered by 68 delegates
- A call for becoming member of ISCoS was answered by 9 delegates .

7. Feedback from the delegates - recommendations

A feedback form (see annex 4) was provided to all delegates and had to be returned to the registration desk at the end of the conference , in exchange for a certificate of participation.

The codification of the data (see annex 5) from this questionnaire highlighted the following points :

- high rate of attendance of all delegates to the sessions
- logistics , catering , lunches and breaks were satisfactory
- workshop sessions were highly appreciated
- simultaneous translation at the conference was satisfactorily
- poster presentation capacity was not enough explored
- panel discussions were too short
- Consensus discussion on SCI care principles was not extensive enough

8. Financial budget for the conference (see annex 6)

A provisional budget was dressed in the preparation phase of this conference focusing on the costs of organization, invitation sending, visibility for sponsors and support for selected delegates (fees and transport).

In regard to income generation for the conference, the registration fees and sponsors were the main income.

A special thanks goes to ISCoS , ICORD , International and SPIRIT for the provision of grants that allowed delegates to attend and cover the costs of the conference.

Additional budget was assured through the Handicap International project budget lines of training and conference organization .

9. Others – miscallenous

The usual encounters during dinners and breaks were an important feature for making contacts and socializing . The cultural evening could show also this year the talents and culture of the 19 nationalities present.

Breaks , lunches and momento provision were kept at an austere level in order to keep the overhead costs down to the benefit of delegates' travel and fee expenses.

The visibility of the sponsors and financers of the conference was ensured in the program book , on a series of banners at the venue of the conference and the hospital . A press statement was distributed to around 30 media representatives from written media. National Television did also a feature on the conference for the national news on Vietnamese TV. A documentary project was launched for this conference by a volunteer mandated by CRP – Bangladesh. This feature will be used for promotion purposes in the future . The Sixth ASCoN conference will be held at CRP in Dakha – Bangladesh on December 4-5-6 , 2006 .

9.Conclusion / summary

This conference is considered as a success given the results expected from a standpoint of ASCoN. The aim a gathering key member countries of ASCoN was reached. The achievements in the field of SCI in Vietnam could be highlighted to the ASCoN assembly and the Vietnamese delegates and Ministry of Health. The presence of key speakers familiar with Vietnam SCI project and recognized by ISCoS provided this conference a high level of expertise. Panel discussion should have been more extensive. Two countries were not able to send representatives due to Visa- immigration problems. The poster exhibition was not used at its full potential. Special attention on interpretation English – Vietnamese was necessary in order to expand the scope of communication to the Vietnamese health personnel as well as for official protocol reasons .

We would like to thank all the key sponsors and organizations that supported this conference financially.

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