

Second 'From the Halls' of the Health Systems Research Symposium – podcast transcript

Listen to the podcast on [the ReBUILD for Resilience website](#)

Dr Kim Ozano: Hello listeners, and welcome to Connecting Citizens to Science. I'm Dr. Kim Ozano, and this is a podcast where we hear about current debates and discussions on global health. So welcome to this second episode from the halls of the Eighth Global Symposium on Health Systems Research, working in collaboration with the ReBUILD for Resilience program.

In this episode, we hear from Cynthia Maung, who speaks about the provision of healthcare to internally displaced people and refugees on the Thai-Myanmar border. We then hear from Roshan Pokhrel, who is a policymaker from the Ministry of Health in Nepal, discussing how research is really helping to shape the management of human resources for health, especially as the workforce is being challenged by migration and climate change. And finally, we hear from Lydia DiStefano, who is from Community Partners International, on the important role of community health workers, especially in a world with increasing conflict, migration and displacement. Enjoy the episode.

Karen Miller: This is Karen Miller of Liverpool School of Tropical Medicine and ReBUILD for Resilience. I'm here with Professor Cynthia Maung of the Mae Tao Clinic in Thailand. Cynthia, you speak about the provision of healthcare for internally displaced people and refugees on the Thai-Myanmar border, a context with no formal governance. Can you tell us about the network you've helped create and the governance structure there?

Cynthia Maung: The Thailand-Myanmar border is very unique opportunity for connection between the local community organisation in Thailand and the organisation working in Myanmar, like ethnic health organisation. So, over the past 35 years ethnic health organisation, building the primary health care structure. This includes building the community governance structure like a village community. And we also have the network of community organisation and ethnic organisation to strengthen the health information system and help forming the health system strengthening working group that can enforce or build the capacity of the local community health workers. So the health system strengthening working group and health information system working group is a key governance structure that can ensure that the service of the quality is accessible and location of the funding can meet the need of the local population as well as to ensure that the people participation in the different level to make sure that our health system continues to build the resiliency of the community.

Karen Miller: So, how do you create legitimacy for your network in a place like the Thai-Myanmar border?

Cynthia Maung: The first thing is this, we have seen that the ever growing number of displaced and internal displaced people. So, our health services delivery model has to be very responsive. And in case of like, emergency and conflict situation. Our health workers have to deal with the lifesaving emergency service, and usually our primary health care worker focus a lot on maternal child health. But in case of emergency, we have to be respond the needs for the displaced population.

We have to have a lot of networking and coordination among each organisation, as well as we have to do the network with the local Thai health centre to ensure that the referral system and supply chain and the training for health workers being supported by the local Thai authority. So, our health system has to be recognised and supported by the local Thai authority as well as the international NGO working on the border have the system to support the local governance structure.

Karen Miller: What are the main challenges you face in this environment?

Cynthia Maung: The main challenges are that we have seen that the number of displaced populations has been growing every day, the escalating of the conflicts. So, the humanitarian needs to be addressing the humanity and protection of the woman and child. This need to be addressed. And the security and protection of the health and humanitarian workers has been also a challenging issue. So that needs more attention from the international community to support. Same time to be able to access to the displaced population. We have to diversify our funding source and we have to channel the supply chain through the cross border. So, we need more multi-stakeholder engagement and many authorities involved. So, these are the challenges, but also have opportunity for understanding about the complexity and learning about the local context and where is the gap and where is the strength for each organisation so we can support each other.

Shophika Regmi: Hi, everyone. This is Shophika Regmi. I'm from HERD International, Nepal. I represent ReBUILD for Resilience Consortium, and we have teamed up with Connecting Citizens to Science. So, we have Dr. Roshan Pokhrel, he's the secretary to the Ministry of Health and Population in Nepal. And let's hear from him. Dr Roshan, as a policymaker from Nepal, which is a developing country which has recently gone to the federalisation, after attending this health system research conference, what are you hoping to get out of it?

Roshan Pokhrel: Thank you, Shophika. Yeah, it's a learning process for us, especially after federalisation, and I've been in the system for a long time, so we just want to make sure how other countries, countries like ours are doing at present, what are the models? What are the roles they're doing? And how do they check the health system at the grassroots level, and how research plays a part in that. So, we want to make sure we learn from other countries and try to replicate that to our context. So yes, it's a learning process, came as a learner out here, trying to learn something new so that we can take it back. And then along with my team out here, we can talk about it and then make sure we try to implement that in our country.

Shophika Regmi: Fantastic. What are the current issues in the country that is affecting the health systems, and have you seen any kind of relevancies here after attending the conference? The fragility, the shocks, that is similar to Nepal?

Roshan Pokhrel: The aim, of me participating here is how do we manage the HR system. How do you task add with the prevailing human system. Human resources might be very important to us, and the common burning issues, like the disasters, common disaster that's going on right now and with the problem of migration with the problem of climate change that we see. We have hospitals in places where there are no people right now and a lot of Nepalese moving out of the country for work, and we see hospitals out there where people are not attending the hospitals. So, our old settings I mean are exactly not useless, but the functions of them have gone down. How do you, you know, cater them in the urban situation might be very important and especially the internal migration is a big problem at present. The hills being empty and the low-lying lands being filled with a lot of people and the maintenance of hygiene, maintenance of hospitals and other things might be very important.

So, these things we want to learn from other countries, other economically similar countries so that we can replicate that in our country, so yes, it's a learning process. It's not that we have to deliver something out here. We just want to see what others are doing and then learn that and take it back to our country and make sure that we try to follow some of them which might be important to us.

Shophika Regmi: Thank you very much Dr. Roshan. It was a wonderful speaking with you. I wish you all the best and hope whatever you have learned, you can take back to your country. Thank you.

Thazin La: Hello, I'm Thazin La from the Burnet Institute, Myanmar, and also a research manager for ReBUILD for Resilience. Here today Lydia joins us. Lydia, could you please tell us a bit about yourself?

Lydia Distefano: Yeah. Hi, I'm Lydia DiStefano, Senior Research and Advocacy Manager for Community Partners International.

Thazin La: Okay. Lydia, can you tell me a bit about community health workers?

Lydia Distefano: Absolutely. Community health workers are critically important, especially in the global context with the rise in conflict, migration, and displacement. Often, community health workers are the closest to the communities that need support. They are trusted by community members to deliver health care services and are the best place to provide health services to communities.

Thazin La: Yeah, since their role is very important, how can we support them?

Lydia Distefano: Our organisation, Community Partners International, works with community health workers in Myanmar, Thailand, and Bangladesh that provide health services to the most vulnerable populations in conflict and context of exclusion.

We're also a member of CHIC, the Community Health Impact Coalition, that advocates for salaried, skilled, supervised, and supplied community health workers worldwide. This is work that we're really passionate about and excited to continue doing.

Thazin La: Okay, so what is the next step for you, or maybe for your organisation?

Lydia Distefano: From November 10th to the 14th, 2025, Community Partners International is co-hosting the 4th International Community Health Workers Symposium in Bangkok, Thailand. Our theme this year is On the Front Lines, empowering community health workers to create equitable health systems in context of conflict, migration and exclusion. This symposium will build off the past symposia in Uganda, Bangladesh, and Liberia. Participants will have the chance to engage with Thailand's network of community health workers, connect with frontline health workers from Myanmar, who deliver essential health services in conflict settings, and also with Rohingya health workers in Bangladesh, who build crucial bridges between displaced communities and their new host health services.

Thazin La: Lydia, thank you for joining us.

Dr Kim Ozano: I hope these conversations from the halls at the Eighth Global Symposium for Health Systems Research have inspired you. I know I certainly feel in my own research career that there's a lot to think about. There is also more to come as we continue to bring you real-time knowledge from Nagasaki. For now, thanks for listening and see you next time.