The economy of Laos remains the lowest of the ASEAN (Association of South East Asian Nations) according to the National Institute of Economical Research asserting that in spite of its growth, among the ten stronger in the world with a rate of 8.5% in 2013, it will be necessary to wait until 2040 so that Lao catches up on Vietnam and Thailand. The value of the economy in these countries reaches respectively 135 billion and 365.5 billion USD and next to them, Laos with its GDP (Gross Domestic Product) of 9.2 billion would be “a little child” according to the Director of the Institute. With a population of 6.6 million inhabitants and 49 listed ethnic groups, the Lao People’s Democratic Republic, a landlocked country of South-East Asia, remains one of the least developed countries in the world. So, 66% of the population lived with less than 2 USD a day in 2011.

It is in this context that SFE (Service Fraternel d’Entraide) tries to make a tiny contribution to the improvement of the life’s quality of villagers who are living in very remote and almost inaccessible areas. The figures evoked here above represent an average but are well below the realities with which our teams are confronted on the ground.

Thateng: the Community Agricultural Development Project started in August 2013 continues after a first period of establishing contact with the villagers. The objective is to contribute to improve food safety as well as water accessibility of the populations of 14 villages (6000 people), the poorest of the district of Thateng. The emphasis is on the diversification of vegetable and animal productions for an appropriate consumption and/or their sale so as to ensure additional income to families.

Savannakhet: The support for the Eye Hospital project benefited from your financial support at the level of 3830 € further to the call launched in the newsletter of November 2013. We are grateful to all our donors. The support to the ophtalmological project is ongoing through the financing of a specialization in ophthalmology for the doctor succeeding to the former doctor and chief of staff who retired. The cost of this training which is happening in Thailand for 3 years amounts 4000 €. We are taking this opportunity to call upon your generosity once again and the donations received will be allocated to this project.
The program for the eradication of tuberculosis in the province of Sekong comes to an end this month. SFE has been involved in that program since 2009 at the invitation of the health authorities. The small means invested in that fight and the limited accessibility to remote areas explained partially the low detection rate registered until then in this province.

**About Sekong:** it represents 4 districts among which 2 are located in a very mountainous area, 229 villages for a population of 104,500 inhabitants, 13 different ethnic groups, an annual income of 200$ per capita and only 45% of accessible villages in the rainy season.

The general objective to optimize the detection and diagnosis of tuberculosis in all the province has been attained and the particular emphasis on the training of health volunteers in the villages, of health centers and laboratories bore fruit.

SFE trained all in all 375 health volunteers in the villages, helped and equipped 19 health centers with water filter systems, trained 51 nurses in the detection of the cases, equipped the central laboratory to perform the diagnosis of tuberculosis, listed and treated 176 patients and especially during 5 years, our teams made a follow-up village by village.

Future prospect: the Provincial Health Authorities requested the SFE to start a medical project in the Provincial Hospital of Sekong on the model of what had been done in Attapeu in the extreme South of the country where SFE began to work in 1998. This project will start in October 2014 and will contribute to improve the quality of health care with an expatriate medical team living on the spot and working on the principles of mentoring with the medical team of the hospital.

**Attapeu:** the second phase of the Community Health Development Project started in October after a ceremony with great fanfare, in the context of a tropical storm which raged for two days in the southern part of the country. 12 new villages, among which some very distant ones have been selected with the provincial health authorities in this new project which will last for 3 years.

In a village as that of Nongfa, villagers live in so isolated a way so that they have access neither to the education system nor to the healthcare system. Even the Lao language represents an enormous challenge to them.

We would like to thank you for the interest you have taken in reading this letter and for your support.

Dr. Philippe Klopfenstein, chairman