



IOA TODAY

BRINGING YOU OSTOMY NEWS FROM AROUND THE WORLD



FINAL EDITION

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From The Desk Of The Editor Stuart Schaefer, Editor

As many have most likely heard IOA is in the process of changing. That includes the Website and this newsletter. Please read further within this issue about all the changes coming.

I took over as the IOA Webmaster (www.ostomyinternational.org) in June of 1998 after being approached by Ken Aukett who at that time was the immediate past president. After some negotiation I agreed to take on the task. Before that many may not be aware but I was the one who brought to the Internet the first Ostomy related Website when I started the United Ostomy Association site (UOA) now know as United Ostomy Association of America (UOAA) www.ostomy.org around 1994.

Over the past twelve years I brought to the table some new ideas to help move this organization forward in the world of the Internet. First I started the electronic newsletter know as the IOA TODAY. This newsletter with the help of Di Bracken has provided Ostomy related information from around the world. With the IOA magazine ending a few years ago this newsletter became even more important as it is the only communications being provided besides the Website.

Over the years we had decided it was to large in size as it was reaching with some issues over 20 pages. It was becoming more like a magazine. So we changed the format to a maximum of eight pages with only the Presidents report and Regional Presidents reports. Currently the newsletter is provided four times a years. However with that said the last issue as you know it will be published on or about December 1, 2010. At this time I am not really sure what will happen until after the World Meeting taking place in Frankfurt, Germany this month.

A few years ago I went up and beyond my current contract with IOA and redesigned the Website to the current look. I felt at that that it was time to updated to a new look. Tried to make it as easy as possible to navigate. At that time a Publications page was added witch brought you links to magazines and newsletters form a number of Ostomy related sites across the world. Also added a Regional Events page. Of course other important pages where added.

Three years ago I started the IOA Blog (www.ostomyinternational.org/ioablog/). The idea behind this was to get all Regional Presidents to post current and upcoming information about their region. However only Di Bracken, Past President and Arne Holt, European Regional President took advantage of the Blog. Many may not understand, but Blogs are now one of the most powerful communication tools on the Internet. In fact the IOA Blog receives more hits on that page then any other page on the IOA Website.

Now after nearly twelve years (since 1998) I will be leaving the origination on December 31st. Di and I have tried to bring to you the most current Ostomy related information via this newsletter for the past 8 years. Hopefully the new organization will continue some sort of communications.

At this time I am not sure what will be happening with the current IOA Website. I am pretty sure it will continue in some fashion.

Now as for me I will continue on with my photography work. I am in the starting phase of doing a photo book of some my my work from the past 30 years. Also at this time I have two places in this area (Gulf Breeze & Pensacola, Florida) that are now displaying my photography work. Also currently working on producing my first video commercial of a local business. If you are interested you may keep up me via my personal Website: <http://www.stuartonline.com>. Be watching the site as some changing are coming including a new Blog about my photography adventures.

Until we meet again!

A stop and a change!

This is really the last issue of IOA TODAY. I know that some of you will miss it as it gave ostomates all over the world the opportunity to read what was going on, whether it was in Asia, South Pacific, Europe or in the Americas. But just a few ostomates used this wonderful form of news. It's likely that many hundred thousands of ostomates have access to IOA TODAY via the internet, but just a few hundred really opened it and read it.

The future of this electronic magazine was one of the issues the new IOA Coordination Committee dealt with during their first meeting which took place in Frankfurt, Germany in mid November. The six members of the CC had no problems making a consensus agreement to stop IOA TODAY . Reason: too few ostomates read it!

It is the IOA CC's hope that when a brand new website is launched sometime next year, there will be a lot of postings from ostomates worldwide giving ostomates – and also others who have an interest in ostomates – the opportunity to read about fellow ostomates all over the world.

As you will understand, a new website is to be designed and launched next year. The task will be undertaken by a young group lead by Janet Paquet from Canada. She will engage young ostomates with web skills to design the site. Hopefully, many more ostomate associations, local chapters, and regional associations will use this website eagerly.

IOA TODAY filled a past need and we recognize the work that two dedicated persons have done for many years. I am talking about Di Bracken from Canada and Stu Schaefer from the United States. Those two have worked on IOA TODAY and done a marvelous job

Stu Schaefer, an eager Florida located computer artist, has been IOA's webmaster for many years. I know Stu also is a bit disappointed that the blog site he designed did not get many entries. Anyway I will, and I believe all ostomates will join me in saying thanks to Di and Stu for their great work. I do not know how many hours they have used on IOA TODAY and the website. I just know it's many, many!

Thank you Di! Thank you Stu!

Arne Holte, member of the IOA CC on behalf of the IOA CC

Message from Dr Harikesh Buch Former President Of IOA.

Greetings from cool Mumbai. It is little unusual for us to have rains in end of November but it has been raining since last few weeks in Mumbai.

We had very successful World Council meeting in Frankfurt, Germany from 17th to 20th November 2010. Delegates from 43 member countries participated at this very important meeting.

The recommendation of the task force appointed for suggesting restructuring IOA were accepted with few minor amendments by the world council members. There fore amended constitution as suggested by the task force was accepted, adopted & it substituted the old constitution of IOA.

The three new regions of IOA will be Europe as it is (EOA), both Americas - Canada- Central America & Caribbean Islands & Mexico will form Ostomy Association of Americas (OAA) & Asia- Australia - New Zealand will unite to form a new region called Asia South Pacific Ostomy Association (ASPOA).

Two representatives from each new region will form the new co-ordination council & regions will have its own EC & they will be more autonomous.

The new Co-Ordination council members are as follows.

Mr. Barry Maugham - Chairman (From ASPOA)

Mr. Michiaki Takaishi - Member (From ASPOA)

Mr. Arne Holte - Member (From EOA)

Mrs. Ria Smeijers - Member (From EOA)

Mr. Kenneth Aukett - Member (From OAA)

Mrs. Teresa Antequera (From OAA)

I wish the new Co ordination committee all the best in their future work & offer my help when needed.

I would like to thank Mr. Gerhard Englert & Mrs. Maria Hess of Deutsche ILCO, Di Bracken, and Gene Zapf & Barry Maugham for their tremendous efforts in organizing this meeting.

I would like to give my special thanks to Mr. Alan Meyer, IOA legal adviser- since its inception, for being there with us for this very important meeting in Frankfurt & guiding us in making us understand the legal implications of the task force recommendations & adopting & accepting the new constitution as suggested by the Task force members.

My special thanks also to IOA web master Stuart Schafer for his dedication & expert help not only in managing our IOA website but also managing IOA Today publication for so many years. His expert photographic skill also was used at IOA's major events for the last so many years. His Stats reports of IOA Today guided us on how to make IOA Today more popular amongst member countries.

I would also like to thank all the IOA EC members for their continuous support to me to manage IOA affairs from 2008 to 2010.

Thanks with regards
Harikesh Buch

IOA Vice President's Report

In August 2008 an invitation was received and accepted to assume the role of IOA Vice President with responsibilities for communication within the IOA EC and being convenor of the team to organise the World Meeting in Bangkok.

In 2007-8 a Task Force to examine the World Meeting and where it should be held was formed and in the report to the EC it was recommended that the meeting be in Bangkok. This was ratified at the June 2008 EC meeting in Slovakia and the Task Force (Di Bracken and Brenda Flanagan, and Barry Maughan) was commissioned to plan the meeting with Doug Graham the liaison between the EC and planning committee. The convening of the World Meeting was later passed to the vice president when he was appointed to this position with Doug Graham remaining on the World meeting committee.

Communication/Meetings

Ideas re how the IOA EC conduct business was discussed with the President and IPP at the November AOA conference and from those meetings it evolved with further discussion that email meetings on agenda items were to be discussed on a web based forum.

Dream Soft Solutions (President's Nephew's company) were able to develop a very useful website where topics could be discussed and decided for a minimum cost.

This has provided a much more efficient way to reach decisions. When topics have been closed the secretary has written a minute summary.

All decided and closed items are in a folder for EC members to access.

In the future it is recommended that such a system is continued as it is an inexpensive way to conduct business instead of face to face and teleconference meetings.

A further key part of the communication task given was to report to the member associations on the activities of IOA for the proceeding year with the efforts of the IOA EC in carrying out and setting up projects to benefit ostomates being highlighted.

This was achieved in February and a report was sent out that received positive appreciation.

It is recommended that such reports continue to be a function of the IOA EC or the proposed Coordinating Committee.

World Meeting 18-20 November 2010

In July 2009 the vice-president as convenor of the World meeting was asked to travel to Bangkok and sort out possible venues for the world meeting in November 2010. With the assistance of the Asian division of Coloplast in Hong Kong and a company called Transmedic in Bangkok 5 possible sites were visited.

After asking each venue to submit a requote in 2 weeks and a comparative spreadsheet presented to the meeting committee the EC endorsed the First Hotel as the venue for the 18th -20 November 2010.

Following the insurrection in Thailand the EC in May asked for the Meeting to be cancelled and another site found if possible on the same dates.

This was a challenging task in June and with the support from Coloplast Hong Kong, Ken Aukett, Gerhard Englert, Francisco Martinez and President Harikesh 6 venues Cordoba, Miami, Zhuhai (China), New Delhi, Hamilton (NZ) and Frankfurt were compared and Frankfurt was the final recommendation.

The World Meeting committee (Di, Brenda, Gene and Doug) and EC members along with Deutsche ILCO and Gerhard Englert and Maria Hass are to be commended for their efforts in getting the meeting organised.

Arranging meetings from a far will always present a challenge. The hotel has been particularly co-operative thus far and we expect this to continue. At this time more than 40 countries are likely to have delegates in attendance and this has surpassed our expectations and the Charity Trust are to be commended for their making available funding to allow some member associations to be represented.

Acting President

Due to the unfortunate ill health of our president it was necessary for the vice president to become acting president from October 2009 until June 2010.

This was both a challenge and a privilege.

International Contacts

Following the unavailability of the president to travel, the vice-president was invited by Coloplast to travel to Korea and speak to the Korean Coloproctology Conference held in Seoul and address a large number of surgeons and ET nurses there on the Quality of Life of Asian Ostomates.

Prior to this the opportunity to visit 3 Ostomy chapters in Daegu, Seoul and Daejeon was made possible.

Interviews were held with a Korean Daily Newspaper and a Medical Journal

In September along with the IOA President (AtH project) three Chinese Ostomy Clubs were visited in Shanghai, Nanjing and Hangzhou with the aim of strengthening the clubs using the Visitors programme and elements of the ISCAP programme.

The support of all members of the IOA EC is acknowledged in carrying out these tasks.

Barry Maughan

REPORT FROM THE IMMEDIATE PAST PRESIDENT – DI BRACKEN

As requested by the president, I have assumed the responsibility for the following activities:

- Official office address remains at my home. An office report is attached.
- Acted as a liaison between IOA and the IOA Webmaster. See report submitted by Webmaster.
- Acted as associate editor of IOA Today.
- Acted as a liaison between IOA and ALADO to facilitate the dispersement of all IOA communications. See attached report.
- Assumed responsibility of Chair of the task force appointed by the President to undertake a comprehensive review of the workings of IOA. These findings were reported to the IOA Executive Council, along with recommendations for its review and approval. The proposed changes to the Constitution were accepted and will now go to the World Assembly for discussion and further action.
- Acted as a contact for persons from the African continent with a view to establishing associations in African countries and eventually establishing an African Region. See report attached.

I also represent IOA on the Dansac Foundation. The purpose of this Foundation is to increase the quality of daily life for those living with a stoma.

On an ongoing basis, I have provided advice and counsel, based upon my experience, to the President and fellow members of the IOA Executive Council as requested. One of the things I enjoy most, is I continue to work as a “leadership talent scout” looking to identify committed individuals who, with the right encouragement, could become future leaders in IOA. I particularly look towards the ALADO region, where I act as a liaison, and I am encouraged by both the activity and the number of people who are interested in developing ostomy awareness.

It has been both an honour and a privilege to work on behalf of IOA, and it has enriched and broadened my personal life; something that I will always cherish. While I will not hold a specific office in the future, I will continue to do my best to serve the needs of IOA, and wish the organization continued success.

REPORT ON CONTACTS IN AFRICA

The past president of IOA is entrusted with looking to development in Africa, but I have to report that it can be quite challenging to maintain hope. There are individual contacts across the continent, but every time I think there is something going to happen, obstacles arise and interest wanes. Sometimes it is the political situation that poses problems, but establishing an association, as you know, requires an ongoing time commitment and I think it's only those that are really interested that persevere. However, I believe that there is light at the end of the tunnel and I share with you now our work in progress.

ETHIOPIA

I have had the pleasure of working with an ostomate introduced to us by FOW USA. Aberra has proved to be most enthusiastic about establishing an association in Ethiopia and from our initial contact, when he did not know where to start, we have made tremendous progress. I presented, and was supported in a request for funding of US\$3,000.00 to travel to Ethiopia to help organize an ostomy association in Addis Ababa, Ethiopia. Plans were well advanced when I encountered some health issues and had to cancel my plans to travel to Ethiopia. Arne Holte agreed to take over and has not only made contact with Aberra but also with a Norwegian doctor who is active in Addis Ababa. Arne waits to here from Aberra for a possible date to visit Addis Ababa and begin the work to set up an organization in Ethiopia.

GHANA

I received an email from Sheelah Zapf on February 4, 2010 in regard to a contact from Ghana. I followed up to see if there was anything that IOA could do to help set up an ostomy association in Ghana but there was no response. I sent more than one request but nothing happened – no response, so I just kept the information on my computer. On **July 16, 2010** I received an email from a young lady in London who shared with me the following information:

“I am an ostomate myself. On my last visit to Ghana in 2009, I made an investigation to see if there is an ostomy support group in Accra Ghana but there was nothing at all there. I will like to setup a support group there to help other ostomates in Ghana; I will need the help of the IOA to enable me to do this goodwill task. Please do get in touch. Thanks. “

I responded to this email on August 9th 2010 with the information that I was forwarding this to Arne Holte for him to handle. Arne responded the same day but has since then has received no further communication. However, on November 5th I received the following email:

“Hi Dib, Good morning. This email is just to let you know that I will going to Ghana from the 25th Dec to 9th March 2011. Is there anything you will like to do regarding the above subject whiles in Ghana to start the ball rolling, or I should wait for you. Kind regards.”

I have forwarded this email to Arne and, between us, we will sort out how we can get this young lady committed to exploring the possibility of setting up an association in Ghana.

KENYA

Lawrence Ikahu Gichini from Kenya applied to the Dansac Foundation for monies to help him cover travel expenses to develop a national association for ostomates in Kenya. His project has four objectives:

- 1) To identify the number of patients in Kenya and their most pressing concerns.
- 2) To establish a national association for ostomates in Kenya
- 3) To create awareness on stomas
- 4) To rouse interest of key players in the industry

The Dansac Foundation board decided to provide Lawrence with financial support to do this

FURTHER OPPORTUNITIES

There are other contacts that have been made through the European Region. I refer to two in particular.

- Marie Steen from ILCO Sweden is working on a project in Zimbabwe
- Giuseppe De Salvo through a contact has conducted a survey in a hospital of 'Ndamena in Cameroun. As a result of this survey it should be clear what IOA can do to investigate the situation in Niger and Tongo.

There is obviously the need in the countries in the continent of Africa to develop ostomy associations. The question as to how best meet this demand needs to be addressed by IOA.

LIAISON BETWEEN ALADO AND IOA

ALADO is a region where it is not possible to meet the requirements of the ostomy population conducting communications in English. With the exception of Brazil where the population speaks Portuguese, the language spoken in South America is Spanish. The leadership of our member associations in ALADO do not speak or read English, so communication has been very difficult. However, we are fortunate that we have Alexander Machaca who is prepared to act as a translator for our communications. Alexander, though not an ostomate himself, has been a translator initially for Bolivia and then ALADO. We have worked successfully together since 2004. All IOA communications sent to the Regional President are copied to Alexander for translation. Replies from the president are translated into English by Alexander. I have worked with ALADO through email and by telephone to assist them with any major documents that needed to be written.

At the IOA Executive Council meeting in Ljubljana, Slovenia in June 2008, on ALADO's behalf, I presented a proposal for funding to hold a Regional meeting in Bolivia, and to generally promote further activities in the area. Through the sponsorship received from our partners in industry, monies were made available and significant progress has been made in the ALADO region. Visitor and ISCAP training took place in 2008 with very positive results. Details of the activities that have taken place can be found in the ALADO Regional Report presented by President Teresa Antequera.

Proposed changes to the Constitution were translated into Spanish by Alexander Machaca and this has been most helpful for the member associations. We have kept in close contact to ensure that any information sent out by IOA that required a response was translated and sent to all member associations in ALADO.

Di Bracken.
November 2010

THE DANSAC FOUNDATION

Foundation Purpose

A stoma changes many things in a person's life. Daily routines, activities, body image and sex life can be affected – and some still have to fight back on severe illness.

Dansac Foundation is dedicated to improve the quality of daily life for those living with a stoma. The Dansac Foundation aims to financially support projects that fall within one of the following two categories: Quality of Life – Quality of Care.

Quality of Life

The overall purpose of the Dansac Foundation is to increase the quality of daily life for those living with a stoma. Dansac Foundation will financially support projects that fall within one of the following categories:

- Physical and psychological therapy for people with a stoma
- Recreation for people with a stoma
- Activities that enable people with a stoma to maintain an active lifestyle

Quality of Care

People with a stoma are not always able to cope with their stoma on their own. Often they need a helping hand from their stoma care specialist. The Dansac Foundation perceives Quality of Care as the caregiver's ability to:

- Take a holistic view of people with a stoma
- Support the patient's return to their lifestyle before stoma surgery
- Take part in stoma care research projects

Dansac Foundation Committee

The committee of representatives is composed of members from Ostomy Associations, Nurse Associations and Dansac. The Committee members are:

Vigdis Hannestad, Dansac, Global Clinical Services Manager
chairperson
Morten Just Hansen, Dansac, Global Marketing Director
Rosine van den Bulck, ET, President of ECET
Julia Williams, ET, Burdett Institute, St. Marks
Di Bracken, Immediate Past President IOA
Karoly Illy, Paediatrician (Past President IOA 20/40)
Marlene Romme Moerch, Dansac Clinical Marketing Coordinator
(Foundation Secretary)

Applications can be submitted by Stoma Care Specialists, national stoma associations or health care professionals with special interest in stoma care. They can seek financial support for either a development project or individual assistance for a patient/ostomate. Only on line applications are accepted and the application form is on the Dansac website : dansacfoundation@dansac.com

The Dansac Foundation Committee meets twice a year to evaluate the incoming applications - in April and in October. The deadlines for submitting an application are 28th February and 31st August

The first face to face Committee meeting was held in August 2009. It was decided to financially support six applications to the amount of 14,000 Euros. The successful applicants and their projects can be found on the Dansac Foundation website - www.dansac.com

The second face to face meeting was held on October 1, 2010. Eight applications were considered with € 30.800 has been awarded. This is a significant increase over last year. What is also interesting is that in 2009 all applications for funding came from countries in Europe. At this past meeting we were all pleased to see applications from Australia, Japan and Kenya - the word about the work of the Foundation is certainly becoming more widespread. One very interesting application was to establish an ostomy association in Kenya. I have presented more information on this in my report on development in Africa.

The Dansac Foundation is currently part of Dansac Clinical Marketing. Negotiations are underway to establish Dansac Foundation as a proper foundation. The money for the foundation comes from the Clinical Marketing budget and from sales of Promotional and Educational items from GMO to local subsidiaries.

Dansac Foundation is still a 'young' project and procedures and guidelines are currently being developed. It is most rewarding to serve on this board and have a part in the decision making process. Because of my international involvement with the IOA over many years, I have been able to contribute valuable information and I believe that it is important that IOA continues to have a presence on this board.

Di Bracken, Immediate Past President.

ALADO REPORT 2007 – 2010

TERESA P. ANTEQUERA, ALADO PRESIDENT 01 NOVEMBER, 2010

BOLIVIA:

FROM SEPTEMBER 6 TO 9, 2008 THE BOARD MEETING X WAS DONE WITH THE PARTICIPATION OF DR. HARIKESH BUCH, DI BRACKEN, DR. PEZCOLLER CARLO, ASTRID DOUG GRAHAM, JOSE VARGAS MORALES AND ALL THE BOARD IN FULL.

The purpose of this meeting was: AMMENTMENTS TO THE CONSTITUTION, consistent with THE NEW IOA STATUTES DONE IN PUERTO RICO CONGRESS. DOING PLANS AND / OR PROJECTS IN THE MEDIUM, SHORT AND LONG TERM. MEMBERS REACTIVATE, ALADO ISCAP TRAINING.

AT THE MEETING WAS APPROVE THE NEW MEMBERSHIP AS ASOSDELPA (PARAGUAY), CORAOS (CHILE) AND FEGEST (BRAZIL) AFTER THAT ENTERING THEIR REQUEST TO THE IOA

ONE OF THE TASKS OF THE MEETING WAS TO CONTACT THE ASSOCIATION OF VENEZUELA, PERU, ECUADOR AND URUGUAY. THE RESULTS OBTAINED WAS:

VENEZUELA:

THE PRESIDENT OF THE ASSOCIATION OF VENEZUELA, MRS NELIDA MORENO WASN'T MOTIVATION TO GO FORWARD WITHOUT THE ASSOCIATION FOR THE ABUSE THAT SHE HAD SUFFERED THE ONCOLOGY HOSPITAL WHERE SHE WORKED, AND A NURSE THAT WAS WORKING JOINT TO NELIDA IN ORDER TO MEET AGAIN PEOPLE WITH AN STOMA, WAS BEING A HARD WORK AND TO GOTTEN TOGETHER 200 OSTOMATES PEOPLE.

PERU & URUGUAY:

BOTH PERU AND URUGUAY CAN NOT BE CONTACTED.

ECUADOR:

WE WERE IN CONTACT WITH DR. NESTOR GOMEZ AND MR. FAUSTO GORTARI, WHO CARRIED OUT THE ASSOCIATION WITH GREAT DIFFICULT AND THE LADY MARIELA ACERO DE ROMERO, ON BEHALF OF ALADO (as vice-president) VISITED THE COUNTRY FOR PARTICIPATE OF THE COLORECTAL COURSE THAT WAS ORGANIZED BY THE DR. GOMEZ. ON 19 JULY 2009 IN GUAYAQUIL.

THE VICE PRESIDENT OF ALADO THERE, PRESENTED ALL THE LABOR AND WORK THAT WAS ALADO DEVELOPING, AND INVITED TO ALL F THEM TO PARTICIPATE ACTIVELY, HOWEVER, HAVE MADE EVERY EFFORT TO VISIT THE ASSOCIATION OF THIS COUNTRY, THERE WAS NO POSITIVE RESPONSE TO ALADO.

PARAGUAY:

TOOK PLACE IN PARAGUAY THE COLORECTAL COURSE AS PARALLEL DEVELOPMENT TRAINING COURSE TO NURSES ON SEPTEMBER 10 - 11 AND 12, 2009.

ARGENTINA:

ON SEPTEMBER 14, 2009 OPENS THE FIRST SCHOOL FOR E.T. NURSES TO LATINOAMERICA HELD IN CORDOVA. ARGENTINA AND THE FIRST INTERNATIONAL CONFERENCE OF OSTOMY AND WOUND, FROM 10 TO 18 SEPTEMBER 2009, WITH CLASSROOMS, SKILLS, ETC. THIS EVENT WAS GREAT SUPPORT OF THE NURSES AND POSITIVE RESULTS WITH GREAT SUCCESS.

THE WANDERFULL DONATION RECEIVED FROM FOW-USA AND CANADA:

IN COORDINATION WITH USA.AND FOW CANADA, THE ASSOCIATION OF BOLIVIA (ABO) ARGENTINA (AADO And FAODRA), CHILE (CORAOS and CODEOCH) AND PARAGUAY (ASOSDELPA) MATERIAL HAS BEEN BENEFICIARIED WITH MATERIAL AND SUPPLY OSTOMY, WORK VERY IMPORTANT TO OUR MEMBERS AND GRATEFUL FOR SUCH IMPORTANT ACCTION FROM ALL FOW TEAM, WITH THE AID TO COUNTRIES THAT DO NOT COUNT WITH THE DISTRIBUTION OF MATERIAL THROUGH THE INSURANCE MEDICAL.

ALADO PROJECT 2010:

IN 2010 WAS APPROVED TRAINING COURSE FOR NURSES IN ESTOMOTERAPY TRAVELLING TO BOLIVIA, CHILE, COLOMBIA AND PARAGUAY. TO DEVELOP E.T. ELSA BEATRICE REYNOSO AND DR. FERNANDO SORIA, FROM TRAINING CENTER AND RESEARCH -TREATMENT RUN THE PRIJECT.

THE IOA APPROVED COBER THE COSTS OF E.T. BEATRIZ REUYNOSO AND PROFESSIONAL CLUB OF ITALY MODENA STOMA CARE PROJECT ACCEPTED COVER PART OF THE COST OF DR. SORIA (TWO COUNTRIES, BOLIVIA AND PARAGUAY), THE FOLLOWING DATES WAS ESTABLISHED INITIALLY:

MARCH-CHILE.CORAOS.
IMAY - COLOMBIA. ACDO
JULY - BOLIVIA.ABO
SEPTEMBER PARAGUAY.-ASOSDELPA

WE FAILED TO ESTABLISH THIS PROGRAM BECAUSE CHIJE HAS A BIG PROBLEM WITH A EARTHQUAKE AND COLOMBIA HAS ECONOMIC PROBLEM WITH COLOMBIAN LYONS CLUB FOR COVER THE COST OF DR. SORIA (FOOD AND ACCOMMODATION) AND THE COURSE WAS MOVED TO NEXT MONTHS.

THIS PROJECT STARTED IN BOLIVIA ON JUNE 23 - 24 AND 25 WITH GOOD NURSES PARTICIPATION FROM THE PUBLIC HOSPITALS. ALSO COURSE TAKES PLACE AND THE PUBLIC UNIVERSITY GABRIEL RENE MORENO, THE NURSING FROM THIS UNIVERSITY REQUEST WILL BE A SYMPOSIUM IN THIS FACILITY.

FROM SEPTEMBER 12 TO 16 HELD TRAINING COURSE FOR NURSES IN PARAGUAY.

IOA APPROVED COVER THE EXPENSES FOR DR. SORIA FOR JOIN WITH E.T. BEATRIZ REYNOSO TO MAKE THE COURSES IN CHILE AND COLOMBIA, THE DATES SET FOR THIS EVENT WILL BE OPEN FOR THE YEAR 2011.

AS ALL WE ARE AT THE END OF YEAR AND ALL WE ARE LOOKING TO WORLD MEETING TO BE HELD IN FRANKFURT.

ASIAN OSTOMY ASSOCIATION

Presidential Report to the IOA World Council Meeting
and the House of Delegates Meeting of AOA
November 2010, Frankfurt, Germany



Period covered: After 11th House of Delegates Meeting, November 2008 in Tokyo, up to today.

I Coordination Committee Meeting

Four officers of AOA/CC met on May 25th, 2009, in Kuala Lumpur, Malaysia, and had talks on plans of the AOA activities in near future. CC decided to inaugurate AOA website, E-Newsletter and that 7th AOA Conference is hosted by the Iranian Ostomy Society in 2011. *IOS has recently announced the Conference will be held from 19th to 21st October, 2011, at Olympic Hotel in Tehran. Details will be available soon.*

II Visits to Member Associations

1) Persatuan Stoma Care Malaysia

On the occasion of the CC Meeting above, President visited PSCM and participated to their Annual General Assembly.

2) Mongolian Ostomy Association

President visited Mongolia with a friendship tour group of Japan Ostomy Association Inc, in July 2009. To the Group of 17 people Prof. Shindo and WOC nurse Ms. Fukai joined and they gave lectures on stoma care to the members of the MOA and Mongolian nurses.

President has made visits both to the office of Japan International Cooperation Agency (JICA) and Mongolian Ministry of Health to have talks on possible programme of training medical doctors and ET/WOC nurses in Mongolia. MOA President Mr. Tsogt, Vice President Dr. Enkh-amgalan of the Mongolian National Cancer Centre, where MOA office is located, JOA Vice President Mr. Sasaoka, Prof. Shindo and Ms. Fukai joined the talks.

3) Taiwan Ostomy Association

On his private trip to Taiwan, President had chance to meet executives of TOA in November 2009. Ms. Po-Jui Yu, a lecturer of School of Nursing of Taiwan National University and an advisor for TOA told that Taiwan Wound Ostomy

and Continenence Nurse Association was planning to set up the first ET training school in Taiwan in consultation with WCET.

4) Guangzhou Ostomy Association and Hong Kong Stoma Association

After attending 3rd Congress of Asia Pacific Enterostomal Therapy Nurses Association (APETNA) in December 2009 in Guangzhou, China, President accompanied by Mr. Kong Kin Chai, Secretary/Treasurer of AOA, made visits to those two associations and had talks about expanding ties among ostomy groups in China. It was notable that ostomy groups in five cities, Guangzhou, Foshan, Shenzhen, Macau and Hong Kong, have agreed to form “**South China Alliance**” to develop mutual cooperation. President and Kong were warmly welcomed by Mr. Yap, President of Guangzhou Ostomy Association, HKSA President Mr. Yip with the secretary Ms. Jacky Lam and many members of HKSA.

5) Iranian Ostomy Society

To consult with IOS on planning of the 7th AOA Conference 2011, President visited Tehran last September and both sides agreed on date, venue and programme of the Conference.

III Congresses

1) 3rd Congress of Asian Pacific ET Nurses Association (APETNA)

Following a decision of AOA/CC, President and Mr. Kong Kin Chai participated to the 3rd APETNA Congress in Guangzhou, China, 11th ~12th December 2009. Our purpose was to establish better collaborative relation with Asian ET nurses, particularly with those from China to whom we expect their helping hands for forming ostomy associations in cities where AOA has no contact. We were fortunate enough to talk with many nurses from many hospitals in Mainland China and to exchange email addresses for further communication to collaborate to help Chinese ostomates.

2) 6th Congress of Asian Society of Stoma Rehabilitation (ASSR)

To this Congress held in Jakarta, Indonesia, at the beginning of October 2010, Mr. Kong Kin Chai was dispatched on behalf of the President. ASSR was founded by the initiative taken by Prof. Shindo and some leading Japanese surgeons in 2000 and I am pleased that it invites Asian ostomates from AOA and host country to every biennial Congress. President of Indonesian Ostomy Association (InOA), Ms. Kemala Yasin and her patient friends were there this time. Kong met many Indonesian doctors, nurses and ostomates and had talks to give helps to ostomy patients who face big difficulties in stoma care in the country.

There was very good news from InOA. Kong was informed of establishment of Surabaya Chapter of InOA which had inaugural meeting last May. Ostomates there led by Ms. Marina celebrated the foundation of the Chapter with medical doctors and nurses of Siloam Hospital and those from the hospitals nearby.

IV AOA Website and E-Newsletter

Mr. Ronaldo S. Lora, an officer of AOA/CC and Asian Representative of IOA 20/40 Focus Group, has successfully opened a AOA Website and edited the first edition of E-Newsletter in summer 2009. The website was tentatively became unavailable for several months this year, but it has been restored recently. Its URL is; <http://www.ostomyasian.org/>. The fourth edition of E-Newsletter was issued in last spring and next one will be available soon. All the editions are available on the website.

V World Ostomy Day (WOD) 2009

1) Taiwan

Taiwan Wound Ostomy Continenence Nurse Association organized WOD events in October 17, 2009. Taipei City's Department of Health supported it for the first time. About 200 people including ostomates assembled to it and learned a lot about stoma care and prevention of colon rectum cancer.

2) Hong Kong

HKSA successfully celebrated WOD 2009 with their 30th Anniversary in October at Tsuen Wan Plaza in getting cooperation from local leaders, doctors and ostomy patients. Remarkable was that Hong Kong TV artists offered charity works for the Day and they attracted many fans. Mr. Abdul Rahman Yob, Vice President of AOA, joined the celebration representing AOA/CC.

3) Malaysia

PSCM organized WOD in October in Penang and Kuala Lumpur. In Penang, ostomates and advocates assembled at City Bay View Hotel and celebrated the Day. Abdul played major role for the Day. In KL, PACM President Hj Zainuddin and his members went out to a park in the city centre and had joyful time together.

4) Japan

A message to the WOD from 20/40 Focus Group of Japan Ostomy Association was sent out to all the young ostomy friends around the world by Ms. Kyoko Ishii, a director of JOA and chairperson of the Group. She encouraged young friends to join the Group saying that it offers helping hands to overcome difficulties together, making them smile and cheer up, and called them to hold hands together beyond cultural differences and national borders.

VI 20/40 Focus Group Desk

Ronaldo, a wheel-chaired ostomate and Asian Representative of IOA 20/40 Focus Group, has

proposed 20/40 Focus Group Desk under every AOA members be setup at the AOA Tokyo conference 2008 . He expected the Desks would conduct their activities freely based upon each country's cultural inclinations and background.

Japan Ostomy Association has set up the 20/40 Focus Group Desk under the Board of Directors and the Group inaugurated its own internet site and blog. They are having many meetings of the young throughout Japan every year, now. I do hope the movement will prevail in every member country of AOA. (Written by Prof. Takaishi, AOA President)



Report from the European Ostomy Association (EOA) Coordination Committee (CC) for the years 2009 – 2010.

Introduction:

This report covers the time from 01012009 till 31102010. It contains also reports from some of the appointed members of the CC. It is a pleasure for the EOA CC to see all the great efforts being done all over Europe to improve the quality of life for ostomates and persons with related diseases. Some EA organization s have aid programmes including twinning with ostomates in countries where people with ostomy suffer from lack of appliances and discrimination.

Members of the CC has been:

Arne Holte	NORILCO	Norway, president
Ria Smeijers	Nederlandse Stomaverening	The Netherlands
	vice president and treasurer	
Guiseppe de Salvo	FAIS	Italy, member.

The following persons have been appointed to the CC with special tasks:

Vladimir Kleinwächter	Czech Republic	East Europe and the 2011 EOA congress
Daiga Skagale	Latvia	Young ostomates, liaison to Focus 20-40
Maydad Gissin	Israel	Middle East, Turkey, Cyprus
Kes Klare	The Netherlands	Web site

Due to personal reasons Daiga Skagale left her position in spring 2010.

Deutsche ILCO has taken care of the EOA Contact office in Bonn. Thanks to D-ILCO and to their employee Maria Hass who has excellent taken care of this vital task.

Members:

EOA has now 41 members in 35 countries from Algeria in South West to Israel in South East to Norway in far North and Iceland in the far West. It is a fact that some countries are more active than others. During the last year there has been close to no contact with Belarus in spite of several attempts from Vladimir and Daiga. To Algeria the contact is lost for the time being. One Belgian association has seized heir membership, but hopefully more associations will join EOA in 2010. This is Greece, Turkey, another from Romania and another from Belgium.

Meetings:

The CC met in Montesilvano in Italy in October 2009. This meeting took place the day after the Italian Ostomy Association, FAIS, had celebrated World Ostomy Day. All CC members were invited to the meeting which gave EOA no expenses.

In February the CC included the appointed persons (Daiga could not meet) and also three more persons with great organization skills (Gerhard Englert, Marie Steen and Henning Granslev) met in Frankfurt to discuss the future of EOA and also IOA. The conclusion was that a great change in the way the two organizations were organized ought to be recommended.

In April 2010 many EOA associations met in Frankfurt mainly to discuss the proposed changes in the IOA Constitution. It was no objection to the main items in the new Constitution, just some minor comments on the number of persons in the IOA Coordinating Committee.

Travels:

For some time the EOA economy has prevented members of the CC to do a lot of travels. Thanks to hard work to avoid great expenses the economy is now better and hopefully it will be possible to visit more EOA member organizations in the time to come. During 2009 the president has attended the ECET (ET nurses in Europe) meeting in Porto, Portugal in June where he held two lectures. He was taken excellent care of by the Portuguese organization LOP. The president was also invited to the Hungarian East-West colorectal days in September where he held a lecture for top surgeons from Hungary and The United States.

In October 2009 he and also Ria Smeijers attended FAIS WOD arrangement in Montesilvano in Italy. At all those three travels most of the expenses were paid by the organizer.

Guiseppe De Salvo went to the October's Conference in Gyula (Hungary) on the Disabilities in the Eastern European Countries, and Vladimir Kleinwächter has attended the Polish Association's WOD arrangement and also Hungarian ILCO's meeting in Pecs Hungary (see Vladimir's report for details).

In June both Vladimir Kleinwächter and Guiseppe de Salvo went to Lviv in Ukraine to meet the organizer of the 2011 EOA Congress. The intention with the meeting was to plan the congress together with professor Lozynskii who heads Ukraine ILCO and the Congress committee.

Guiseppe has been to Athens to see a reliable contact there and hopefully also doctors and people from the Cancer Union. The intention was to start an organization for ostomates in Greece. So far this has been impossible, but hopefully EOA will have a new member there in some time as we now have a reliable contact there.

Guiseppe has also been to Albania with the same purpose. This trip was very successful. See Guiseppe's report for details.

The Future:

It seems to be no doubt that IOA and EOA will have new roles after November this year. If the new IOA Constitution is approved, EOA will be self dependent and have its own economy. All member fees will go to EOA. As it is to-day only 40% is paid back to EOA, the rest remains in IOA. IOA shall have a Coordination Committee (CC) preferably consisting of at least the regional presidents. This CC shall assist the regions in matters that affect all regions.

The most important issue next year will be the EOA Congress to be organized by Ukraine ILCO in May. Hopefully all our member organizations will be present there. The EOA CC knows there are a lot of good works being done in the 41 member organizations. The CC also knows that some organizations have plans for twinning and aid projects. FAIS Italy

will arrange teaching of Romanian nurses, ILCO Sweden will travel to Zimbabwe in Africa, where there are reliable contacts, working to establish an ostomy organization and the EOA president will go to Addis Ababa in Ethiopia to start an organization there.

The EOA CC recommends that EOA Constitution remains with any necessary adaption until the next EOA congress in Lviv in Ukraine in May 2011.

The CC hopes that contact again will be established with Belarus and with Algeria, and that Greece, Turkey, Cyprus and more countries will join our EOA family in 2011.

Economy:

TREASURES REPORT 2009

European congress in Brno, Czech Rep.

In March 2009 the complete financial report of the EOA Congress 2008 was finished.

Thanks to the sponsoring of the following national associations of **UK IA, Demark, Iceland, the Netherlands and Norway** and the following companies **Convatec International, Coloplast Norway, Hollister, Convatec Sweden**, the congress is closed with a positive result.

This surplus is divided on a 50/50 basis with the Czech ILCO.

I will express my thanks to Miroslav Sery, Karel Rusin and Vladimir Kleinwächter and TA-Service for the excellent support. They were the main stay of the congress.

Twining Project.

In October 2009 we received a donation of UDS 2500 from the IOA for the Brno Congress.

Membership fee 2009.

In October we received also our 40% part of the membership fees paid by the European members of the EOA. In January 2010 we received an postponed payment of 6 associations.

WOD 2009.

3 October 2009 our President Arne Holte and I were invited by FAIS Italy to attend their congress in Montesilvano. It was a special experience to celebrate with so many Italian ostomates WOD.

I will thank FAIS, especially Fernando Vitale and Guiseppe De Salvo for the invitation and the hospitality.

Financial Status of EOA.

The financial situation of EOA is healthy. We spend our money very conservative. We have faith for the coming years.

The Netherlands, 23 January 2010

Ria Smeijers
treasurer EOA

Treasurers report 2010

Our economics since 010110:

Expenditures:

EOA meeting in Frankfurt (9 April)travelcostst CC, lunch and dinner for all participants

EUR 2978

Visit to Lviv - June (Vladimir and Giuseppe)

EUR 1297

Incomes:

Dues 2010 - IOA - (40 % membership fee EOA members)

EUR 5048

Sponsoring travel costs East European members, IOA congress

Frankfurt 2010 from Iceland and the Netherlands EUR 1000

EOA Congress Lviv 2011:

Sponsoring Hollister and Dansac US\$ 1000

Sponsoring Convatec US\$ 9000

The EOA CC decided to make a reservation for this congress for an amount up to a maximum of: EUR 12000.

Our financial situation is healthy. Full report of our economic situation will given

In May 2011 at the EOA congress in Lviv.

Ria Smeijers, treasure

Internet/website:

Kes Klare has been our excellent webmaster in 2009. The site has a great lay-out and is being updated by Kes without any delay. It is EOA's great wish that all EOA associations will contribute in 2010. It is a very good investment in Public Relations to have info on all ostomy associations on the website.

The address is: www.ostomyeurope.org

You will also find info on EOA on the international website: www.ostomyinternational.org

Vladimir Kleinwächter's report:

REPORT ON ACTIVITIES IN 2009/2010

(1) Meetings

International meeting in Pécs, Hungary

I participated at the international conference *Colorectal Cancer Screening and Its Modern Examination Methods*, which was organised by the Hungarian ILCO in Pécs in 27 – 28 March, 2009. I have presented a lecture *Care of the Colorectal Cancer Patients in the Czech Republic*, which was published (in English) in the Conference proceedings *Vastag-és végbéldaganatok tömeges szűrése és modern vizsgálati módszerei*. Based on the discussion at the conference recommendations for the CRC screening in the countries of the Visegrád Four were issued by the Hungarian ILCO.

Meetings at the occasion of the WOD 2009

(a) Meeting of Czech ILCO (Czech Republic) and Slovilco (Slovak Republic), organised by the Brno ILCO Club in the town of Breclav, connected with a symbolic visit of the archaeological site of Pohansko, a settlement of the Great Moravian Empire, which covered both the Czech and Slovak territory, on 3 October, 2009.

(b) Meeting of POL-ILKO in Zielona Góra (Poland) on 11 -12 October, 2009.

At both meetings I informed the participants about the expected changes in the structure of IOA.

(2) Preparation of the 13th EOA Congress in Lviv, Ukraine

Throughout the year 2009 I acted as a contact with Professor Lozynsky, the main organiser of the 13th EOA Congress. It has been agreed that the Congress will take place in Hotel Hetman (Lviv) on 6 -8 May 2011. Hotel Hetman can provide all necessary facilities for the Congress and has enough capacity to accommodate Congress participants. A draft of a letter from EOA to Ukrainian Government representatives was prepared asking for support of the Congress and effort of Ukrainian ostomates to improve their social situation.

(3) Monitoring situation of ostomates in Belarus

Since 2008, when the Belarus ostomate association informed EOA that they had to dissolve the organisation, attempts were made to find out a way how to restore it. I tried to contact Dr. Aleksander Vorobey, the founder of the organisation, but without success. Similarly attempts to find a suitable professional person, a physician or a stomatherapist with help of Alina Matysiak from POL-ILKO were unsuccessful. The future of the Belarus association will have to be discussed at the nearest EOA meeting in April 2010.

Brno, 16 January 2010 Vladimír Kleinwächter

Giuseppe De Salvo's report:

REPORT ON ACTIVITIES IN 2009

(1) Greece

The year 2009 opened with good hopes to constitute a first ostomates group and the periferic Greek region of Epirus, thanks to the help and of one of the very few Greek stomatherapists: Maria Fasia. Unfortunately, at the end of February she wrote me that she changed hospital and department and does not have anymore the possibility to help the constitution of a a Greek Ostomy Association.

After fruitless attempts to contact the Greek Anti-Cancer League, and the Greek Society of Colon Rectal Surgery, Arne gave the name and the e-mail address of a Greek Hollister representative: Ageliki Karakatsani.

She took an appointment between the Greece Hollister Commercial Manager with the President and the Vice president of the Greek Society of Colon Rectal Surgery during a Congress in November in Thessaloniki. Both surgeons said clearly that they are not interested and do not have time for this project.

Miss Angeliki did not yield and just in the last days she arranged a meeting with the president of the Greek Anti-Cancer League with me on a Ostomy Association in Greece.

(2) Africa - N'Djamena

An Italian doctor who helps an association which works in Africa, asked to a Italian Missionary hospital in N'Djamena (cooperating with a Milan's university) to monitor the number of ostomy operations during from May 2009 to November - December 2009. In almost seven months only 10 ostomy operations have been carried out.

With so few cases, it was considered a priority by doctor Carlo Pezcoller and me to dedicate our limited resources to other areas where our pathologies are more frequent.

(3) Meeting

Last October 9th and 10th, I participated to the Conference organized by Magyar ILCO in Gyula, a little thermal town near the board with Romania, entitled: The social situation with disabilities in Eastern-Europe.

I prepared a detailed document and lecture with title: Economic and social benefits for civil invalids in Italy.

It was a touchig experience because there were many different disabilities and I saw much courage in people affected by other and more serious inabilities than the ostomy.

(4) Project of Law for the European Union

Last December 2009 ,I and other friends of FAIS (the Italian Ostomy Association) wrote a project of law for the European Union to sanction the principle of rehabilitation centres and of the proper appliances supply, in the European countries of the UE. Just in these days our official translater wrote the English version of the project of law. After the C.C. Agreement, we in Italy will put the project in the care of Italian parlamentaries in the Strassbourg Parlament.

ACTIVITY OF GIUSEPPE DE SALVO DURING 2010

1) Greece

After several months of contacts with a Greek Stomatherapist without results, a staff employee of Hollister helped me to get a meeting in February with the president of the Hellenic League against Cancer. The outcome of the meeting was

completely negative because this doctor was afraid to lose his associated in case of birth of an Ostomy Association. The Hollister employee is in maternity leave now, therefore further contacts have been suspended.

2) Albania

After a couple of months of contacts with an Albanian doctor, director of a obstetrician department in the hospital of Berat (South Albania), I flew to Berat in May. A meeting was held with two nurses, two ostomates, the director of the city National Health Service, and with the director of the surgery of the Berat Hospital. It was programmed a base course of stomatherapy for the two nurses in autumn in Milan.

In the Berat hospital, a stoma care cabinet would have been opened and the surgeon of Berat would have informed his colleagues surgeons of Tirana (where most of the Albanian operations of ostomy are carried out) of the next opening of this stoma care cabinet for the southern Albania.

The two nurses cannot attend the planned course beginning on November 3rd, because the documents required by the Italian authorities cannot be produced within the beginning of the course. In April 2011 there will be a second session of this course and there is the time to produce all the documentation required.

3) Romania

From June to September, I forwarded more than 150 kg of appliances to the Romanian Ostomy Association with the cooperation of the Lombard Ostomy Association and of FAIS which paid the deliveries.

Next November a city Italian Association (Modena near Bologna), together with the Red Cross will deliver 500 – 1.000 kg of appliances to the Romanian Ostomy Association.

4) Ukraine

Last June, I went with Vladimir to L'viv to participate to the planning of the next European Congress of May 2011.

PLANS OF GIUSEPPE DE SALVO FOR 2011

1) Ukraine

Travel with Arne and Vladimir to L'viv in January to verify the status of Congress preparation.

Eventual work as staff during the Congress in May, although very few Ukrainian speak a foreign language, except Russian.

2) Ethiopia

Participation with Arne to the works to help the birth of an Ethiopian Ostomy Association in February or March.

3) Greece

During the International Stomatherapist Congress in Bologna of next June, there could be the opportunity to meet Greek stomatherapists and the to establish relationships with the long term aim to found a Hellenic Ostomy Association. At the beginning of 2011 the Hollister employee will go back to work and it could be possible to search new ways to open the Greek ostomy association, either in Athens or in other minor towns

4) Albania

The two nurses will attend the base course of stomatherapy in Milano next April. During this time the directors of the Berat hospital will try to make to open the stoma care cabinet. Moreover, at least an American company present in Italy will look for contacts with export distributors to sell their appliances in the Albanian (poor) market. The costs of the course will be paid the Italian Association, but if there will be not sponsors, it will be difficult to continue the help to the future Albanian Association for FAIS.

5) Romania

With the cooperation of the Romanian Ostomy Association, a course in Bucarest to 6-10 nurses, led by two Italian Stomatherapists with a Romanian nurse working in Italy as interpreter, should be held in Autumn 2011. Many relationships and agreements should be taken before the course, because to the nurses should be allowed to take care ostomates and to open stoma care cabinets, in the best situations. The costs will be paid the Italian Association, but if there will be not sponsors, it will be impossible to continue the help to the Romanian Association and to their ostomates.

Sesto San Giovanni, October 31st Giuseppe De Salvo



**Ostomy Association 13th World Congress Frankfurt, Germany
November 18 & 19, 2010
North and Central American and Caribbean Ostomy Association**

President's Report September 2007 to October 2010

Council Members President, Doug Graham United Ostomy Association of Canada (UOAC)

VicePresident, George Salamy United Ostomy Association of America (UOAA)

Executive Council Member, Jorge Vargas Morales Asociacion De Ostomizados De Colima, I.A.P. (AOC).

PastPresident, Linda Aukett United Ostomy Association of America (UOAA)

Background

August 8, 2007 in Puerto Real, Puerto Rico I was elected President for our Region. I accepted the responsibility aware that there had not been a lot of activity in our Region these past few years and that the last regional meeting was in Panama, January 2003. My first activity was to gather information and establish a priority base on a strategic plan. Unfortunately a strategic plan was not available and the pastpresident informed me that she did not have documents to assist me. Fortunately I contacted M. Mau, a previous president, and she informed me of the documents she had. I travelled to Chicago at my own expense and was delighted with the helpful information that Marilyn Mau provided. I also met with the Friends of Ostomates Worldwide USA to discuss support and assistance for needy Ostomates.

August 2007 I established an interest bearing account for NCACOA in Ottawa, Canada and transferred the account from Chicago, United States of America. This account is in Canadian dollars and the small amount of monies will limit future activities.

Research

Reviewing the documents provided and contacting various members I developed the bases for a strategic plan. My research concludes at that time we had thirtytwo (32) countries that are available for membership. North America = Four (4) 12.5% Includes three (3) full members, one (1) associate Central America = Seven (7) 21.9% No members Caribbean Islands = twentyone (21) 65.6% Includes two (2) full members 100.0 %

Full Members

North America

Bermuda – Ostomy Association of Bermuda

Canada – United Ostomy Association of Canada

United States of America United Ostomy Association of America

Mexico

Caribbean Island

Puerto Rico – Asociación Ostomizados de Puerto Rico

Trinidad & Tobago – Ostomy Association of Trinidad & Tobago

Central America

- No members

Associate Member

- México – Asociación de Ostomizados de Colima

Strategic Plan

A three (3) year strategic plan was developed and sent to the members of the NCACOA Executive in November 2007. The main objective of our strategic plan is to understand the needs of the Ostomates in Mexico and find a way to accommodate these needs and to bring them into the Global Ostomy Family. Simultaneously we will be renewing communications with countries that have experienced change in their leadership and have not remained in contact with us.

Implementation

1) Working with Jorge Vargas Morales, Mexico we developed a three (3) year operational plan for him to contact representatives of the thirtytwo (32) States in Mexico. 2) We recruited Martha Velez De Nieves, Puerto Rico to our team and she will be making contacts in the Caribbean Islands.

Activities 2008

- 1) **February 5-14 Colima City, Mexico.** I participated in several meetings with government, university, hospital officials, municipal representatives and Ostomates. I participated in a recognition ceremony of those people that have helped Ostomates. I visited hotels and established agreements to hold the NCACOA Regional meeting and conference from February 4 to 6, 2009 in Colima. I'm pleased to report that we had the State Governor's and many other officials support for the conference.
- 2) **February 22, Washington, DC.** Attended the Great Comebacks Awards where Jorge Vargas Morales was the recipient for Latina America. I also negotiated that the United Ostomy Association of Canada (UOAC) became a member.
- 3) **August 12-16 Hamilton, Ontario, Canada.** Represented NCACOA at the UOAC Conference.
- 4) **June 19-21, Ljubljana, Slovenia.** Participated in meetings of the International Ostomy Association (IOA) Executive Council to confirm a three year strategic plan. A proposed budget was approved and the strategic plan and budget was presented to the representatives from Coloplast, ConvaTec and Hollister. We also met with the Executive of the World Council of Enterostomal Therapist (WCET) to discuss collaborative effort of our Associations.
- 5) **September 2-4, Santa Cruz, Bolivia.** I attended a training program of Stoma Care at the University of Bolivia presented by the Lions for Stoma Care and presented information on NCACOA. This part was personally financed.
- 6) **September 5-9 Santa Cruz, Bolivia.** Attended the International Stoma Care Advocacy Programme (ISCAP) that was presented to Ostomy Associations of South America. I help facilitate the questionnaire and to develop a Regional Strategic plan for ALADO. Jorge Vargas Morales was in attendance and it is planned that we will use the ISCAP to assist us to form Ostomy Association in Central America and the Caribbean basin.
- 7) **November 6-9 Clarksville, Indiana, USA.** Travelled at my own expense to meet with the Friends of Ostomates Worldwide USA and discuss future support and assistance for Ostomates in needy countries.

Activities 2009

- 1) **February 2-7, Regional Meeting.** The last Regional meeting was in Panama City, Panama in January 2003. There have been meetings in conjunction with the International Ostomy Association (IOA) Conferences but a responsibility of the Regional Bylaws is to hold regional meetings. Therefore, a meeting was held in Colima City, Colima State, Mexico. Regional Executive Council Member, Jorge Vargas Morales and the Ostomy Association of Colima agreed to host the meeting and conference. Delegates from the United Ostomy Association of Canada, Ostomy Association of Colima, Mexico, Ostomy Association of Puerto Rico, and United Ostomy Association of America, attended. Also in attendance was the Past President of the IOA and observers from the Friends of Ostomates Worldwide Canada (FOWC) and FOWUSA. Two highlights of the meeting was the acceptance of the Ostomy Association of Colima as a full member and as no nominations and election chair had been appointed at the previous meeting, Martha Velez De Nieves, Past President of NCACOA, was nominated and voted as chair of the nominations and election committee. The conference was an outstanding success. The opening ceremony feature a ceremonial guard from the army battalion stationed in Colima, youth from the school sang the national anthem and welcomed all. The Governor of the State attended with an entourage of officials and media personnel.

This was very significant as this, the day of the opening ceremony, was also the day of the Mexican National Independence celebrations. The Governor with his many duties that day invested an hour with us. There were medical doctors from the Colima University and others that made presentations and the evening featured traditional folk dancing at the Hidalgo Theater. This meeting and conference were very important to the Region as it enhanced a sense of Regional pride.

- 2) **May 26, Regina, Saskatchewan Canada.** I had the good fortune to present an overview of NCACOA in conjunction with a presentation of the UOAC for the Regina Chapter of the UOAC. The opportunity to present this information was provided by the President of FOWC who also did a presentation of the FOWC activities. I also attended the Canadian Association of Enterostomal Therapist conference as the representative of UOAC and had the opportunity to answer questions regarding IOA and NCACOA.
- 3) **August 6-9, 2010 New Orleans, Louisiana, USA.** I attended the UOAA conference and had the opportunities to bring greetings from our Region at the awards dinner and to do a PowerPoint presentation of the NCACOA Region now and what our future plans are. I also held a brief meeting with our VicePresident, PastPresident and ECM Jorge Vargas Morales. Basically Jorge and I briefed the others on our activities.
- 4) **August 20-23 Ottawa, Ontario, Canada.** I attended the first Annual General Meeting of the UOAC that will be held on alternative years without the activities of a conference and brought greetings from NCACOA.
- 5) **October 28 Sudbury, Ontario, Canada.** Once again thanks to the President of FOWC I had an opportunity to present a PowerPoint presentation of an overview of NCACOA in conjunction with a presentation of the UOAC for the Sudbury Chapter of the UOAC. This was as the opening to a PowerPoint present by the President of FOWC who also did a presentation of the FOWC activities.

October Revised Strategic Plan and Project Proposal

The proposed reorganization and amalgamation of the Americas took precedence over the strategic plan that was presented to the IOA Executive Council. A new proposal named, 'Project 1' was presented to the IOA Executive Council and approved. Meetings were scheduled with Ostomy Groups, Hospitals and Government Officials in Belize, Dominican Republic and Panama.

Approved budget US\$	4,845.00	Panama Phase 2	US\$3,000.00
Actual Expenses	<u>3,854.63</u>	Actual Expense	<u>3,000.00</u>
Under Budget	990.37		0.00

Belize: Executive Council Member Jorge Vargas Morales travelled to Belize in February of 2010. Dominican Republic: Committee Member Martha Velez De Nieves travelled to the Dominican Republic in June 2010. Panama: President Doug Graham travelled to Panama on September 22, 2010. In addition to the original proposal the representative for Ostomates and a surgeon that is actively involved with the Ostomy Group requested a presentation for Doctors and nurses. Additional funds were approved. With some personal financing 2 Ostomy Surgeons from Ottawa, an Enterostomal Therapist (ET) from Canada and the President of FOWC accompanied me. Presentations were provided and meetings with the Minister of Health, the Minister of Social Security, the Director of the Cancer Foundation, Doctors, Nurses and 3 Ostomy Associations were made. A report of Project 1 was sent to the IOA Executive Council.

Activities 2010

- 1) August 18-21 Sydney, Nova Scotia, Canada Represented NCACOA at the UOAC Conference.
- 2) September 22–October 3 Panama City and Central Provinces. With a Canadian ET I assisted her presentation to 49 nurses, 4 surgeons and a representative of the Ministry of Social Security. We visited hospitals and Ostomy Groups in Panama City and the Central Province. The two Ostomy Surgeons presented information of surgical techniques to 51 doctors that included surgeons, resident doctors and doctors with the Ministry of Health. Our team also attended an Ostomy Day Celebration with 96 attendees.
- 3) October 19-23 Mexico City, Mexico. I presented information at a conference and meeting of 186 people from Mexico City, four States and two countries of Central America. The attendance where eleven (11) associations from

Mexico City, eight (8) from four States, one (1) from Belize and one (1) from Guatemala. In general representatives from these associations were the President, Secretary and Treasurer. This conference and meeting has been declared the first meeting of the associations of Mexico. I was informed that approximately twenty-six (26) years ago there was a meeting attended by Ken Aukett and coordinated by Shelia Carral, President of Ostomizados de la Ciudad de Mexico but that only a few people attended from the Ostomizados de la Ciudad de Mexico. The President of Ostomizados de la Ciudad de Mexico did not accept an invitation to attend this conference or meeting. The association officers that attended this conference and meeting have agreed to meet in the near future to begin the process of forming a Federal Association.

Conclusion

I thank Martha Velez De Nieves for her participation in the Regional Meeting in Colima and in Project 1, Dominican Republic. I praise Jorge Vargas Morales for his exceptional dedication to improving the lives of poor Ostomates and their families in Mexico and Central America. I also recognize that it was his efforts that brought together the many people of Mexico to a conference and meeting that marks the beginning of a national association in Mexico. I had several concerns at the beginning of my term and I thank the people that had faith in me that I would complete the majority of the responsibilities I accepted as President of NCACOA. The gap between the rich and poor countries continues to grow and the population's explosion will increase that gap. There are many visions for future charitable acts and I will now pursue my vision.

SPOA Regional Report Frankfurt 2010

Peter McQueen President SPOA

The South Pacific Ostomy Association is the smallest region in IOA and as such regional issues are minimal, both countries Australia and New Zealand have excellent government support programs in place looking after the appliance needs of their Ostomates. Both countries have well organised Ostomy Associations, Federation of New Zealand Ostomy Societies (FNZOS) and the Australian Council of Stoma Associations (ACSA). Although they have different roles in appliance distribution they both provide valued support in the rehabilitation and care of their members.

Comprehensive reviews into both countries government support programs have recently been completed, the final outcomes of both reviews are yet to be released. Hopefully the status quo will remain.

World Ostomy Day was celebrated in both countries with many varied activities undertaken centred on the international theme of "Reaching Out", but alas New Zealand was the only country to enter the Coloplast Merit Award from the Asia Pacific Region.

Australia hosted New Zealand at an SPOA regional meeting in Canberra in September 2009, many issues were discussed and all were eventually resolved. We share many similarities in our love of sport, culture and our willingness to help those less fortunate than ourselves. The South Pacific Region supports the proposed restructure of IOA and joining Asia to establish the Asia South Pacific Regional Association of IOA. We believe that if this takes place we will be better placed to help Ostomates in our

new region. Let us hope the decisions made are wise ones.

Both Countries continue to support Ostomates in other countries in less fortunate circumstances than themselves. Appliances have been sent to many areas including; Indonesia, Philippines, Nepal, Fiji, Tonga, and as far away as Ethiopia, Uganda and Iran. As we are in the South Pacific and far away from anywhere the transport costs in sending goods anywhere is prohibitive, the Australia fund provided \$13,500 to cover freight costs from Australia alone.

Once again SPOA supports the proposed restructure of IOA and looks forward to what the future may bring.

20/40 Focus Report



20/40 Focus is committed to the improvement of the quality of life of young ostomates and those with related surgeries, aged 20 to 40. It aims to identify the needs of young ostomates worldwide and work in

conjunction with IOA's member and regional associations to ensure these needs are met. It provides a peer support network where young ostomates can seek non-medical advice and friendship.

The 20/40 Focus committee wanted a more visible presence within ostomates of this age range.

A symbol was designed to represent the 20/40 Focus. This was our first step towards letting all ostomates know that there are complex needs within this age range. This symbol has appeared consistently in several countries increasing the visibility of 20/40 Focus.

20/40 representatives were in noticeable attendance at the Regional Congress's: AOA (2008), EOA (2008), SPOA

(2008), NCACOA in (2009). 20/40 Focus was also invited to work with UOAA's YODAA (Young Ostomate & Diversion Alliance of America) to participate in a joint conference held in conjunction with the UOAA's 2009 National Conference.

In the AOA region the conduit between 20/40 ostomates and the more established associations has been strengthened by the use of 20/40 focus 'desks'. Online resources have been utilized, such as blogs, facebook and email communications. We have tried to widen the accessibility on all fronts.

NCACOA region has a strong 20/40 Focus presence with UOAA's YODAA (Young Ostomate & Diversion America Alliance) and the 30+Network. UOAC also has an active 20/40 Focus group. Both North American Associations have specific planning for 20/40 Focus at their National conferences.

Unfortunately, 20/40 Focus has been unable to maintain a representative in each region. The EOA has had three (3) representatives within the past two (2) years and currently has no representation. Our thanks must be extended to the EOA President, Arne Holte for his perseverance in trying to help us identify a suitable representative. ALADO, because of the language barrier has not had representation since the last IOA World Congress in 2007. SPOA is also currently without representation as the last representative has had ongoing health issues.

In conclusion, 20/40 in its present format is not as effective as it has been in the past. The 20/40 committee is finding a definite lack of commitment by our membership. Inquires are fleeting and few at best. Members in this demographic seem to be well adjusted and not interested in joining national or international 'support' groups. Most seem to want quick electronic information. Once they have the information, they ride off into the sunset.

For 20/40 to be an effective part of the International ostomy community steps must be put in place, such as:

- 1) Nationally and regional association must generate dialogue obtain feedback/contact information with 20/40 ostomates using online or in-house resources.
- 2) Greater continuity and succession planning of point people. Currently the present chair of the 20/40 Focus (*Janet Paquet, Canada, NCACOA*) is no longer a member of the 20/40 demographic. Therefore a NCACOA representative has been identified and will be 'in training' to succeed in the post. The AOA representative, (*Ronaldo Lora, Philippines*) will take on the role of Focus Chair upon conclusion of the IOA meetings in Frankfurt. A committed and responsible representative from the EOA region must be found. As the EOA has forty two (42) organizations it might also be of benefit to have two (2) members represent this region. In ALADO, with the help of Jorge Vargas Morales of Mexico we hope to find a member who will be able to help 20/40 connect with the Spanish speaking countries.

Succession planning is a MUST! Each region should identify potential leadership within their associations and encourage the individual to participate, nationally and regionally.

- 3) 20/40 Focus MUST start at the grass roots, meaning it must start on a national level before it can be implemented globally.
- 4) 20/40 members MUST do initiatives that strengthen the connection with older ostomates.
- 5) Collection of testimonials from benefiting members of the 20/40 Focus should be publicized via all communication channels. This will foster a greater understanding and appreciation of the positive impact 20/40 has on the lives of ostomates within that demographic.

In conclusion, the international needs of ostomates between the ages of 20 and 40 worldwide are far from being addressed. For 20/40 Focus to remain viable its activities and projects must be implemented more and be utilized more proactively.

Respectively submitted,
Janet Paquet
20/40 Focus Chair



WORLD OSTOMY DAY REPORT 3rd October 2009 IOA Executive Meeting Frankfurt November 2010

World Ostomy Day (WOD) 2009 was an outstanding success. Congratulations to our member countries that took part in celebrating the significance of the day. WOD has become our premier event in informing the general public of the needs and aspirations of Ostomates worldwide, it has become the focus for Ostomates and their support groups to generate publicity and awareness. Every country and each Association that took part in the day's activities no matter how small has increased the awareness in local communities of Ostomates, their families and their needs. Thanks to the regional Presidents and regional coordinators for their efforts in generating participation from their member countries. The cooperation and participation of health care professionals was invaluable and their contribution to WOD since it's inception cannot be overstated. The support of the appliance companies and their distributors once again was very much appreciated.

One company Coloplast deserves special mention; they have given wonderful support both financially and with personnel assistance.

Financially they have assisted through their generous sponsorship of the Coloplast Merit Award and the

production of the badges/pins for WOD .They have also mailed these to regional Presidents for regional distribution, sponsored a Teleconference to finalise the judging of the Merit Awards and Coloplast Australia compiled a Power Point presentation that will be shown during this World Meeting. Although a number of Coloplast representatives had been given the task of WOD2009 liaison each one of them was most helpful and keen to be involved.

Hollister's sponsorship of the photo competition saw an excellent presentation of ostomates "Reaching Out" being placed on our IOA website A calendar was also produced by Hollister using some of the successful entries in the photo competition.

Convatec became involved with their own competition, 'a poster competition', it was late getting established and participation numbers were low, however they are keen to take part in WOD2012 and will be more organised at that time.

What has worked

- The Regional Competitions are preferable to a world event for the Coloplast Merit Award.
- The decision to have three encouragement (achievement) awards as well as the regional winner and runner up awards.
- Regional President's overseeing role has worked well
- The Regional Co-ordinators are a vital link to any success as the activity these co-ordinators generate in their regions are even more vital.
- Presentations eg Power point at regional events and member associations meetings and conferences provided impetus to this day.
- The provision of Coloplast Merit Award Criteria, rules, samples, suggestions, templates etc that were available on the website and directly to the Co-ordinating committee, have been very useful.
- Coloplast's support for the co-ordinator has worked well
- The provision of the pins by Coloplast was very much appreciated.
- The theme "Reaching Out" was very appropriate and the offering of the Hollister Photo competition was a boost to this.
- Instead of the email tree a website was created where member countries and Associations could not only detail their planned activities but on the day give a report on what actually took place.
- Hollister's support in passing the logos etc to Coloplast and the use of the logos was vital.
- It was great to see both the Theme and Logos being used and being translated into many other languages.
- The Major Firms' support for the actual day was very much evident in the member associations' countries and contributed to the WOD's success.
- From anecdotal evidence it seems as if this WOD was very successful and was truly a global event. Major activity can be evidenced in over 30 or more member Associations and across hundreds of Chapters/Societies.

What has not worked?

- Possibly the language barriers in communicating the event still have to be overcome for some Regions but this was not a case in many associations as through a regional or local translator this was overcome.
- I see further work in determining what the best communication lines for all member associations are.
- A few associations for one reason or another have not participated and probably this is because there is not someone willing to undertake the task.
- There are still ideas that need to be shared.

Where to for the future?

- It is recommended that WOD continues to be celebrated every three years, the next in October 2012
- All companies supporting the event financially will probably continue that financial support
- If sponsorship should change this may affect the way we operate and we may need to think creatively. However a framework has been created that is seen as adaptable.
- WOD needs to be high in our thoughts as a strategic vehicle for moving forward the ideals of IOA as we can reach many through such an organised activity (ostomates, health professionals, firms, community and governments) eg The Aims of WOD are very valid.

Recommendations

- Next WOD Saturday October 6th 2012
- That the IOA website or a dedicated website as was the case in 2009 be used for associations to post photos and reports in the future about WOD.
- That if similar sponsorship is available we continue the regional Merit Award competition and achievement awards.

- That we encourage the member associations to send in reports re their efforts with photographs video clips cuttings etc so these could be turned into a presentation of some kind to be shared.
- That the use of Logos and graphics be further developed to enhance the day
- Similar timeline planning is employed.

Thanks

The following people working as a team helped to make WOD 2009 a success.

WOD Co-ordinating Committee

EOA Arne Holte (Norway))

NCACOA Doug Graham (Canada)

AOA Michiaki Takaishi (Japan) Abdul Rahman Yob (Malaysia)

ALADO Teresa Antequera (Bolivia) Alexander Machaca (Bolivia)

SPOA Barry Maughan (New Zealand)

COLOPLAST Management team both in Denmark and Australia

HOLLISTER Barbara Conti

CONVATEC Matt Dawson

Di Bracken for her taking part in the Coloplast Merit Award judging panel and for her encouragement.

Peter McQueen

WOD2009 Co-ordinator

IOA Executive Committee

On behalf of myself and
Di I would like to wish
everyone a safe and
happy holiday season.

