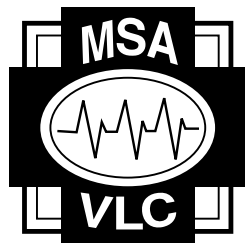


# VIETNAM LAOS CAMBODIA



## MEDICAL & SCIENTIFIC AID NEWS BULLETIN

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### VISIT TO VIETNAM - NOVEMBER 2004

On 16th November, Susmita Ghosh and I flew from Birmingham to spend two weeks in Vietnam.

We had a good journey to Hanoi and were met at the airport by Miss Thao, a charming and very efficient young woman from PACCOM (People's Aid Coordinating Committee). A car was provided for the entire fortnight (apart from two days when we were in the care of HEDO) and our driver, Mr. Mac, was a familiar face dating from 2001. He is an exceptionally good driver, who seems to have night vision and split-second accident-preventive instincts, so we never had a moment's anxiety even in the hairiest situations. He also is a mine of information concerning the best places *en route* to eat.

For the first two nights, we stayed at the Freedom Hotel, just across the road from the Ho Guom, which was fully-booked. Nothing had been arranged until the afternoon of the 18th, when we were to meet Mr. Kien, director of PACCOM, to discuss our programme, so we were able to catch up with our jet-lag.

On 19th, we departed for Ha Tinh Province, stopping for lunch at the Thanh Hoa Hotel. We reached the Binh Minh Hotel in Ha Tinh Town in time to wash and change before dinner at a nearby restaurant (recommended by Mr. Mac).

On 20th, we went to the Ophthalmology Department of the Provincial Hospital, where we met the Director, Mr. An, Mrs. Hieu (head nurse) and Dr. Phan Dinh Nhiem (director of the hospital). This is a hospital which seems only to get help



*At the Hoa Binh Hydro-electric Station*

from MSAVLC and they expressed their gratitude for this "which is long-term as well as immediate and so has allowed orderly planning of programmes to overcome blindness". (It is a team from this hospital which goes to Ky Anh to do cataract operations.) Between 500 and 700 lens extractions, with lens implants in most cases, are done annually and it would be most helpful if we could fund operations for poor people. The cost of this would be 500,000 dong per patient. We handed over £1000 - sufficient for 50 operations and 16 lenses. Ideally, what they would like annually is 700 lenses and funding for 400 operations for the poor.

At the British Friendship Hospital, we were welcomed by Dr. Le Xuan Dinh and Dr. Nguyen Dinh Lan. Over the past

year, the hospital has treated 6000 in-patients and 150,000 out-patients (the latter both at hospital and at commune clinics); over 500 surgical operations (mainly abdominal) were performed; 149 cataract operations were carried out. There have, unfortunately, been a great many injuries resulting from traffic accidents. In the clinics, uptake of immunisation has been 99.8% - a truly remarkable achievement. 38 training courses lasting 2 - 7 days for staff at village health centres and commune clinics have been organised, with 30 people in each class. Treatment for TB is undertaken at home (using the DOT system) where appropriate; if the condition is serious, at Ky Anh Hospital; if very serious, at Ha Tinh Hospital. **Antenatal and child care at the British Friendship Hospital is considered the best in the province.**

*Malaria is almost extinct, as is HDF (haemorrhagic dengue fever).* 9 cases of HIV (contracted in other districts!) have been identified; the hospital is very aware of the problem and trains staff in prevention of spread. 15 assistant doctors (3-year training) have now become fully-qualified (further 3 years) and 10 are currently on courses and one graduate has just become a Master. The hospital has recently bought an X-ray machine, 2 oxygen concentrators and a heart monitor - funded by the Ministry of Health and by the British embassy.

Earlier in the year, Dr. Nguyen Dinh Lan had written to tell us about the Blind Association of Ky Anh and to ask if MSAVLC could fund some courses in basic hygiene for blind women who had not, like sighted women, been able to attend the courses arranged by the

District Health Authorities and we had agreed to this in principle. So, we next went to the Blind Association of Ky Anh, where we met the Chairman, Mr. Tai, Mr. Dang the Vice-Chairman, and two members of their EC, Miss Sen and Miss Luong, one of whom had written a number of poems with which we were presented. The Association was founded in 1992, particularly for blind children and women. It is supported by the Central Eye Centre and has done some excellent work: in 1995, 88% of the blind were living in poverty and by 2004 this has been reduced to 29.6%. As promised, we gave the director £800 for training courses for blind women. They then asked if we could fund, for school-children and members of staff, dark glasses and sticks – for 150 in all. The cost is 70,000 dong for a stick and 50,000 dong for glasses.

Before returning to Ha Tinh, we paid a brief visit to the Cooperative for the Environment, whose work had recently been recognised nationally with an award for excellence.

On 21st, we drove to Thanh Hoa, arriving in the late afternoon. We were met at the Thanh Hoa Hotel by all our usual friends and taken to Sam Son Bay for a walk along the beach and a drink of coconut milk until it was dusk, and then to a restaurant for some delicious sea food, before returning to the hotel.

Next morning, we went to the Eye Centre, where we saw a new wing in construction, and were met by Dr. Ngo Hong, Dr. Quang (from the Health Department) and Mr. Thanh, the Deputy Director of the Provincial Health Department. Ca Thuoc and Thuong Xuan had been added to the 18 existing districts of the anti-trachoma project, which now has 110 health workers and 193 volunteers involved in its implementation. In the 18 districts, the past year has seen a further drop in incidence from 4.01% to 3.16%, while in the 2 new districts, from 8.23% to 5.47%. 938 cases of entropion were identified in the 2 new districts and 2052 remained in the 18 old ones at the end of 2003 and, in the following twelve months, 1217 operations to correct entropion were carried out, 1067 paid for by our project and 150 by patients' families, so only 1173 remain to be operated on this coming year. Health education – by leaflets, pamphlets, posters, public lectures, TV and radio broadcasts – continues; 35,000 face towels were distributed and schools have

spread the message. In 2004, MSAVLC sent £21,159.59 and £21,150.58 was spent, leaving a balance of £9.01!! Plans for 2005 will need £18,600: £13,700 initially and £4,900 after six months. We enquired about involvement of the five remaining districts and Dr. Ngo Hong replied that these were rather far-flung and would be more expensive to implement. He has promised to send details.

We next went to the Provincial Hospital where we met the Director, the Vice-Director and various members of staff. The Glostavents, we were assured, were working very well (as we had heard from Dr. Eltringham) and are remarkably economical to run, especially with regard to savings on oxygen, which is reckoned to be 10 dollars per machine per day. We enquired once again about HL/CP operations and were informed that the cost of CP repair is 2 million dong and for HL is 1.2 million dong. Once again we asked for detailed costing and were promised that this would be sent but to date we have not received this.

In the afternoon, we went to a commune primary school in Dong Son District where the deputy head, Miss Thanh, gave a report on the school's involvement in the anti-trachoma programme. There are over 440 pupils and they are examined at the beginning of the school year. The incidence in 1999 was 9.58 % and had been reduced to 3.5% in 2004. School and Eye Centre cooperate and, every Tuesday and Friday, class teachers examine their pupils for eye inflammation. The commune clinic supplies drops and ointment for any infections discovered. The environment is very dusty and pupils and teachers spray water to lay dust and sweep it up. Pupils spend the morning in school, have dinner and then rest before returning home. School distributes towels. Local authority helps with concreting, planting of grass and planting of trees. Once a week, there is a school meeting about "outside school activities" and the trachoma project is often discussed. Trachoma is also integrated with teaching. We visited one or two classes, in which children were writing – in their customary beautiful script. In one of the classes, all pupils were Agent Orange-affected and included children from other communes and here, also, their writing was immaculate.

From this school, we returned to

Hanoi and the Ho Guom Hotel. The next morning, we went to the National Institute of Paediatrics. We were disappointed not to see the separated twins – for what reason, we are not sure, but it may be because I had not stressed this when I asked PACCOM to arrange our itinerary. The hospital has 500 beds but has over 800 in-patients on a regular basis and sees 1000 out-patients every day. The Glostavent is working well and is much appreciated. Help in providing medicines for children with cancer (especially leukaemia) would be especially welcome.

That afternoon, we went to the British embassy to meet Ambassador Robert Gordon – a useful and cordial meeting.

On 24th November, we visited AGORAVIF (Agent Orange Victims Fund) at the Vietnamese Red Cross office, where we met the director, Dr. Le Ke Son. The wheelchairs which we ordered were distributed to various provinces, including Ha Tinh (and Ky Anh, of course). We were presented with a bundle of photographs of some of these. (Dr. Mac Thi Hoa was on leave during our visit and, while on leave, had married an Australian and would be moving to Australia in the near future. She came to the Ho Guom, hoping to see us, but we were out and, despite several efforts, were not able to contact her.) We wish her every happiness in her new life and feel sure that Australia cannot fail to be well-informed in future about toxic chemicals. Vietnam has about 2 million AO victims, 150,000 of whom are disabled. AGORAVIF cannot help many and wants to increase its support. It aims to help as many disabled people as possible to integrate into society and, as well as providing training, has built houses for some. So far, it has helped 2000. No charge is made to the disabled person. Cost of a house is between 7 and 10 million VND (£270 - £380); funding to provide a buffalo or poultry is between 3 and 7 million VND (£115 – £270); and a wheelchair (Vietnamese-made) is 1,300,000 VND (£50)

That afternoon, we went to the Institute of Obstetrics and Gynaecology, where we were received by Mr. Nguyen Viet Tien, the deputy director, and Mrs. Nguyen thi Ngoc Khanh, head of the Department of International Relations.

We handed over the training tapes supplied by Baby Lifeline, explained how this charity had started and how it had developed. The Institute would like to be put in touch. We were taken to see

the Glostavent, which was working well and with which they were very pleased. We were then shown a blood analysis machine which was rather ancient and was giving incorrect reading. We asked for details of the machine they would like to purchase to replace this one but have not received these to date.

**On 25th November**, in the morning,

longer becomes flooded whenever there is heavy rain! Dr. Phuong expressed her appreciation for the various pieces of equipment provided by MSAVLC (which we saw in use in the physiotherapy department) and mentioned some others, five of which we were able to fund for £700, which we handed over.



*At the Morning Star Centre for Handicapped Children*

we went to the Morning Star Centre for Disabled Children, where we were met by Dr. Do Thuy Lan. The children put on a performance for us – nearly every one either sang or danced – and we then went to the new clinic, the building of which is nearing completion. This will be very spacious and occupies four large rooms on four stories of a multi-occupation building. This is in what is almost a new suburb of Hanoi and it had been expected that the ground floor of the clinic would allow the children to go outside, into the clinic yard which would have a gate opening on to a small park, with lawns, flower beds and trees. However, the city planners have decided that, instead, this space should be used for another building. Everyone hopes that the planners can be persuaded to change their minds.

In the afternoon, we went to the Thanh Xuan Peace Village, where we were greeted by Dr. Phuong, the director and Mr. An, head of personnel. Preparations for the South-East Asia Games last year had, as expected, benefited the village by the provision of decent drainage which had been required for the new road, so the yard no



*At the Thanh Xuan Peace Village*

**On 26th November**, we went first to the Women's Union, where we were received by the Vice Director, Mrs. Do Thi Thanh Nhan. After catching up with news of various friends, we learned that the Union is much involved with HIV/AIDS prevention and is encouraging the use of condoms. The

programme involving women working with lime-stone in Thanh Hoa is proceeding apace: many cases of conjunctivitis have been identified but how many of these are allergic and how many are trachoma was not known. They are referred for medical advice, but Mrs. Nhan did not know whether they were referred to the ophthalmology department of the hospital or to the Eye Centre. We told Mrs. Nhan about the new premises for the Morning Star Centre and the decision of the city planners to do away with plans for the little park and she made a note of this, so perhaps woman power will twist a few planner arms.

We then went to the Union of Friendship Organisations to meet Mme. Nguyen thi Binh, who has changed very little over the years and is still very active. Our discussion ranged over many subjects, especially the Agent Orange problem, Len Aldis's petition and the interest it has aroused, and various news items on radio and TV and newspapers in the UK.. Mme. Binh sent good wishes to all at MSAVLC and was particularly sorry to learn of Amicia Young's death.

**On 27th November**, we went to Kim Boi District, Hoa Binh Province.

Because Professor Trinh Ngoc Trinh was abroad, he had arranged for Mr. Chau Phong to accompany us instead. However, at the last minute he had to be in Quang Tri (He is almost permanently in Ho Chi Minh City as HEDO's representative) so we were accompanied by Mr. Le Duc Khai, whose knowledge

of English was excellent but whose conversational English needed practice. It was at Kim Boi that the great hydro-electric station, funded by the USSR, was built between 1988 and 1993 and serves the entire country and it is in Kim Boi that HEDO has asked us to fund the next training of traditional midwives.

We arrived at Hoa Binh Town, the provincial capital, where we were met by Dr. Truong Quoc Chien, Vice Chairman of the Provincial Health Service, a pharmacist by profession; Dr. Nguyen Van Thoa, Secretary of the Health Department; and Dr. Bui Thu Hang, Administrator at the Department of Health. The population of Hoa Binh Province is 80 million, the majority of whom are Muong, with Kinh (whom we know as Vietnamese) coming second, and there are nine other ethnic minority groups. In Kim Boi, there are probably 165 midwives, although many midwives are part-time and not registered. Infant mortality is 8 per thousand and maternal mortality 34 per 100,000. Future plans for the province will involve the two most eastern districts, Da Bac and Moi Chau, which are very sparsely populated and tend to self-medication with traditional remedies. The province has 450 doctors, 800 nurses, approximately 300 midwives and 2,800 community health care workers. There are 13 hospitals, 214 primary health clinics, each with 2-3 staff, and 23 polyclinics with 12 staff of whom 3 or 4 are doctors. Uptake of immunisation, which is done at primary clinics, is 90%. The missing 10% is mostly due to mothers at work in the fields, some distance from the nearest clinic and 90% uptake is highly commendable.

We then went to Kim Boi, and enjoyed lunch at a commune restaurant in a rural area before paying a brief visit to the district hospital, which is currently being extended, and a longer one to the district clinic, where we met the Director, Nguyen Quang Sinh, and two of the staff, Thuong Quoc Chien and Nguyen Van Thoa, as well as Miss Thuy, of the provincial health service and Quach Xuan Vien, leader of the Youth Union. The clinic serves 35 communes and 2 towns, a population of 135,428. Chest infections (including TB) are common, especially among children, but there is not much cholera, typhoid or dysentery. However, both malaria and HIV/AIDS have increased. The incidence of other infectious

diseases is falling, thanks to routine immunisation. There is malnutrition among children and this is attributed to ignorance rather than poverty. All primary clinics in Vietnam appear to be built on the same pattern of four rooms, one of which is an "infirmery" to which one or two patients can be admitted (as we have witnessed occasionally, for example in a far-flung clinic in Ky Anh district, where a woman suffering from cerebral malaria was on an Artesunate drip).

From the clinic, we returned to Kim Boi Town and the hotel where we were to spend the night. This was a very comfortable place, with restaurant and bedrooms on stilts, set in pleasant grounds. By this time, it was nearly dark and we could see the floodlit statue of Ho Chi Minh who towers above the

were the only two during which it rained, so photography was not very successful. Uncle Ho's statue is approached by a long flight of steps but there is another, natural, representation in a range of mountains whose outline looks remarkably like a recumbent Ho Chi Minh "with his head towards Moscow".

Once again, I thought of previous visits to Vietnam – in 1997, when electricity even in Hanoi was sporadic; in 1999 when plans for the plant were the subject of a postage stamp; in 1991, when building was well advanced and the first pylons strode across the country; in 1993, when towns and cities were lit up but villages were still largely in darkness because there were no substations; and in 1994, when houses in the smallest hamlets were lit up.



*Children at the Thanh Hoa Eye Centre*

hydro-electric station, the site of which is said to have been chosen by him. We had been invited to dine with the Vice Chairman of the People's Committee of Hoa Binh Province, Mr. Quach The Tan, who proved a charming host. It was at this meal that we were introduced to a local speciality, rice cooked in young bamboo.

Next day, we visited the hydro-electric station, a vast construction. (We have been invited to sail on the lake next time we visit Hoa Binh!) Unfortunately, the two days we were in the province

**On 29th November,** we were delighted to have a meeting with Miss Ton Nu Thi Ninh, a Member of the National Assembly of Vietnam, who is Vice-Chairperson of its Committee of Foreign Relations and was formerly Vietnamese Ambassador in Brussels. (She had appeared briefly in the Channel 4 programme about the alleged religious persecution in Vietnam.) It had been intended that we should spend half-an-hour with her but, at the last minute, she had to go to Washington that afternoon. However, she still received

us for fifteen minutes, which proved extremely useful.

In the afternoon, we went to the VUFO (Vietnam Union of Friendship Organisation) - NGO Resource Centre where we met David Payne, the Co-Director. As before, we had an interesting exchange of views and learned some of the news which does not get into the papers. He has, incidentally, acquired a very positive reputation for his understanding of, and

ability to speak, Vietnamese. (This we had learned from Thao).

**On 30th November**, in the morning, we visited the Ministry of Health, where we met Dr. Tran Thi Giang Huong, Deputy Director-General of the International Cooperation Department of the Ministry. She proved both practical and informative concerning banking arrangements and made some useful suggestions. New regulations were introduced by the Vietnamese

government about eighteen months ago with the intention of preventing Vietnam being used for money "laundering". These regulations are easy for Vietnamese organisations but rather more complicated for foreign ngo's. After discussing progress in general health in Vietnam, such as the uptake of immunisation and the remarkably speedy control of SARS last year, we said we hoped it would not be long before the government felt able to raise the threshold of income above which people are not eligible for free health care, citing the case of the employees at the Cooperative for the Environment. Dr. Huong told us that the government had recently introduced increased assistance for children under 6 years of age and under in poor families.

We were entertained to lunch at the fish restaurant, which we had first visited in 2000, by Mr. Phong of PACCOM, during which we discussed briefly our plans for our fortieth anniversary in 2005.

We departed from Hanoi airport five minutes before midnight and had a comfortable and uncomplicated flight home.

*Madeleine Sharp*

*At the Primary School Dong Son District  
Thanh Hoa Province*



## A MESSAGE FROM THE CHAIRMAN OF THE EXECUTIVE COMMITTEE

2005 is a year of anniversaries for Vietnam, several involving MSAVLC: on 30th April, it will be 30 years since the war with the USA ended; in June, we celebrate the fortieth anniversary of our founding and, in October, it will be twenty-five years since the opening of the British Friendship Hospital at Ky Anh.

We are hoping to arrange for a small group of supporters to visit Vietnam in October. If you would be interested, please contact the Hon. Secretary.

You will see that, in 2004, we spent a total of £85,000 in medical aid to Vietnam, Laos and Cambodia, plus £7,000 to the North-East Wales Institute for the second year of the post-graduate scholarship for Dr. Nguyen thi Hao, a Vietnamese medical scientist.

As we have remarked so often, there is still so much for us to do in the three countries of Indochina. Apart from any other medical problems, the awful

legacy of Agent Orange grows year by year. We know that everything we do is much appreciated by the people involved and it would be really tragic if we had to close down, but we realise that, if we are to continue, we urgently need fresh blood on the Management Committee and on the Executive Committee. Therefore, I appeal in particular to all supporters in the Greater London area to make a special effort to attend our AGM. No date has yet been fixed but you will have at least three weeks' notice.

The Management Committee meets once or twice a year; the Executive Committee meets, usually on a Saturday afternoon, six or eight times a year. The work is not onerous. Would you be interested in joining a committee? If so, please contact Madeleine Sharp.

In addition, if anyone could help with the mailing of our News Bulletin, we should be most grateful. This happens

four times a year and generally takes about three hours (depending on how many helpers there are). We have always had lots of support from the Vietnamese embassy. The Ambassador very kindly allows us to use a room and we are made very welcome.

As we consider celebrating our fortieth year and all that has been achieved, we should appreciate suggestions and offers of help from each and every one of you. We should like to combine celebration with raising a record amount of money. We are planning one or two events. Professor Shellard is writing an account of our activities and adventures and an up-date of the "Short History" which was started by Dr. Joan McMichael-Askins in 1985, is in preparation, but suggestions from supporters for events nationally and regionally would be very helpful.

# DURING 2004, MSAVLC PROVIDED MEDICAL AND SCIENTIFIC AID TO THE VALUE OF £92,014.96 AS FOLLOWS:

JANUARY	£9,200.00	National Hospital for Obstetrics and Gynaecology "Glostavent" anaesthetic machine
	£9,200.00	National Hospital for Paediatrics "Glostavent" anaesthetic machine
	£10,000.00	"All Ears Cambodia" Training of 2 student audiologists
	£678.74	Co-operative for the Environment, Ky Anh District Medical insurance for 30 employees for 1 year
FEBRUARY	£6,600.00	HEDO Training of 100 traditional midwives in Lang Son Province
	£13,500.00	Thanh Hoa Eye Centre Anti-trachoma Project
	£2,000.00	AGORAVIF 30 Vietnamese-made wheel chairs
MAY	£3,456.22	Morning Star Centre for Disabled Children Medicines for major neurological conditions
	£3,000.00	Cambodian Health Committee For treatment of Tuberculosis, Chantrea, Svay Rieng Province
	£3,000.00	North East Wales Institute (NEWI) Grant for Dr. Hao
	£7,500.00	"All Ears Cambodia" Audiology Programme
JUNE	£1,000.00	National Hospital for Obstetrics and Gynaecology For purchase of multivitamins for expectant mothers
JULY	£7,680.00	Thanh Hoa Eye Centre Anti-trachoma Project
OCTOBER	£3,500.00	Medical Rehabilitation Centre, Pakse, Champasak Province, Laos Audiology Programme
	£4,000.00	"All Ears Cambodia" Audiology Programme
NOVEMBER	£4,000.00	NEWI Grant for Dr. Hao
	£1,000.00	Ha Tinh Provincial Hospital Ophthalmology Department Cost of 50 cataract operations + 18 intra-ocular lenses
	£1,200.00	British Friendship Hospital, Ky Anh £1,000.00 for cataract operations £200.00 Dr. Joan McMichael-Askins Memorial
	£800.00	Ky Anh District Blind Association Primary Health Training for Blind Women
	£700.00	Thanh Xuan Peace Village For purchase of medical equipment.

# COVENTRY INTERNATIONAL PEACE PRIZE

On 14th November 2004, Dr. Madeleine Sharp received the Coventry International Peace Prize, in recognition of her long-standing commitment to peace and advocacy, immense contributions to human rights and humanitarian causes, especially in helping victims of the Vietnam War and having been the instigator of many peace initiatives. The citation goes on to say “Madeleine strongly believes the advocacy and relief efforts to which she has contributed are essential out-pourings of her Christian understanding of the world... and she hopes to be remembered for her strong inclinations to work for the rules of

international treaties and looking for the establishment of the kingdom of God.”

This annual award is given jointly by the Cathedral and the City Council on a date as near as possible to the anniversary of the destruction of the cathedral during the Coventry “blitz” of 1940. (On this occasion, it was the actual anniversary.) As the weather was fine, the presentation, by the Bishop of Coventry and the Lord Mayor, took place in the cathedral ruins during a short service commencing with the cathedral’s Litany of Reconciliation, which is recited daily in the ruins. Among the many people present, from Coventry and farther afield, were H. E.

Ambassador Trinh Duc Dzu and Mme. Ta Kim Son. Towards the end of the service, the choir sang the Lord’s Prayer in Vietnamese.

In the cathedral ruins, there is a bronze statue entitled “Reconciliation” – two kneeling figures embracing. This was unveiled by the sculptress, Josefina Vasconsales, on Hiroshima Day 1995, and there is an identical statue in the Peace Park in Hiroshima (both were paid for by Sir Richard Branson) and it is a miniature of the statue plus a large framed certificate which is the Peace Prize.



# AMICIA YOUNG – 22nd NOVEMBER 1914 - 3rd NOVEMBER 2004

With the death of Dr. Amicia Young on 3rd November 2004, Vietnam has lost a loyal friend and MSAVLC a very distinguished long-standing member of its Executive Committee.

Dr. Young was born in Solwezi, Northern Rhodesia, where her father, Frank Melland, was Resident Magistrate. She was the eldest of four children. The family returned to the UK when she was nine and later settled in Caterham.

In 1934, she went to Imperial College and was the only girl in her year to read Botany. In 1937, she went to the Johns Hopkins University in Baltimore on a Rockefeller scholarship, to do research on chromosomes. It was in Baltimore that her interest in music developed and she heard Rachmaninov, Chaliapin and Toscanini. She cycled around New England and into Canada and drove across the United States to California and back. She returned to England on 3rd September 1939, the day war on Germany was declared.

She completed her Ph.D. in 1941, at Cambridge (where some of the London colleges had been evacuated) on "*The structure and development of the salivary gland chromosomes of Chironomus larvae*". She was also a "guinea pig" for the Cambridge Department of Nutrition (McCance and Widdowson) in their dietary experiments during development of the wartime national (fawn) loaf. She worked for the John Innes Horticultural Institute in Merton in 1941/42. In 1942, she was sent by the British Council to teach English in Chile for two years. While waiting for a convoy to take her to Chile, she worked in a rest centre in Deptford for people made homeless by the blitz. In 1950, she married Commander Edgar Young. Their son, Simon, was born in 1952.

She was active in her union, the Association of Scientific Workers, and the World Federation of Scientific Workers and edited their journals for a period in the 1950's and she went with a WFSW delegation to Peking in 1956. She remained active in her union until very shortly before her death.



In 1958, with her husband, she visited the northern zone of Vietnam and, when the American war with Vietnam commenced in 1965, she became Secretary of the British Council for Peace in Vietnam, with Lord (Fenner) Brockway as its Chairman.

In the late 1960's she was appointed Assistant Secretary of the British Ornithologists' Union, for which she worked for over ten years, first at the Natural History Museum and then in the Zoo. In the same period, she was nominated by London Trades Council to be a member of the Thames Water Authority, where she was glad to be able to use her scientific knowledge. She retired from the BOU in 1983. She had been widowed in 1975 after twenty-five years of a happy and fruitful

partnership.

Although the war in Vietnam had ended in 1975, she continued her involvement with its people through MSAVLC and was elected to its Executive Committee, where her wide experience and scientific knowledge – especially on the environment – proved very useful. When the UK Working Group on Land Mines (later Landmine Action) was formed and MSAVLC became a member, she was our representative, and attended their meetings even when she had become physically very frail.

"Sadly missed" has, unfortunately, become something of a cliché in obituary notices and so to have lost impact. In Amicia Young's case it is quite literally true. We have lost a friend and colleague of high ideals, absolute integrity, self-sacrifice, moral courage and a burning zeal for the betterment of humanity and we count ourselves fortunate to have known and worked with her.

*Margaret Methley and Madeleine Sharp, accompanied by Mrs. Dzung from the Vietnamese embassy, were able to attend Dr. Young's funeral at St. Marylebone Crematorium on 12th November 2004. A bed at the British Friendship Hospital, Ky Anh, is to be endowed in her memory.*

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## GRATITUDE & REGRET

We are deeply grateful to the late Mr. W. J. Clary of Tunbridge Wells, a generous and regular supporter for many years, for a legacy of £2000. As always, when MSAVLC benefits in this way, we have mixed feelings. We send our heart-felt sympathy to his family and friends.