

Project No. 2790034 (2)
PD - AAC - 417 - B1
APR 29 1976

THRU: AA/NE, Mr. Robert E. Nooter
NE/TECH, David I. Steinberg
NE/TECH, John S. Alden

20p.

CRS Proposal for Assistance to Al Olofy Hospital, Yemen

Catholic Relief Services submitted in July, 1975 a proposal for a 2-year, \$100,000 grant for expert technical training staff of Al Olofy Hospital in Yemen. In a December Advisory Review Meeting, the proposal was accepted in principle. The Yemen Mission was notified (STATE 305024 - Ref A) that we were prepared to approve the proposal as a one-time grant with the expectation that CRS would emphasize the preventive medicine and health education components of the training. This was in response to earlier criticism that the project focused too heavily on curative medicine. The Mission, in replying (SANA 0142 - Ref B) strongly supported the proposal and recommended its approval - notwithstanding the present necessity for emphasis on curative requirements - on the basis that the Mission and CRS were aware of the necessity to emphasize preventive programs and would be working toward this and health education emphasis in pending and future programs.

The purpose of this memo is to provide formal approval of the CRS proposal prior to submission of a Congressional notification. Also attached for your approval is a cable to Yemen advising them, subject to Congressional notification, of project approval.

APPROVED: /s/ R. H. Nooter

DISAPPROVED: _____

DATE: APR 29 1976

NE/TECH/H&ND/DP: ^{POS}PSellar/^{J.P.}TPaul/^{J.S.A.}JSalden

Clearances:

NE/NENA:GLaudato
PPC/DPRE:JWelty
NE/DP:BLangmaid (draft)

PHA/PVC:WHolcomb
NE/DP:DBernius (draft)



Department of State

~~SECRET~~
TELEGRAM

Ref, A

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PAGE 01 STATE 305024

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DRAFTED BY NE/TECHIGMCOLEMAN:BS

~~APPROVED BY AA/NE:ADWHITE~~

NE/NEA:GLAUDATO (PHONE)

NE/DP:BLANGMAID

PH/PVC:CSHOOK (INFO)

DESIRED DISTRIBUTION

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F.O. 11652: N/A

TAGS:

SUBJECT: CATHOLIC RELIEF SERVICES/AL OLOFY HOSPITAL PRO-
POSAL

1. CATHOLIC RELIEF SERVICES (CRS)/NEW YORK HAS SUBMITTED
PROPOSAL FOR 2-YEAR SUPPORT FOR OPERATING COSTS OF FOREIGN
STAFF OF AL OLOFY HOSPITAL.

2. APPROXIMATELY 30 MEDICALLY TRAINED VOLUNTEERS WOULD
TRAIN LOCAL STAFF IN PHARMACY, X-RAY, LABORATORY, NUTRI-
TION DEPARTMENTS AND ASSIST IN 2-YEAR PRACTICAL NURSES
COURSE INCLUDING NURSES BEING TRAINED FOR USE OUTSIDE
HOSPITAL. SPECIALITIES BEING RECRUITED ARE: 20 NURSES,
ONE X-RAY TECHNICIAN, ONE PHARMACIST, ONE GYNECOLOGIST, ONE
PHYSIOTHERAPIST, THREE INTERNISTS, ONE ANESTHETIST, ONE LAB-
ORATORY TECHNICIAN, ONE NUTRITIONIST, AND ONE ASSISTANT

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Department of State

TELEGRAM

777. 11.06.76 Ref. B
D. Wood

Pls see me about this

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DA

SUBJ: CATHOLIC RELIEF SERVICES/A1 OLOFY HOSPITAL PROPOSAL

784/1

REF: 75 STATE 305024

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MISSION STRONGLY SUPPORTS CRS PROPOSAL, WHICH SHOULD BE APPROVED AS A ONE-TIME GRANT. DIRECTOR RUIZ HAS MET WITH HOSPITAL DIRECTOR MR WILSON, CRS DIRECTOR WAGNER, FR, JOSEPH SHERER, AND PROGRAM ASST BEVERLY BUNN AND DISCUSSED THE PROJECT IN DETAIL.

MEW

WHILE MISSION AND CRS ARE KEENLY AWARE OF THE NECESSITY TO EMPHASIZE PREVENTATIVE MEDICAL PROGRAMS, THE REALITIES OF OPERATIONS AT A1 OLOFY HOSPITAL, THE ONLY ONE IN THE TIHAMA AREA, ARE SUCH THAT IMMEDIATE CURATIVE REQUIREMENTS STILL EXCEED ALL AVAILABLE RESOURCES. AID TRANSPORTATION SUPPORT, AS OUTLINED IN REFTTEL, IS PROGRAMMED TO ASSIST ONGOING HOSPITAL ACTIVITIES. THRUST OF PENDING AND FUTURE AID SUPPORT TO CRS PROGRAMS IS TOWARD PREVENTATIVE MEDICINE AND HEALTH EDUCATION COMPONENTS OF TRAINING. MISSION HAS REQUESTED PERIODIC REPORTS FROM CRS AS TO PROGRESS MADE IN THIS AREA. SCOTES

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Department of State **TELEGRAM**

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PAGE 02 STATE 305024

NUTRITIONIST. AID WOULD CONTRIBUTE DOLLARS 50,000 EACH YEAR TO PROVIDE TRANSPORTATION (DOLLARS 27,000 PER YEAR), INSURANCE (DOLLARS 8,000), STIPENDS (DOLLARS 11,250) AND MISCELLANEOUS TRAVEL AND ORIENTATION EXPENSES; INCLUDING PASSPORTS, ETC. (DOLLARS 3,650) FOR A TOTAL OF TWO YEARS.

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3. WOULD APPRECIATE USAID'S REACTION TO CRS PROPOSAL, WHICH WE PREPARED TO APPROVE AS ONE TIME GRANT WITH EXPECTATION THAT CRS WILL EMPHASIZE PREVENTIVE MEDICINE AND HEALTH EDUCATION COMPONENTS OF TRAINING RATHER THAN CURATIVE FOCUS AS CURRENTLY PRESENTED. ROBINSON

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Handwritten scribbles and initials at top right.

UNITED STATES GOVERNMENT

Memorandum

TO : DAA/NE, Mr. Alfred D. White

DATE: December 4, 1975

FROM : NE/TECH, David I. Steinberg *DS*

SUBJECT: Project Committee Meeting - Al Olofy Hospital - Yemen

to pay for operating costs of foreign staff for two yrs approx. w/for some relief staff.

In the absence of John Alden, I chaired the meeting on November 17, 1975 on Al Olofy Hospital, a proposal for \$100,000 for support to the Catholic Relief Services effort in Yemen. There was unanimous agreement among the Committee that the project should be turned down, and we see no need to prolong the agony by going through a NE Advisory Committee.

The CRS proposal focuses on curative medicine in a hospital setting-- hardly one of AID's health developmental priorities. There seems little that is preventative or outreach in Al Olofy's program, although there is a major staff training element. The proposed AID grant would presumably finance a portion of the costs of the expanded foreign medical staff at the hospital. It is unclear whether the Yemeni Government would fund the remaining costs, particularly in view of a recent change in local administration. It is also uncertain how funding for this project would be secured after the proposed 2-year grant period was completed.

You may remember that AID agreed to help CRS offset some of their unanticipated program costs in Jordan. Unfortunately, PHA encouraged CRS to believe that this proposal would serve this purpose. We do not agree.

We are expecting soon a sizable (\$200,000 OPG request) and reportedly strong proposal for assistance in nutrition from CRS in Yemen. If this proposal is well structured it would provide a very valid way for AID to enlarge its support to CRS.

Since I am the one turning down Hadassah, I believe it would be appropriate for me to turn down CRS. I suggest the attached letter to the Reverend Charlebois.

Attachment:

12-9-75 A/S for

1. A problem - Cleo Shove wrote Charlebois, without Bureau clearance, saying proposal was O.K.

2. An option - if Charlebois assured request was for one time grant, we might do it - But I'd prefer not to Al



1011 First Avenue, New York, N.Y. 10022

Tel phone: (212) 838-4700 • Cable: CATHWEL New York • Telexes: 224241 and 667207

Most Rev. Edward E. Swanson, D.D.
Executive Director

Rev. Msgr. Andrew P. Landi
Assistant Executive Director

Edward M. Kinney • James J. Norris
Assistants to the Executive Director

August 21, 1975

Mr. Cleo F. Shook
PHA/PVC
Agency for International Development
Room 3664 New State
321 21st Street, N.W.
Washington, D.C. 20523

We should go forward with this info re: the desk and the desk office concerns

Dear Mr. Shook:

Reference is made to your letter of July 16, 1975. You have my apologies for not replying sooner to your letter, but we have been endeavoring to clarify the exact financial needs of Al Olofy Hospital in Hodeidah. We are pleased you have accepted our presentation, and needed clarification only on proposed expenditures. The most urgent problem at this point is international personnel, who are vital for the running of the hospital as well as the training of the local staff.

We understand that thirty medically trained volunteers should be on the staff in order to implement the program adequately. The budget geared to the cost of these personnel runs as follows:

	<u>Year I</u>	<u>Year II</u>	<u>Totals</u>
Transportation	\$27,000	\$27,000	\$54,000
Insurance	8,100	8,100	16,200
Stipends	11,250	11,250	22,500
Miscellaneous Travel and Orientation Expenses (Passport, Visa, etc.)	<u>3,650</u>	<u>3,650</u>	<u>7,300</u>
	\$50,000	\$50,000	\$100,000

Regarding the total proposed expenditures of the hospital, they would be approximately triple the ongoing cost as stated in the logical framework - Page 4, Project Inputs: (D-1) - which amount to a little over \$300,000 per annum. The proposed expenditures would be at the ratio of \$3US from CRS and other private sources to \$1US from Yemen governmental sources.

This fiscal ratio and triple projection is based upon the utilization of this USAID grant for additional personnel, as well as the physical capacity of the hospital.

.../...

Mr. Cleo F. Shook

- 2 -

August 21, 1975

I'm sure this budgetary analysis answers the basic request of your letter. If not, please do call me. Again my apologies for the delay, and with great appreciation for your continued interest, I remain

Sincerely yours,

A handwritten signature in cursive script that reads "Robert L. Charlebois". The signature is written in dark ink and is positioned above the typed name.

(Rev.) Robert L. Charlebois
Special Assistant

RLC:mr
cc: Mr. Daniel Parker

X 22308

Return to ^{new} A/NE

July 16, 1975

(Rev.) Robert L. Charlebois
Special Assistant
Catholic Relief Services, USCC
1011 First Avenue
New York, N. Y. 10022

Dear Father Charlebois:

Congratulations on a speedy settlement of the thorny Jordan issue.

~~I have your proposal for the Al-Glofy Hospital in Hodeidah, Yemen. There is not a great deal we need to do with it.~~ The presentation of the setting in which the A.I.U. grant will be utilized, is well done. Before much headway can be made here in processing the proposal into a project, we will need, in detail, the particulars of the total proposed expenditures for the Hospital, showing the source. This will require a budget breakout showing how you intend to spend whatever you think it will take for the two years and how the \$100,000, \$50,000 each of two years, will be used along with other funds CRS or others provide. With this in hand, I think the proposal would be ready for the Bureau (RUSA) to process. They have a copy and are waiting for this addition to start the process of review.

We talked to Miss Jewel Slingerland today and she thinks it will be necessary to request this information from the field. If this will take some time, let me know and perhaps our Mission there can help out in transmitting the data to us by cable.

Sincerely yours,

Cleo F. Shook
Associate Director
Private & Voluntary Cooperation/Operations

Clearance: PIIA/PVC, John A. Ulinski, Jr.



C Shook
PIIA/PVC/DPWG:AM/EL:ar:7/16/75

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July 11, 1975

Mr. Daniel Parker, Administrator
Agency for International Development
Washington, D. C. 20523

Dear Mr. Parker:

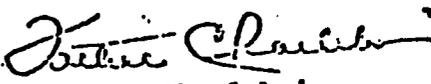
It is pleasant to write a note to inform you that the problem we shared with the Farmers Cooperative in Amman has finally been settled. As I informed you, Bishop Swanstrom sent our auditor and legal counsel to Amman to settle the pending court case as quickly as possible, sparing the U.S. Government as well as Catholic Relief Services and the host Government any embarrassment.

The actual settlement was accomplished by using local contacts and a variety of channels and was completed on June 11, 1975. The agreed upon cost settlement for the major claim was reached at \$75,000. Additional expenses, fees and legal services enabled Catholic Relief Services to solve the problem at an approximate cost of \$100,000.

I wish to express my personal thanks to you, Dan, and also to Mr. Cleo Shook of your office for your interest and cooperation. Today, I am forwarding to Mr. Shook the proposal for a health services grant for Yemen which I trust will meet your criteria.

With kind personal regards, I remain

Sincerely yours,


(Rev.) Robert L. Charlebois
Special Assistant

P.S. No doubt, you will wish to share this information with Ambassador Pickering.

bcc: Mr. Cleo F. Shook

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CATHOLIC RELIEF SERVICES

UNITED STATES CATHOLIC CONFERENCE

1011 First Avenue, New York, N.Y. 10022

Telephone: (212) 636-4700 • Cable: CATHWEL New York • Telex: 224241 and 667207

Most Rev. Edward E. Swanson, D.D.
Executive Director

Rev. Msgr. Andrew P. Landi
Assistant Executive Director

Edward M. Kinney • James J. Norris
Assistants to the Executive Director

Bill Flukner

28512

July 11, 1975

Mr. Cleo F. Shook
PHA/PVC
Agency for International Development -
Room 3664 New State -
321st Street, N.W.
Washington, D.C. 20523

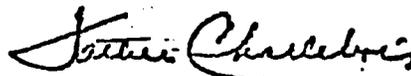
Dear Cleo:

As Harriet Crowley suggested on the phone yesterday, I am sending this grant presentation directly to you for the Al Olofy Hospital in Hoesidah, Yemen. I trust, Cleo, that it will be self-explanatory but wish to assure you that if you have further questions, I will be more than happy to discuss them.

We made an attempt to follow the O.P.G. procedure but such a project is so different in scope and concept, you may want to have it re-worked. I am also enclosing, as you requested, a copy of my letter to Mr. Parker which will enable you to close your file on the Jordan lawsuit.

Many thanks for your patience and continuing interest and I hope my presentation meets with your approval.

Sincerely yours,



(Rev.) Robert L. Charlebois
Special Assistant

Encl.

C.R.S. PROPOSED PROJECT FOR GRANT FUNDING
FOR THE AL OLOFY HOSPITAL, HODEIDAH, YEMEN

Yemen is a country in the Arabian Peninsula, on the lower part of the peninsula, facing the Red Sea. Because of its total isolation until the second half of the twentieth century, it is underdeveloped in the extreme in all fields of human and social progress. Health, hygiene, and medical care are major priorities of basic human needs for the 6,000,000 inhabitants. Raising of general health standards is a precondition to the successful development of Yemen and its people.

There are many problems in the country today, such as inadequate sanitation, polluted water, lack of a sewage system, no sanitary or health legislation in the country, with the result that food sold in shops, markets, and restaurants is often a source of disease. Preventive medicine is, therefore, of prime importance. Illness is prevalent, such as an extremely high rate of tuberculosis, schistosomiasis (a parasitic illness causing disorders of the kidneys, lungs, bladder, and the central nervous system), widespread malaria, rickets, gastroenteritis, smallpox, cholera, and eye diseases. Also of great importance, in view of the grave physical condition of the people, is the need for widespread courses in nutrition. The infant mortality rate is said to be 40% in some areas, proof indeed that preventive medicine and nutrition education are essential. Yet medical facilities are widely scattered, the possibilities of medical treatment few and far between. The ratio of doctors to population in Yemen is 1/35,000. Nurses to population 1/10,000. Hospital beds to population 1/1,250.

In 1970 Catholic Relief Services helped Yemen extensively in a period of drought and famine. As a result CRS was invited to participate in socio-logical and development programs, especially in the areas of health and education. Until 50 years ago there were no Christians permitted to enter this Moslem country. And now a Christian agency was actually being invited to work in Yemen...for the first time in 1,200 years!

CRS was particularly asked to help with the old province hospital, called Al Olofy Hospital, in the city of Hodeidah, in Hodeidah Province on the Red Sea. This hospital is the only one serving an area with a population of 1,250,000, many of them poor people of the coastal area, one of the least developed sections of Yemen. In fact there are only three hospitals in all of Yemen: the above-mentioned hospital in Hodeidah, the Republican Hospital in Sana'a, and the Swedish Clinic in Taiz...to serve 6,000,000 people!.

It was in 1972 that the Prime Minister of Yemen and the Governor of Hodeidah Province asked CRS to contribute staff for Al Olofy, the first hospital in the country to offer Western medicine. They asked repeatedly for Catholic Sisters, for, as they said, "they will be the spirit and the continuity of the hospital." This new hospital, replacing the 40-year-old province structure, was called Al Kheiry Hospital, and began to serve 150 out-patients by mid-November, 1973. It had a 100-bed capacity by mid-January, 1974. As of January, 1975, the new hospital again carries the name of the old structure, Al Olofy Hospital. CRS' role is more active than ever, working, as always, in conjunction with and at the request of the Government of Yemen.

There have been the usual growing pains of a burgeoning hospital in a severely underdeveloped country. The greatest problem of all is staffing, for without staff the hoped-for expansion of services cannot become a reality. There is a desperate need to expand the number of beds, the water supply is inadequate and sometimes polluted, the temporary kitchen must be replaced. Services are in need of improvement from staff to laboratory to kitchen supplies to new kitchen equipment. Somehow one problem is dependent on another; before the bed capacity can be expanded, the kitchen must be put in order. Also medicines unobtainable in Yemen are vitally needed in the hospital, as are such medical equipment as sterilizers, instrument cleaners, distillers, and surgical instruments.

The newest information out of Yemen indicates that there are now 260 beds in the Al Olofy Hospital. Besides those hospitalized, approximately 130 patients are seen daily in the outpatient clinic.

A most important feature of the Al Olofy Hospital is the training of local staff. Approximately 90 persons are on the payroll: 20 local nurses, 2 in the pharmacy, 6 in the laboratory, 2 in the X-ray section, 3 in the nutrition department, others working as kitchen help, cleaners, drivers, administrative personnel, interpreters, and service personnel in staff quarters. Inservice training is in process for 1 person in the pharmacy, 2 in the X-ray department, in the laboratory, 3 in the nutrition department, and there are 10 nurses in the two-year course for practical nurses being carried out in the hospital, with lectures provided at the Health Manpower Institute sponsored by the World

Health Organization. There are also 15 practical nurses who have already completed this course and are employed at the hospital. The Minister of Health was so pleased with this program that he asked the hospital to train 30 additional nurses for use outside the hospital. To date 12 are in training, but it is hoped that this program will be expanded. (New ideas take time in an underdeveloped country!)

As to international personnel, the staffing pattern calls for ~~20~~ nurses, an X-ray technician, a pharmacist, a gynecologist, a physiotherapist, three internists, an anesthetist, a laboratory technician, a nutritionist, and an assistant nutritionist. As one can appreciate, it is not easy to keep all these positions filled. The children's ward is now functioning, and the maternity ward and emergency ward are expected to open momentarily. More wards will be opening in the near future, dependent on staffing.

The Governor of Hodeidah Province takes an active and participating interest in the hospital, including a financial interest. He pays the salaries of the Hospital Administrator, and of the doctors, also stipends for nurses, nutritionists, educators, and technicians at the hospital. He guarantees air-conditioned housing too, also local transportation.

Catholic Relief Services has been most active in recruiting staff for Al Olofy Hospital and in contributing to and soliciting for its urgently needed resources. Since CRS began active participation in the work of Al Olofy, we have been responsible for the raising of funds and the shipping of medicines, surgical and medical equipment, and hospital furnishings for a total of

\$298,254.76. Included in these shipments were instruments, medical textbooks and reference books, many kinds of equipment, beds and bedding, and mattresses, even a fully equipped mobile field hospital.

Requested from USAID is a grant of \$100,000, the sum of \$50,000 for each of two years. These funds would be used to satisfy needs of the hospital, such as the costs of international personnel to develop and train the local staff in the ongoing programs of nutrition, preventive medicine, and specialized techniques of X-ray and laboratory. Such vital needs as medicines and medical equipment would be purchased and shipped. It is interesting to note that the purchase of medicines for one year for the full functioning of the Al Olofy Hospital is alone in excess of \$100,000.

Catholic Relief Services understands the reporting procedures of USAID and agrees to comply with them as requested.

LOGICAL FRAMEWORK

From FY _____ to FY _____
 Total U.S. Funding: \$100,000
 Date Prepared: July 11, 1975

Project Title & Number: EL OLOFY HOSPITAL, HODEIDAH, YEMEN

Project No.: 75/

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumptions
<p>Program or Sector Goal: The broader objective to which this project contributes: (A-1)</p> <p>To raise the medical standards to meet the basic needs of the 1,250,000 persons living in the area of Hodeidah Province and along the Red Sea Coast.</p>	<p>Measures of Goal Achievement: (A-2)</p> <p>Reduction of mortality rate and chronic debilitating illnesses (e.g., reduction of 40% infant mortality rate).</p>	<p>(A-3)</p> <p>Statistical records available at Board of Health, Hodeidah Province</p> <p>Records of Al Olofy Hospital, Hodeidah.</p> <p>Records in offices of CRS-USCC in Hodeidah.</p> <p>Discussions with the local Government officials in Yemen.</p>	<p>Assumptions for achieving Goal Targets: (A-4)</p> <p>That there will continue to be interest on the part of the Government of Yemen and Hodeidah Province in improvement of basic medical/health needs of their people.</p>

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AID 1020-23 (1-73)
 Supplement 1

PROJECT DESIGN SUMMARY
 LOGICAL FRAMEWORK

Life of Project:
 From FY _____ to FY _____
 Total U.S. Funding \$100,000
 Date Prepared: July 11, 1975

Project Title & Number: EL OLOFY HOSPITAL, HOIDEIDAH, YEMEN

Project No.: 75/

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumptions
<p>Project Purpose (B-1):</p> <p>To develop and expand the services of the hospital, upgrade the preventive medicine level, expand nutrition education.</p> <p>To train the local people of Yemen so they will be able to teach their own needy poor in future.</p>	<p>Conditions that will indicate purpose has been achieved: End-of-Project Status (D-2)</p> <p>The hospital facility, through expansion, can meet the needs of the people of the area, resulting in a greater inpatient and outpatient caseload.</p> <p>Local people, trained in growing numbers, will be able, in turn to train their own people in preventive medicine, hygiene, and nutrition.</p>	<p>(D-3):</p> <p>Statistical records available at Board of Health, Hodeidah Province.</p> <p>Records of Al Olofy Hospital, Hodeidah.</p> <p>Records in office of CRS-USCC in Hodeidah.</p> <p>Discussions with the local Government officials in Yemen.</p>	<p>Assumptions for Achieving Purpose (I)</p> <p>That the people of the area will seek medical help from Al Olofy and accept Western medicine.</p> <p>That the local Yemeni will be motivated to learn modern medical techniques in order to serve their own people</p>

PROJECT DESIGN SUMMARY
LOGICAL FRAMEWORK

Life of Project:
From FY _____ to FY _____
Total U.S. Funding: \$100,000
Date Prepared: July 11, 1975

Project Title & Number: EL OLOFY HOSPITAL, HODEIDAH, YEMEN

Project No.: 75/

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumpt:
<p>Project Outputs: (C-1) Increase in basic services.</p>	<p>Magnitude of Outputs (C-2) Increase of outpatients from 130 to 200 per day; number of inpatients monthly will double.</p>	<p>(C-3) Records of Al Olofy Hospital, Hodeidah, Yemen.</p>	<p>Assumptions for achieving outputs: (C-4)</p>
<p>Expansion of international staff.</p>	<p>More doctors and nurses. Preventive medicine can be stepped up to include more vaccinations, etc.; also increased training in nutrition.</p>	<p>CRS-USCC/Yemen office records.</p>	<p>That the people of the area will continue to seek medical help.</p>
<p>In-service training.</p>	<p>Increase: from 10 nurses to 20; from 1 training in pharmacy to 2; from 2 training in X-ray to 4; from 4 training in laboratory work to 7; from 3 training in nutrition department to 5.</p>		<p>That the local people will be interested in participating in training.</p> <p>That local community health posts will encourage people to go to the hospital.</p>

PROJECT DESIGN SUMMARY

Total U.S. Funding: \$100,000

Date Prepared: July 11, 1975

LOGICAL FRAMEWORK

Project Title & Number: EL OLOFY HOSPITAL, HODEIDAH, YEMEN

Project No.: 75/

Narrative Summary	Objectively Verifiable Indicator	Means of Verification	Important Assumptions
<p>Project Inputs: (D-1)</p> <p>CRS contributed extensively to help cover medical insurance, transportation overseas, orientation, salaries, severance pay, and also shipped medical supplies, instruments, equipment, furnishings, blankets, and bedding for a total value of \$298,254.76.</p> <p>The Governor of Hodeidah gives financial assistance in the form of salaries for international staff, in-country transportation, air-conditioned housing.</p> <p>\$100,000 requested of USAID.</p>	<p>Implementation Target (Type and Quantity): (D-2)</p> <p>\$100,000 from USAID.</p>	<p>(D-3)</p> <p>Records of Al Olofy Hospital, Hodeidah, Yemen.</p> <p>CRS-USCC/Yemen records.</p> <p>CRS-USCC/New York records.</p>	<p>Assumptions for providing Inputs: (D-4)</p> <p>That the U.S. Grant will be available.</p> <p>That the local and federal governments in Yemen will continue their interest and active participation in the hospital, including their current outputs and increased input dependent on the increased international staff plans.</p> <p>That CRS will continue to meet its commitments.</p>



Department of State

TELEGRAM

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APPROVED BY AA/NE/RHNOOTER
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PPC/DPREIJHELTY(INFO)

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TO AMEMBASSY SANA

UNCLAS STATE 105075

AIDAC

E.O. 116521 N/A

TAGS:

SUBJECT: CRS: AL QLOFY HOSPITAL PROPOSAL

REF: SANA 0142

1. BASED ON REPTEL, A ONE-TIME GRANT TO CRS OF DOLLARS 100,000 IS APPROVED FOR SUBJECT PROPOSAL, SUBJECT TO CONGRESSIONAL NOTIFICATION REQUIREMENT. WILL ADVISE WHEN THIS REQUIREMENT SATISFIED. SISCO

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