Rotary Club of Meadow Ridge

The Four Way Flasher

ROTARY CLUB MEADOW-RIDGE BRITISH COLUMBIA CANADA

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Website: MeadowRidgeRotary.ca

Meetings: Tuesday 12 Noon

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CREATE LASTING IMPACT

AUGUST IS MEMBERSHIP AND NEW CLUB DEVELOPMENT MONTH

Happy Birthday	Happy Anniversary
	Aug 28 Patrick O'Brien & Stefanie Jeanneret

Upcoming Speakers:

Aug 25 Gordy Robson Who's Who	Sep 1 Mo Korchinski ED Unlocking the Gates Services	Sep 8

LAST WEEK'S MEETING

President **Eric Mollema** presided.

Program: **Dr. Ruth Vilayil** (pronounced "Vi-lyle")
- Global Maternal Health

Dr. Ruth Vilayil *

About Our Speaker

Ruth is a global health educator. She graduated as a specialist in Obstetrics and Gynaecology from the University of Alberta and has been a Fellow of the Royal College of Physicians and Surgeons of Canada since 2015. Part of her training took place internationally, including in New York, India, and East Africa. She subsequently spent three years working Kampala, Uganda, where she was head of the Department of Obstetrics and Gynaecology at a renowned international women's hospital.

She has a broad range of interests, including surgical education, quality improvement, and global health.

She is a Clinical Associate Professor at UBC and practises as a community gynaecological surgeon and obstetrician in Maple Ridge. She is also the regional division head of gynaecology for the Fraser Health Authority. She is the director of Women's Health for CNIS (Canadian Network for International Surgery), an organization focused on improving surgical education in low-income countries around the world.

Outside of medicine, Dr. Vilayil enjoys yoga, hiking, and sipping chai with her husband and their two sons.

Dr. Ruth Vilayil's Presentation

The presentation focused primarily on the CNIS and its work to improve healthcare through education and training in developing countries. CNIS was founded in 1995 and has been involved in international medical education for approximately three decades. A major focus of the presentation was maternal and newborn health in Sub-Saharan Africa, particularly Nigeria. The speaker emphasized that maternal deaths during childbirth remain a serious problem in the region. Nigeria was identified as a particularly important area of concern because of its high rate of maternal mortality.

The central philosophy of CNIS is that the most sustainable way to improve healthcare is not simply to provide medical services directly, but to train local healthcare professionals so that they can continue providing care and training others long after an international project has ended. The speaker also highlighted the strong connection between this work and Rotary, noting that Rotary clubs have helped support CNIS projects, including the development of surgical training facilities in Africa.

1. The Challenge of Maternal Healthcare in Africa

One of the primary concerns discussed was the high rate of women dying during pregnancy and childbirth in Sub-Saharan Africa. Nigeria was singled out as an area where the problem is particularly serious. The speaker stressed that the goal should be to prevent women from dying from complications of childbirth that can often be managed with appropriate knowledge, skills and medical resources. Improving maternal health also has consequences beyond the individual mother. When a mother dies, the effects can be felt throughout the entire family. Mothers frequently care for children, help relatives and contribute significantly to the stability of their households. Consequently, preventing a maternal death can benefit an entire family and community.

Midwives are particularly important because they provide much of the care for women experiencing normal, low-risk pregnancies and births. Training midwives to recognize complications, manage emergencies and provide safe care can therefore have a significant impact. The challenge is one of scale. Countries with high birth rates require large numbers of properly trained healthcare workers. A training model that depends entirely on Canadian or other international healthcare professionals travelling oversea**b**

2. Training Local Healthcare Professionals

The key approach of CNIS is to take medical knowledge and teaching skills developed in Canada and use them to train healthcare professionals in other countries. The organization currently has support from the Royal College for a three-year project involving the training of instructors and students. Rather than relying on expensive medical equipment, CNIS has developed relatively inexpensive simulation equipment using locally available materials. These simulators allow healthcare students to practise important procedures in a safe environment before performing them on actual patients. An important advantage of this approach is that the equipment can be replaced at relatively low cost. Students can repeatedly practise procedures without requiring expensive commercial medical simulators. This is particularly useful in environments where there may be large numbers of students but relatively few instructors or training resources. It is not unusual for approximately 30 students to be learning around one instructor and one model. CNIS improves the learning experience by providing multiple simulation models and additional instructors, allowing students much more hands-on practice.

3. Making Training Scalable

A major theme of the presentation was scalability. CNIS has reportedly trained approximately 70,000 healthcare workers through its programs. That this level of training would not be possible if the organization relied solely on individual, face-to-face instruction.

The organization therefore combines several methods:

- Local instructors
- Hands-on simulation
- Digital education
- Online videos
- Mobile applications
- Case studies
- Short, intensive in-person training sessions
- Locally produced or inexpensive simulation equipment

The digital component is particularly important because smartphones are widely available. Students can access instructional material on their phones, review material at their own pace and return to lessons when convenient. The organization is also experimenting with artificial intelligence to generate educational cases and images that are more relevant to the local environment in which students work. The speaker emphasized, however, that technology does not replace the importance of an instructor. Digital education can provide information and preparation, but hands-on training and the relationship between teacher and learner remain essential. The model is therefore a combination of digital preparation followed by focused, hands-on instruction. Students can complete some of their learning independently before the international instructors arrive. This allows the in-person portion of the training to concentrate on practical skills rather than basic theoretical information.

4. A Broad Range of Surgical and Medical Training

Although maternal healthcare and midwifery are important priorities, CNIS's work extends well beyond childbirth. Training programs have addressed areas such as:

- Safe Caesarean sections
- Obstetric surgery
- General surgical skills
- Trauma care
- Brain injuries
- Spine injuries
- Emergency care
- Midwifery

The organization has therefore developed expertise in training healthcare workers to deal with a variety of conditions that can have serious consequences when appropriate surgical or emergency care is unavailable. The speaker described the organization as having trained surgeons, obstetricians, midwives and other healthcare workers for many years. Based on its reported total of approximately 70,000 learners, the organization estimates that the healthcare professionals trained through its programs may ultimately have been involved in caring for approximately 100 million patients over the organization's history. The speaker presented this as an indication of the potential multiplier effect of training. Rather than one Canadian healthcare professional treating patients directly, training one local healthcare worker can enable that person to treat many patients and potentially train additional healthcare workers.

5. Rotary's Contribution

Rotary has played an important role in supporting CNIS's international work. The speaker particularly highlighted Rotary's role in helping establish two surgical skills laboratories in Tanzania. These facilities provide locations where healthcare professionals and students can receive practical surgical training. The speaker expressed appreciation for the Rotary support that helped make these facilities possible and emphasized that the partnership between Rotary and CNIS has contributed to the organization's ability to deliver training internationally. The Rotary connection is not limited to one club or one project. Clubs have supported different types of training, including programs involving: Trauma, Midwifery, Caesarean-section training, and Surgical education.

6. Using Local Resources

Another important element of CNIS's approach is finding ways to keep costs low and make projects sustainable. The organization does not necessarily need expensive, purpose-built medical equipment for every training exercise. Instead, it looks for materials that are readily available locally. The speaker mentioned receiving donations of materials from hospitals that would otherwise have been discarded because they were expired or no longer suitable for use with patients. While such supplies cannot be used for treating patients, they can be extremely useful for teaching and simulation. The emphasis on simple equipment and local resources is an important part of

the overall philosophy: the training system needs to be practical, affordable and capable of being maintained locally.

7. The Organization and Its Experience

CNIS is a Canadian organization with participants and personnel across Canada. The organization has been involved in international healthcare education since its founding in 1995, giving it approximately three decades of experience. The speaker herself has been involved with CNIS since 2012 and has participated in global health work since 2008. Her family moved overseas in 2017 as part of her international work. Eventually, she returned to Canada and came to the Maple Ridge area after learning that a physician was retiring and a position was becoming available. She now works at Ridge Meadows Hospital, where she is involved in deliveries, surgery and other obstetrical care. Her experience therefore combines Canadian clinical practice with extensive international healthcare education.

8. Current Focus: Nigeria

The next major project described in the presentation is focused on Nigeria. The organization plans to conduct training at eight different sites. The speaker indicated that this scale of training across multiple sites would be unusual and that, as far as they could determine, it had not previously been undertaken in this particular way. The project will involve transporting simulation equipment and other supplies to the various locations. The equipment will include items used for obstetrical and surgical simulation. The speaker indicated that one member of the team planned to travel to Nigeria in November, with the speaker herself planning to travel in February. The project is intended to build local capacity rather than simply provide temporary medical assistance. The ultimate objective is for healthcare workers in Nigeria to acquire the knowledge and practical skills necessary to provide safer care themselves and to continue passing those skills on to others.

9. The Financial Request

The immediate financial request presented to the Rotary Club was approximately $10,000. The speaker explained that $10,000 would provide sufficient supplies and equipment to take the simulation resources needed to the eight proposed training sites. The money could also be used to purchase some equipment locally rather than transporting everything from Canada. The speaker stressed that while $10,000 was the current goal, any contribution would be appreciated.

During the discussion, Ineke suggested another possible source of equipment. A local organization was described as collecting medical equipment from various locations, storing it in a warehouse and making equipment available to organizations that can use it internationally.

The speaker welcomed this suggestion and explained that CNIS was currently working largely through financial contributions and then sourcing the equipment required for its programs. Access to donated equipment could therefore potentially reduce the project's costs.

10. Questions About Mothers, Babies and International Support

During the question period, a member asked whether the primary concern was the mother or the baby. The speaker explained that both are vulnerable, although newborns are particularly fragile and high rates of stillbirth and newborn deaths remain a concern. Maternal deaths, however, have particularly wide-ranging consequences because mothers often provide care for other children and family members. The loss of a mother can therefore affect many people beyond the immediate patient. Another question concerned the effect of the withdrawal or reduction of U.S. support for international aid and healthcare programs. The speaker said that the reduction in U.S. involvement has created a significant vacuum. Although the affected programs represented only a portion of the overall U.S. budget, the amount of international assistance involved was substantial. Canada continues to invest in international healthcare, but the speaker noted that Canadian resources are not large enough to replace all of the assistance that has been lost. The result is increased competition for available funding and greater challenges for organizations working in the field.

Conclusion

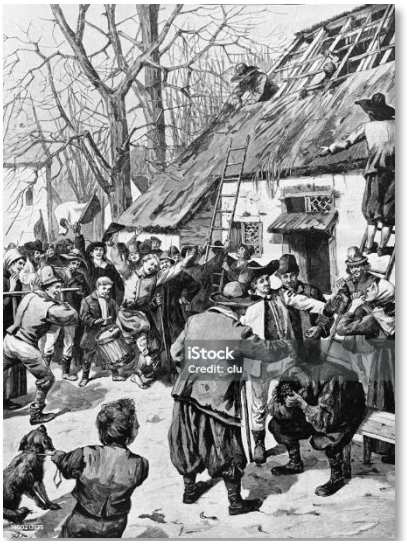
The presentation demonstrated that the Canadian Network for International Surgery is attempting to address serious healthcare challenges in developing countries through education, simulation and local capacity-building. Rather than simply sending Canadian medical professionals overseas to treat patients, CNIS seeks to train local healthcare workers who can continue providing care and teaching others. This approach is intended to create a sustainable multiplier effect. Maternal and newborn healthcare is a major focus, particularly in Nigeria, where the organization is preparing to expand its training to eight sites. The organization is also active in surgical, trauma, obstetrical and emergency-care education.

The use of inexpensive simulation equipment, locally available materials, online education, mobile technology and artificial intelligence allows CNIS to reach large numbers of healthcare professionals while keeping costs relatively low. Rotary has already played an important role in this work, including support for surgical skills laboratories in Tanzania and other training initiatives. The immediate request presented to the Rotary Club was for $10,000 to support training and equipment for the planned Nigerian project. The speaker also welcomed assistance through donated medical equipment and other resources. Overall, the presentation emphasized that investing in healthcare education can have a far greater long-term impact than providing one-time medical services. By equipping local healthcare professionals with skills, equipment and teaching resources, CNIS hopes to improve the safety of mothers, babies and other patients while creating a sustainable system of healthcare education that can continue for years to come.

Happy & Sad:

Clint: happy ... he and/or Cheryl were able to visit their daughter Peyton again (who is in Montreal at the training academy) as she was "off" for a week.

Brenda: sad … it looks like she's going to need a new roof, but **happy** - that at least they have the money to pay for it –
(but **sad** – she and Al didn't go on their vacation that they were going to take, in order to pay for the new roof!).



Lynda: happy ... she attended Gordy's 80th birthday celebration (not his 29th ??) and saw lots of the family and many old friends!

Alex: happy … to be hosting a "drop in" BBQ at their home for family and friends on August 23 - everyone is invited to drop by any time between 1:30 pm to dark…. but **sad** cause ICBC has so far not approved the repairs to their RV, which means Barb & Alex may not make it to the Rotary Camping in September!

Matt: happy... he has finished his cancer treatment, and he can resume his regular Club attendance.... (we're ALL very happy about that!)

Club Business and Upcoming Events

August 27 – 5:30 pm - Outdoor fireside at Matt and Lynda's place (in lieu of the monthly pub hub).

Members to bring an appetizer, a beverage and a chair if possible. Plates and cups will be provided. The event will provide an opportunity for fellowship in a garden setting, weather permitting.

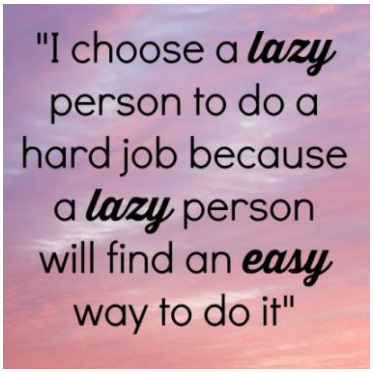
September 8 - 13 Annual Club camping weekend in Fort Langley, following labour Day.
A fellowship evening is planned for Saturday, September 12 that members are welcome to attend even if they are not camping for the entire weekend.

October 20 - **District Governor Kathleen M. Olson**'s official visit to our club.

Ecuador Literacy Project

Ineke confirmed that the club has received confirmation of matching funds for its **Ecuador project**, that will establish book corners in five schools that were found to have virtually no books during the club's previous visit. Approximately $2,200 in matching funds has been received, with approximately $2,000 in Canadian contributions already identified from Rotary clubs and a private donor. The project will proceed, and members interested in travelling to Ecuador were encouraged to contact the project organizers.

President's Closing Quote



Submitted by Laurie Anderson