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Freedom Medicine

**Quarterly Report
January 1, 1990--March 31, 1990**

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A

Summary of Progress

Freedom Medicine's operations and transition into the Ministry of Public Health progressed according to schedule during the first three months of 1990. The first class of the Expanded Paramedic Training Program began on January 14, 1990, with sixteen students enrolled. Fourteen students are expected to graduate in April, 1990. The recruitment, testing and selection process for the second EP class has begun; that group is expected to begin its coursework in early May, 1990.

In Chitral, a second group of Afghan women completed the Maternal and Child Health Education Program; the completion of that session also marked the conclusion of FM's training activities in the Chitral Valley. The Chitral clinic will either be transferred to another organization or closed entirely in May, 1990.

Also during this quarter, Freedom Medicine began planning for a monitoring mission to the northeastern provinces. FM has sought to include a monitor from the Ministry of Public Health, as the MOPH's participation in the verification and evaluation of the clinics is both important and appropriate. Training of the monitoring team will take place during the month of April, and the group is to depart during the first week of May, 1990.

Finally, Freedom Medicine's transition to the Ministry of Public Health has continued. During the quarter, the MOPH began debriefing FM paramedics and planning for the supply of the Expanded Paramedic graduates. (Most of the EP graduates will return to their original clinics and be supplied by the Swedish Committee for Afghanistan, through the Ministry of Public Health. Two graduates will be assigned to MOPH/MSH clinics.) In addition, the MOPH Training Institute has assigned three physicians to teach full-time in the EP training program at Thal. Along with several MOPH supervisory personnel, the MOPH appointees will undergo the Training of Trainers seminar in May; the MOPH trainers will then be fully involved in the instruction of the second EP class.

Component #1

Training Programs

1. Completed Projects/Activities:

a.) Expanded Paramedic Training Program (Formerly entitled "Advanced Training Program")

Freedom Medicine's first Expanded Paramedic Training Program class began on January 14, 1990; sixteen (16) students began the program. Personnel from the Ministry of Public Health participated in the didactic portion of the Expanded Paramedic Program, although not to the degree expected. Also, on March 31, 1990, the entrance examination was held at the Ministry of Public Health for the second class of Expanded Paramedic (EP) students.

Please refer to Section 3.a. for additional information.

b.) Curriculum Changes

As was expected, the Expanded Paramedic Training Program curriculum was modified during the course of the first session to make it more responsive to the needs of the students. An accurate needs assessment could not be done in advance because Freedom Medicine had no means by which to access the students prior to their enrollment in the course.

c.) Field Training Clinics Operated

Freedom Medicine did not operate any field training clinics in Afghanistan during this quarter. This component of the basic training program was omitted for the EP sessions because the EP students all have had prior experience in clinical settings in Afghanistan. (This section will be deleted from future quarterly reports.)

d.) Refresher Training

Twenty-four (24) medics received refresher training at the Thal facility between January 1, 1990 and March 31, 1990.

e.) Patients Treated

11,879 patients were seen at the Freedom Medicine training facilities during the quarter. Please refer to Chart 5 for detailed information.

f.) Interagency Training Programs

Operation Salam: Freedom Medicine continued its cooperation with the staff from Operation Salam by providing demographic information on mine-injured men transported to Afghanistan via the Shura-E-Nazar medical evacuation program. (By compiling

information on mine-related injuries, Operation Salam hopes to target its educational programs in a more effective manner.)

International Rescue Committee (IRC): Freedom Medicine exchanged training expertise with the IRC dental program based in Darsamond. FM provided first-aid training for 4 IRC para-dentists, while IRC provided basic dental training for the EP students.

Freedom Medicine's EP students also made a field visit to IRC/Hongu to observe the practice of community health workers in the camps. In addition to providing practical reinforcement of the importance of primary healthcare, the visit also afforded an opportunity for providers at different levels to observe one another at work. This insight will prove valuable to the individuals as they continue to work together after repatriation.

German Afghanistan Committee (GAC): Freedom Medicine has entered into an agreement with the GAC whereby FM will provide medical backup for the GAC clinic at Sada and ambulance transfer to Peshawar as needed.

Finally, in addition to the specific programs mentioned above, Freedom Medicine participates in interagency working groups which are reviewing and updating the Health Worker Standards and Guidelines. The original standards were developed to address emergency conditions and must be revised to meet the changing needs and current demand for primary health care services.

g.) Maternal and Child Health Project

The second class of the Maternal and Child Health Education Project was conducted for six students from January 31, 1990 through February 28, 1990. Interest was high and attendance good. Curriculum revision continued in response to the trainer's increased understanding of the knowledge, attitudes and practices of the participants.

2. Unanticipated Activities:

a.) Expanded Training Program

One student from the training program was called back to Afghanistan by his commander, while another was dismissed for disciplinary reasons.

b.) Curriculum Changes

No unanticipated activities.

c.) Field Training Clinics
No unanticipated activities.

d.) Refresher Training
No unanticipated activities.

e.) Patients Treated
No unanticipated activities.

f.) Interagency Training Programs
No unanticipated activities.

g.) Maternal and Child Health
No unanticipated activities.

3. Incomplete/Unsuccessful Activities, Constraints Identified, Solutions Proposed

a.) Expanded Paramedic Training Program

The number of applicants for EP-2 dropped sharply in comparison with those for EP-1. One hundred and three (103) individuals took the exam for EP-1, while only thirty-one (31) were present for the exam administered on March 31, 1990. The drop may be due to seasonal fluctuations, the onset of Ramazan or other reasons.

In an effort to enlarge the pool of candidates, Freedom Medicine will hold an additional entrance exam during April. Although this will require the postponement of EP-2, the importance of candidate selection warrants that extra measures be employed.

b.) Curriculum Changes

The shortage of personnel capable of performing accurate medical translations caused a delay in the translation of some course materials. Freedom Medicine is hopeful that an option currently being explored by the Asia Foundation (i.e., developing a translation service utilizing the skills of Afghan professionals who have immigrated to the U.S.) proves fruitful as a translation resource. Freedom Medicine will continue to investigate this possibility in the coming quarter.

c.) Field Training Clinics
No incomplete or unsuccessful activities.

d.) Refresher Training
No incomplete or unsuccessful activities.

e.) Patients Treated
No incomplete or unsuccessful activities.

f.) Interagency Training Programs

No incomplete or unsuccessful activities.

g.) Maternal and Child Health

No incomplete or unsuccessful activities.

4. Workplan for Next Quarter

a.) Expanded Paramedic Training Program

The second class in the Expanded Paramedic program (EP-2) is scheduled to begin in mid-May, 1990. The appointees from the Ministry of Public Health will undergo the Training of Trainers seminar in early May and will be fully integrated into the EP program by the time the second class gets underway. (Please refer to Component #4, Section 4.c. for additional information.)

Freedom Medicine will also engage in the recruitment of expatriate staff to replace the training personnel whose contracts are to expire. The recruitment effort will emphasize finding personnel who have had previous experience in development work; all new expatriate staff will be required to undergo the Training of Trainers workshop prior to teaching in the Expanded Paramedic Training Program. This will ensure standardization in the teaching technique and greater congruity with the competency-based training curriculum.

b.) Curriculum Changes

The curriculum of the EP program will continue to be adjusted as warranted, based on needs identified by the trainers and students of the course. (Please refer to Section g. below for additional information.)

c.) Field Training Clinics

Freedom Medicine currently has no plans to operate field training clinics in Afghanistan during the coming quarter.

d.) Refresher Training

Planning is underway to coordinate the refresher training for returning paramedics with the expanded training program. In addition, Freedom Medicine seeks to improve its standard medical evaluation form (including the oral evaluation component) by incorporating a clinical skills checklist and greenbook information.

e.) Patients Treated

Freedom Medicine anticipates that 12,000 patients will be treated at its training facilities in the coming quarter.

f.) Interagency Training Programs

In addition to the initiatives mentioned in Section 1, Freedom Medicine will provide technical support to the International Rescue Committee in its plans to augment its demining efforts with ambulances on-site. FM will also participate in a CMC-sponsored working groups investigating sustainability at the clinic level and standardization of clinical MIS system development.

g.) Maternal and Child Health Program

The Maternal and Child Health Education Project developed in Chitral will be incorporated into the Expanded Paramedic training program in that methods for teaching healthy practices to Afghan women will be discussed. Freedom Medicine has no plans to continue its direct education of Afghan woman.

Component #2

Medical Facilities Inside Afghanistan

1.) Completed Projects/Activities

a.) Medical Facilities (Formerly entitled "New Medical Facilities")

No new medical facilities were established inside Afghanistan during the third quarter of FY90. In keeping with its mandate from USAID, twenty (20) FM clinics were consolidated with other FM facilities, bringing the total number of clinics operated by FM to one hundred (100). Finally, one parodontist trained by IRC was assigned to a Freedom Medicine clinic in Jaji.

b.) Medical Equipment and Supplies

Twenty-four (24) medics were resupplied in Pakistan during this quarter, bringing 5,730 kilos of medicine back to their clinics in Afghanistan.

Chart 6 provides a graphic representation of the foregoing.

Finally, twenty-two (22) paramedics who returned for resupply were provided with generators, water pumps, autoclaves, clothing and/or medical equipment, as is illustrated in Chart 7.

c.) Patients Treated

Freedom Medicine estimates that approximately 200,000 patients were treated at Freedom Medicine's facilities in Afghanistan during the quarter. This projection is based on clinic records presented by paramedics who have returned from Afghanistan for debriefing and resupply.

d.) Special Initiatives

Freedom Medicine continued its support of the Jamiat-I-Islami party in returning wounded mujahideen to their homes in Afghanistan. Freedom Medicine provided transportation and incidental expenses for two hundred and nineteen (219) men to return to Afghanistan from January through March, 1990. The total number of men assisted through this program is now two hundred and eighty four (284).

2.) Unanticipated Activities

a.) Medical Facilities

No unanticipated activities.

b.) Medical Supplies and Equipment

No unanticipated activities.

c.) Patients Treated

No unanticipated activities.

d.) Special Initiatives

No unanticipated activities.

3.) Unsuccessful/Incomplete Activities, Constraints Identified, Solutions Proposed

a.) Medical Facilities

No incomplete/unsuccessful activities.

b.) Medical Supplies and Equipment

No incomplete/unsuccessful activities.

c.) Patients Treated

No incomplete/unsuccessful activities.

d.) Special Initiatives

No incomplete/unsuccessful activities.

4.) Workplan for Next Quarter

a.) Medical Facilities

No new Freedom Medicine medical facilities are planned for inside Afghanistan during the next quarter; however, the clinic consolidation process will continue.

b.) Medical Supplies and Equipment

Freedom Medicine expects to provide equipment to paramedics who return next quarter in the same proportion as was provided this quarter.

c.) Patients Treated

Freedom Medicine estimates that 210,000 patient visits will be recorded at the clinics inside Afghanistan during the last quarter of FY90.

d.) Special Initiatives

Freedom Medicine will continue its efforts to return Mujahideen to their homes in Afghanistan once they have been medically cleared by Peshawar physicians. It is anticipated that between one-hundred and fifty and two-hundred men will benefit from this program during the coming quarter.

Component #3

Data Collection and Monitoring

1.) Completed Projects/Activities

a.) Monitoring Trips

Freedom Medicine began preparations for its spring monitoring mission during this quarter. Among the issues resolved were coordination with other agencies, selection of monitors (including and appointee from the MOPH) and identification of the region to be visited.

b.) Verifications

Freedom Medicine was precluded from conducting a monitoring mission during the January--March, 1990 period due to the severity of weather conditions which prevail in Afghanistan during the winter.

c.) Monitor Selection and Training

The monitor selected by Freedom Medicine to serve as the FM representative on the upcoming mission was one of the FM Afghan staff released during FM's funding crisis in July, 1989. The individual has had prior experience on monitoring missions for the Coordinating Medical Committee (CMC) and is familiar with the provinces which will be visited on this mission.

Freedom Medicine was unable to send the staff member who carried out the October/November, 1989 assessment because his services are needed at the Thal hospital.

d.) Paramedic Debriefing

Twenty-four (24) medics were debriefed during the third quarter of FY90, as compared with forty-four (44) paramedics debriefed in the last quarter.

e.) Database Development

The paramedic database was updated and revised to include information reflecting when clinics were last monitored, number of personnel assigned to each, etc. The database was forwarded to USAID at the request of the USAID representative.

2.) Unanticipated Activities

a.) Monitoring Trips

No unanticipated activities.

b.) Verifications

No unanticipated activities.

c.) Monitor Selection and Training

No unanticipated activities.

d.) Paramedic Debriefing

No unanticipated activities.

e.) Database Development

No unanticipated activities.

3.) Incomplete or Unsuccessful Activities, Constraints Identified, Solutions Proposed

a.) Monitoring Trips

No incomplete/unsuccessful activities.

b.) Verifications

No incomplete/unsuccessful activities.

c.) Monitor Selection and Training

The Ministry of Public Health was asked to appoint a representative to accompany the Freedom Medicine team on the mission planned for May, 1990. As of March 31, 1990, the MOPH had been unable to identify a candidate, primarily because there is a discrepancy between how the MOPH defines "monitoring" and how Freedom Medicine defines the term. (The MOPH "Inspection and Monitoring Department" functions as an internal auditing body which checks the compliance and performance of the MOPH departments but does not regularly work inside Afghanistan.)

Freedom Medicine has solicited the assistance of First Deputy Minister of Health Najibullah Mojaddedi, M.D., in resolving this matter. Dr. Mojaddedi is committed to finding an appropriate appointee to accompany Freedom Medicine on the May/June 1990, mission.

d.) Paramedic Debriefing

No incomplete/unsuccessful activities.

e.) Database Development

No incomplete/unsuccessful activities.

4.) Workplan for Next Quarter

a.) Monitoring Trips

As has been mentioned above, Freedom Medicine plans to conduct a monitoring mission in May and June, 1990. The team will visit clinics in the provinces of Baghlan, Takhar and Kunduz, some of which have not been verified in the past twelve

months. A representative from the Ministry of Public Health will accompany the Freedom Medicine team and participate in the clinic assessment process.

b.) Verification

See section 4.a.

c.) Monitor Selection and Training

A three-week training program for the FM and MOPH monitors is planned for the latter part of April, 1990. As with the last mission, Freedom Medicine will avail itself of the training expertise of personnel from the CMC and other cross-border organizations.

d.) Debriefing Paramedics

Freedom Medicine plans to debrief thirty (30) paramedics during the upcoming quarter.

e.) Database Development

Freedom Medicine will continue to develop the paramedic database. Financial planning and budgeting have been integrated into the daily activities of the Special Projects office, and as such, will soon be incorporated into the paramedic database system.

Component #4

Transition to the Ministry of Health

1. Completed Projects/Activities

a.) Administrative Transition

--Finance: The Finance Office continues to update and provide additional safeguards regarding expenditures. Computer codings and cost centers have been instituted to match the line items in the new FY90/91 grant.

--Special Projects: Internally, Freedom Medicine finalized the formalization of policies and procedures in the Special Projects Department. A cost-center budget was established to allow greater fiscal control within the department, and to introduce the Afghan staff first-hand to fiscal accountability. The department also introduced a system through which medicines for returning medics are ordered in advance; this process has greatly improved methods with the donor and will be completed on a monthly basis.

--Thal Facility: During the past quarter, Freedom Medicine disposed of excess inventory items. This is a gradual process which will be continued throughout the coming year in preparation for the facility's closing in March, 1991. Among the items donated to the Afghan Trauma Center/MOPH were hospital jackets, urinals, IV sets, portable traction apparatus, hospital trays, drainage and suction apparatus, and other similar pieces of minor equipment.

--Management Training: Management training workshops for Afghan employees were conducted on a weekly basis throughout the quarter. The two-hour sessions focused on administrative skills, letter and memo-writing, management information systems and inter-office communication policies.

b.) Interaction with the Ministry of Public Health

Meetings of the MOPH and FM transition teams continued on a weekly basis during the third quarter. Frequently, additional sessions were held so that the teams could complete tasks within the scheduled time frame. The primary focus of the teams' efforts during this quarter was the development of the MOPH's capacity to carry out functions performed by FM's Special Projects Office. To this end:

The Ministry of Health began interviewing FM medics who have returned for debriefing and resupply. (The MOPH debriefing occurs in addition to the one conducted by FM.) The purpose of the MOPH debriefing is to introduce the medics to the Ministry, to share clinic information, assess the healthcare needs of the provinces in which the medic work and to prepare the medics for their future relationship with the MOPH.

Freedom Medicine also assisted the MOPH in preparing for the supply of the Expanded Paramedics scheduled to graduate in April, 1990. (The Ministry of Public Health will contract with the Swedish Committee for Afghanistan for ongoing supply of graduates of the EP program.) The MOPH was oriented to the FM supply and documentation system, and plans were made for MOPH staff to be trained under the supervision of the FM Special Projects Director.

c.) Medical Training Program Transition

In addition to the activities described in Component #1, members of the FM training staff met with Dr. Fatimie and representatives of the MOPH Training Institute to assess how best to integrate the FM training program with those now operated by the MOPH. By discussing these issues now, it is hoped that the FM program can be tailored to the MOPH's needs and that duplicative efforts will be minimized.

d.) Afghan Health and Development Services (AHDS) (New Section)

In January, 1990, Freedom Medicine was asked by Dr. Mojaddedi to provide technical support and assistance to a newly-formed Afghan non-governmental organization, the Afghan Health and Development Services (AHDS). The AHDS is working with the AIG to rebuild the health and social infrastructure in Afghanistan.

Freedom Medicine assisted the principals of the AHDS in preparing the organization's charter, completing a letter of introduction from the agency to the PVO community, and applying for PVO registration both in Pakistan and with international funding agencies. In addition, FM directed AHDS in the development of a proposal for the Model Afghan Province Program (MAPP), through which a health system for Afghanistan will be established on a province-by-province basis and provided office space for the AHDS staff until other arrangements could be finalized.

2.) Unanticipated Activities

a.) Administrative Transition

No unanticipated activities.

b.) Interaction with the Ministry of Public Health

No unanticipated activities.

c.) Medical Training Program Transition

No unanticipated activities.

d.) Afghan Health and Development Services (AHDS)

No unanticipated activities.

3.) Incomplete/Unsuccessful Activities, Constraints Identified, Solutions Proposed

a.) Administrative Transition

No incomplete/unsuccessful activities.

b.) Interaction with the Ministry of Public Health

The transition process has progressed sufficiently that the MOPH must now assume responsibility for various aspects of FM's operation. However, the MOPH is hampered by a lack of qualified personnel, insufficient operational funds to meet basic supply needs and a superstructure (the A.I.G.) which is unwieldy and excessively bureaucratic. In addition, the lines of authority and decision-making between the MOPH and Management Sciences for Health (MSH) appear to overlap. This precludes the MOPH from making final decisions on many matters, as it is often necessary for MOPH personnel to obtain authorization from MSH.

Freedom Medicine's goal from the outset of the transition has been to enable the MOPH to take over the FM programs in as complete and independent a manner as possible. FM has quantified its programs/products in such a way that the MOPH can integrate some aspects immediately and others at a later date. Also, FM has established seminars through which MOPH staff can gain practical expertise in all aspects of the FM operations (teaching, logistics, monitoring, etc.).

The MOPH administration (particularly First Deputy Minister of Health Najibullah Mojaddedi, MD) has exhibited a good faith effort to overcome the personnel and funding problems, both in word and deed. Unfortunately, the severity and systemic nature of the problems described above virtually assures that the problems will continue to impede the progress of the transition in the months ahead. At present, the most reasonable manner in which to address the situation is to define which components of the FM program the MOPH can assimilate and to focus on those. This is the strategy which the transition teams will employ as the process continues.

See also Component #3, Section 3.c.

c.) Medical Training Program Transition

Personnel from the Ministry of Public Health did not participate as actively in the didactic phase of EP-1 as Freedom Medicine had expected; MOPH involvement in the course was limited to guest lecturing by three physicians.

In an effort to address this problem and prevent its recurrence in the future, Freedom Medicine requested that three physicians from the MOPH Training Institute be

assigned to teach full-time in the Expanded Paramedic Program at Thal. In March, 1990, Dr. Fatimie (Director of the MOPH Training Institute) appointed three individuals to serve in this capacity. After completing Training of Trainers (TOT) program in early May, the physicians will assist with teaching the second session of the Expanded Paramedic Program.

d.) Afghan Health and Development Services (AHDS)

The personnel problems which plague the MOPH are shared by the AHDS. The agency relied heavily on Freedom Medicine's technical expertise during the quarter. However, AHDS not only sought FM's assistance in recruiting qualified staff, but as the quarter progressed, the AHDS staff assumed a greater control over the process of proposal-writing, editing, submission and negotiations with the funding body. In turn, the FM staff began phasing itself out of the AHDS's day-to-day operations.

4.) Workplan for Next Quarter

a.) Administrative Transition

--Finance: In the coming quarter, the Finance Office will focus on streamlining the procurement department, reorganizing the filing system and providing advanced training to the Thal accountant. Finally, the department will close out the fiscal year on April 30, 1990 and will complete all budget and variance reports pertinent to that process.

--Special Projects: The Special Projects staff will continue its activities regarding paramedic resupply, maintenance of the database, planning and carrying out monitoring missions and collaborating in training their counterparts from the MOPH during the coming quarter. (Please refer to Component #4, Section 4.b. for additional information.)

--Thal Facility: Freedom Medicine will continue to liquidate excess inventory, primarily by donating the supplies to MOPH facilities. An inventory/condition report of all capital equipment will be initiated as well, as the projection of available resources can be used by the MOPH in its planning for future projects.

--Management Training: In-house training will continue on a weekly basis. Afghan employees will also participate in additional staff development programs offered by other agencies in the PVO community.

b.) Interaction with the Ministry of Public Health

As was described in the preceding section, Freedom Medicine will continue its training programs for MOPH logistics, monitoring and training staff. Likewise, the transition teams will determine which elements of the FM program are

most essential to the MOPH at this time and focus on integrating those components into the MOPH system. Dr. Mojaddedi will be included in the decision-making process on a more consistent basis, as many of the issues currently under discussion are policy matters which must be decided at a higher level in the MOPH administration than that occupied by transition team members.

c.) Medical Training Program Transition

The MOPH appointees to the Thal training program are scheduled to undergo the Training of Trainers (TOT) workshop in May, 1990; subsequently they will be permanently assigned to the Expanded Paramedic Training Program.

The May TOT session will also be attended by eight to twelve MOPH physician, nursing and ancillary personnel who will be involved in other (non-FM) training programs conducted by the Ministry. Some of the personnel who will participate function as monitors for MOPH clinics inside Afghanistan; the TOT training will better enable them to understand the role of mid-level health workers. In addition, the TOT graduates will be more skilled at providing corrective feedback to providers whom they evaluate in the field setting.

d.) Afghan Health and Development Services (AHDS)

Freedom Medicine will continue to provide assistance to the AHDS on an as-needed basis. FM's experience in healthcare, training and facility construction will prove invaluable to the AHDS as it undertakes the Model Afghan Province Program.

Component #5

Operational Conclusion

(New Section: This section will report progress made by Freedom Medicine in phasing out its administrative and operational functions in Pakistan in preparation for the departure of expatriate staff in the spring of 1990.)

1.) Projects/Activities Completed

a.) Chitral Clinic

The Maternal and Child Health Education Project was completed in March, 1990; the expatriate staff member at the Chitral facility was reassigned to the training office in Peshawar. USAID will no longer support the clinic, but since it is the primary source of healthcare for the approximately 40,000 refugees who reside in the Chitral Valley, Freedom Medicine has been actively engaged in identifying an agency or funding source to take over the site.

2.) Unanticipated Activities

a.) Chitral Clinic

No unanticipated activities.

3.) Incomplete/Unsuccessful Activities, Constraints Identified, Solutions Proposed

a.) Chitral Clinic

No unanticipated activities.

4.) Workplan for Next Quarter

a.) Chitral Clinic

Freedom Medicine has negotiated with the Danish Afghanistan Committee regarding the transfer of the Chitral clinic to that organization. The Danish Committee will assume financial responsibility for the clinic effective May 1, 1990; Freedom Medicine will continue to provide administrative assistance to DACCAR until June 1, 1990, thereby effecting a smooth and efficient transition.

CHARTS

Note: Charts 1--3 reflect information pertaining to paramedic graduates. Since the Expanded Paramedic Program has not yet graduated its first class, these charts have been omitted.

Chart 4: Paramedic Trainees

This chart shows the number of Expanded Paramedic Training Program students enrolled in the course at Fort Freedom (the FM training facility in Thal, Pakistan) during the past quarter.

	<u>EP-1</u>
Enrolled:	16
At present:	14*
% at present:	87.5%

* One student was called back to Afghanistan by his commander; another was dismissed for disciplinary reasons.

Chart 5: Patients Received in Training Facilities (by Calendar Year)

This chart shows the number of patients received each quarter at the various Freedom Medicine Training Facilities. The Afghan field clinics mentioned are training clinics, such as the clinic in Jalalabad. The figures are grouped by fiscal year and do not include patients received in clinics of graduated paramedics.

Quarter	Training Hospital	Training Clinic	Refresher Clinic	Field Clin./Pak.	Field Clin./Afgh.	Total
87-3rd	271	3,276	2,360	4,625	419	10,951
87-4th	<u>271</u>	<u>2,726</u>	<u>2,961</u>	<u>310</u>	<u>7,786</u>	<u>14,054</u>
Total 87*	542	6,002	5,321	4,935	8,205	25,005
88-1st	351	3,154	4,077	1,960	7,260	16,802
88-2nd	593	3,953	4,944	750	4,800	15,040
88-3rd	906	4,457	4,521	1,756	2,103	13,743
88-4th	<u>1,043</u>	<u>5,829</u>	<u>3,085</u>	<u>0</u>	<u>5,260</u>	<u>15,217</u>
Total 88	2,893	17,393	16,627	4,466	19,423	60,802
89-1st	1,258	4,734	3,321	0	4,682	13,995
89-2nd	1,570	4,275	3,771	0	2,037	11,653
89-3rd	1,835	5,481	5,620	0	N/A	12,936
89-4th	<u>1,793</u>	<u>6,901</u>	<u>7,020</u>	<u>0</u>	<u>N/A</u>	<u>15,714</u>
Total 89	6,456	21,391	19,732	0	6,719	54,298
90-1st	<u>2,091</u>	<u>6,184</u>	<u>3,604</u>	<u>0</u>	<u>N/A</u>	<u>11,879</u>
90 YTD	2,091	6,184	3,604	0	0	11,879

*Complete figures for 1987 are available only for the third and fourth quarters.

Chart 5A: Patients Received in Training Facilities (by Fiscal Year)

This chart shows the number of patients received each quarter at the various Freedom Medicine Training Facilities. The Afghan field clinics mentioned are training clinics, such as the clinic in Jalalabad.

The figures are grouped by fiscal year and do not include patients received in clinics of graduated paramedics.

Quarter	Training Hospital	Training Clinic	Refresher Clinic	Field Clin./Pak.	Field Clin./Afgh.	Total
88-1st	271	3,276	2,360	4,625	419	10,951
88-2nd	271	2,726	2,961	310	7,786	14,054
88-3rd	351	3,154	4,077	1,960	7,260	16,802
88-4th	<u>593</u>	<u>3,953</u>	<u>4,944</u>	<u>750</u>	<u>4,800</u>	<u>15,040</u>
FY88	1,486	13,109	14,342	7,645	20,265	56,847
89-1st	906	4,457	4,521	1,756	2,103	13,743
89-2nd	1,043	5,829	3,085	0	5,260	15,217
89-3rd	1,258	4,734	3,321	0	4,682	13,995
89-4th	<u>1,570</u>	<u>4,275</u>	<u>3,771</u>	<u>0</u>	<u>2,037</u>	<u>11,653</u>
FY89	4,777	19,295	14,698	1,756	14,082	54,608
90-1st	1,835	5,481	5,620	0	N/A	12,936
90-2nd	1,793	6,901	7,020	0	N/A	15,714
90-3rd	<u>2,091</u>	<u>6,184</u>	<u>3,604</u>	<u>0</u>	<u>N/A</u>	<u>11,879</u>
FY90	5,719	18,566	16,244	0	0	40,529

Chart 6: Medicine Transported into Afghanistan (by Calendar Year)

This chart shows the number of kilograms of medicine transported into Afghanistan by Freedom Medicine paramedics. The data are grouped by calendar year.

<u>Quarter</u>	<u>Kilograms</u>	<u>Percent Increase Over Preceding Year:</u>
7/86--9/86	3,640	
10/86--12/86	<u>0</u>	
1986 Total	3,640	N/A
1/87--3/87	3,080	
4/87--6/87	900	
7/87--9/87	6,140	
10/87--12/87	<u>540</u>	
1987 Total	10,660	192%
1/88--3/88	1,886	
4/88--6/88	6,327	
7/88--9/88	10,761	
10/88--12/88	<u>7,056</u>	
1988 Total	26,030	144%
1/89--3/89	6,532	
4/89--6/89	11,074	
7/89--9/89	13,182	
10/89--12/89	<u>11,605</u>	
1989 Total	42,393	63%
1/90--3/90	<u>5,730</u>	
1990 Total	5,730	
Grand Total:	88,453	

Chart 6A: Medicine Transported into Afghanistan (by Fiscal Year)

This chart shows the number of kilograms of medicine transported into Afghanistan by Freedom Medicine paramedics. The data are grouped by fiscal year.

<u>Quarter</u>	<u>Kilograms</u>	<u>Percent Increase Over Preceding Year</u>
7/86--9/86	3,640	
10/86--12/86	0	
1/87--3/87	3,080	
4/87--6/87	<u>900</u>	
FY87 Total:	7,620	N/A
7/87--9/87	6,140	
10/87--12/87	540	
1/88--3/88	1,886	
4/88--6/88	<u>6,327</u>	
FY88 Total	14,893	157%
7/88--9/88	10,761	
10/88--12/88	7,056	
1/89--3/89	6,532	
4/89--6/89	<u>11,074</u>	
FY89 Total	35,423	137%
7/89--9/89	13,182	
10/89--12/89	11,605	
1/90--3/90	<u>5,730</u>	
FY90 YTD	30,517	
Grand Total:	88,453	

Chart 7: Equipment Transported into Afghanistan

The following equipment was distributed to paramedics working inside Afghanistan:

Item	Quantity
Autoclave	1
ENT (Ear, Nose & Throat) Set	---
Generator	2
Otoscope	---
Sphygnomanometer (BP Cuff)	---
Torch	---
Water Pump	2
Logistics Items*	22

*"Logistics Items" includes clothing, sleeping bags, backpacks, etc.

FREEDOM MEDICINE QUARTERLY REPORT - MARCH 31, 1990

Grant Category	Current Year Grant Budget (7/89 - 6/90)	Expenditures for Quarter (7/89 - 9/89)	Expenditures for Quarter (10/89 - 12/89)	Total Expenditures through 12/89	Balance of Grant Funds Remaining @ 1/1/90
I. PAKISTAN PROGRAM COSTS:					
Personnel - Expatriate Salaries:	\$202,000	\$45,744	\$45,909	\$91,653	\$110,347
Personnel - Afghan Salaries:	\$200,000	\$37,159	\$63,052	\$100,211	\$99,789
Travel & Transportation	\$50,000	\$15,571	\$7,783	\$23,354	\$26,646
Vehicle, Gas, Oil, Lubricants	\$28,000	\$6,035	\$10,077	\$16,112	\$11,888
Vehicle Repairs & Maintenance	\$18,000	\$3,936	\$5,646	\$9,582	\$8,418
Vehicle Registration & Insurance	\$12,000	\$3,148	\$848	\$3,996	\$8,004
Training Center Medicines	\$50,000	\$9,960	\$15,847	\$25,807	\$24,193
Teaching Supplies	\$6,000	\$1,609	\$1,116	\$2,725	\$3,275
Rent	\$42,000	\$9,572	\$352	\$9,924	\$32,076
Utilities (electric, gas water)	\$16,000	\$5,020	\$2,806	\$7,826	\$8,174
Kerosene, Wood, Gas, Diesel	\$14,000	\$2,404	\$3,812	\$6,216	\$7,784
Telephone, Telex, Fax	\$18,000	\$6,327	\$1,515	\$7,842	\$10,158
Office and Computer Supplies	\$12,000	\$2,095	\$4,176	\$6,271	\$5,729
Maintenance & Repair	\$12,000	\$2,900	\$3,830	\$6,730	\$5,270
Postage, Express Mail	\$1,360	\$293	\$114	\$407	\$953
Photos, Videos	\$0				
Furniture & Minor Equipment	\$3,000	(\$1,586)	\$3,880	\$2,294	\$706
Computer & Copy Equipment	\$15,000	\$0	\$0	\$0	\$15,000
Food & Household Supplies	\$60,000	\$12,270	\$18,018	\$30,288	\$29,712
Afghan Employee Medical Expenses	\$6,000	\$625	\$2,518	\$3,143	\$2,857
Miscellaneous Administrative Expenses	\$0				
Subtotal Pakistan Program Costs	\$765,360	\$163,082	\$191,299	\$354,381	\$410,979
II. AFGHANISTAN PROGRAM COSTS:					
Personnel - Salaries	\$120,000	\$15,070	\$10,453	\$25,523	\$94,477
Clinic Transport in Afghanistan	\$0	\$0	\$31,106	\$31,106	(\$31,106)
Clinic Transport in Pakistan	\$60,000	\$20,663	(\$11,474)	\$9,189	\$50,811
Packing & Miscellaneous Transport	\$25,000	\$740	\$115	\$855	\$24,145
Medicines & Supplies	\$0	\$110,841	\$18,069	\$128,910	(\$128,910)
Monthly Afghan Clinic Expenses	\$213,040	\$24,420	\$38,676	\$63,096	\$149,944
Subtotal: Afghan Program Costs:	\$418,040	\$171,734	\$86,945	\$258,679	\$159,361

FREEDOM MEDICINE QUARTERLY REPORT - MARCH 31, 1990

Grant Category	Current Year Grant Budget (7/89 - 6/90)	Expenditures for Quarter (7/89 - 9/89)	Expenditures for Quarter (10/89 - 12/89)	Total Expenditures through 12/89	Balance of Grant Funds Remaining @ 1/1/90
III. TRANSITION COSTS:					
Personnel - Salaries	\$53,000	\$3,450	\$9,638	\$13,088	\$39,912
Consultants	\$20,000	\$3,333	\$6,710	\$10,043	\$9,957
Travel	\$4,400	\$2,030	\$0	\$2,030	\$2,370
Office Supplies	\$0	\$0	\$655	\$655	(\$655)
Clerical Support	\$5,900	\$253	\$2,604	\$2,857	\$3,043
Subtotal: Transition Costs:	\$83,300	\$9,066	\$19,607	\$28,673	\$54,627
IV. DIRECT CORPORATE ADMIN. EXPENSES:					
Personnel - Salaries	\$80,000	\$37,745	\$22,818	\$60,563	\$19,437
Travel & Transportation	\$5,100	\$0	\$0	\$0	\$5,100
Rent & Utilities	\$15,000	\$4,000	\$4,494	\$8,494	\$6,506
Telephone, Telex, Fax	\$15,000	\$2,661	\$2,181	\$4,842	\$10,158
Office and Computer Supplies	\$6,000	\$1,768	\$3,029	\$4,797	\$1,203
Postage, Express Mail	\$7,200	\$927	\$1,794	\$2,721	\$4,479
Photos, Video & Public Relations	\$0	\$0	\$0	\$0	\$0
Furniture & Equipment	\$5,000	\$6,738	\$346	\$7,084	(\$2,084)
Dues Seminars & Continuing Education	\$0	\$0	\$0	\$0	\$0
Subtotal: Corporate Expenses:	\$133,300	\$53,839	\$34,662	\$88,501	\$44,799
IV. TOTAL GRANT BUDGET	\$1,400,000	\$397,721	\$332,513	\$730,234	\$669,766

FREEDOM MEDICINE QUARTERLY REPORT - MARCH 31, 1990

Grant Category	Actual Expenditures (1/90 - 3/90)	Estimated Expenditures (4/90 - 6/90)	Total Estim. Expenditures (1/90 - 6/90)	Grant Total Actual Plus Estimates (7/89 - 6/90)	Estimated Expenditures in Excess of Current Grant (7/89 - 6/90)
I. PAKISTAN PROGRAM COSTS:					
Personnel - Expatriate Salaries:	\$59,689	\$60,990	\$120,679	\$212,332	(\$10,332)
Personnel - Afghan Salaries:	\$50,923	\$53,499	\$104,422	\$204,633	(\$4,633)
Travel & Transportation	\$4,183	\$16,050	\$20,233	\$43,587	\$6,413
Vehicle, Gas, Oil, Lubricants	(\$6,507)	\$9,630	\$3,123	\$19,235	\$8,765
Vehicle Repairs & Maintenance	\$17,224	\$6,420	\$23,644	\$33,226	(\$15,226)
Vehicle Registration & Insurance	\$6,572	\$4,815	\$11,387	\$15,383	(\$3,383)
Training Center Medicines	\$46,654	\$14,505	\$61,159	\$86,966	(\$36,966)
Teaching Supplies	\$1,273	\$1,605	\$2,878	\$5,603	\$397
Rent	\$974	\$10,701	\$11,675	\$21,599	\$20,401
Utilities (electric, gas water)	\$1,338	\$6,420	\$7,758	\$15,584	\$416
Kerosene, Wood, Gas, Diesel	\$6,741	\$4,281	\$11,022	\$17,238	(\$3,238)
Telephone, Telex, Fax	\$2,987	\$6,420	\$9,407	\$17,249	\$751
Office and Computer Supplies	\$7,061	\$3,744	\$10,805	\$17,076	(\$5,076)
Maintenance & Repair	\$4,043	\$4,815	\$8,858	\$15,588	(\$3,588)
Postage, Express Mail	\$73	\$1,071	\$1,144	\$1,551	(\$191)
Photos, Videos	\$0	\$0	\$0	\$0	\$0
Furniture & Minor Equipment	\$17,203	\$1,071	18274	\$20,568	(\$17,568)
Computer & Copy Equipment	\$12,879	\$3,210	\$16,089	\$16,089	(\$1,089)
Food & Household Supplies	\$16,571	\$17,655	\$34,226	\$64,514	(\$4,514)
Afghan Employee Medical Expenses	(\$909)	\$2,139	\$1,230	\$4,373	\$1,627
Miscellaneous Administrative Expenses	\$0	\$0	\$0	\$0	\$0
Subtotal Pakistan Program Costs	\$248,972	\$229,041	\$478,013	\$832,394	(\$67,034)
II. AFGHANISTAN PROGRAM COSTS:					
Personnel - Salaries	\$9,941	\$15,819	\$25,760	\$51,283	\$68,717
Clinic Transport in Afghanistan	\$440	\$0	\$440	\$31,546	(\$31,546)
Clinic Transport In Pakistan	\$5,949	\$12,840	\$18,789	\$27,978	\$32,022
Packing & Miscellaneous Transport	\$249	\$4,131	\$4,380	\$5,235	\$19,765
Medicines & Supplies	(\$2,321)	\$0	(\$2,321)	\$126,589	(\$126,589)
Monthly Afghan Clinic Expenses	\$10,131	\$53,499	\$63,630	\$126,726	\$86,314
Subtotal: Afghan Program Costs:	\$24,389	\$86,289	\$110,678	\$369,357	\$48,683

FREEDOM MEDICINE QUARTERLY REPORT - MARCH 31, 1990

Grant Category	Actual Expenditures (1/90 - 3/90)	Estimated Expenditures (4/90 - 6/90)	Total Estim. Expenditures (1/90 - 6/90)	Grant Total Actual Plus Estimates (7/89 - 6/90)	Estimated Expenditures in Excess of Current Grant (7/89 - 6/90)
III. TRANSITION COSTS:					
Personnel - Salaries	\$5,525	\$18,457	\$23,982	\$37,070	\$15,930
Consultants	\$3,894	\$7,224	\$11,118	\$21,161	(\$1,161)
Travel	(\$38)	\$2,382	\$2,344	\$4,374	\$26
Office Supplies	\$2,990	\$0	\$2,990	\$3,645	(\$3,645)
Clerical Support	(\$508)	\$2,355	\$1,847	\$4,704	\$1,196
Subtotal: Transition Costs:	\$11,863	\$30,418	\$42,281	\$70,954	\$12,346
IV. DIRECT CORPORATE ADMIN. EXPENSES:					
Personnel - Salaries	\$21,164	\$26,751	\$47,915	\$108,478	(\$10,332)
Travel & Transportation	\$409	\$0	\$409	\$409	\$4,691
Rent & Utilities	\$2,241	\$4,815	\$7,056	\$15,550	(\$550)
Telephone, Telex, Fax	\$2,525	\$2,676	\$5,201	\$10,043	\$4,957
Office and Computer Supplies	\$1,394	\$1,284	\$2,678	\$7,475	(\$1,475)
Postage, Express Mail	\$999	\$1,284	\$2,283	\$5,004	\$2,196
Photos, Video & Public Relations	\$0	\$0	\$0	\$0	\$0
Furniture & Equipment	(\$1,531)	\$0	(\$1,531)	\$5,553	(\$553)
Dues Seminars & Continuing Education	\$0	\$0	\$0	\$0	\$0
Subtotal: Corporate Expenses:	\$27,201	\$36,810	\$64,011	\$152,512	(\$19,212)
IV. TOTAL GRANT BUDGET	\$312,425	\$382,558	\$694,983	\$1,425,217	(\$25,217)

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Freedom Medicine

Quarterly Report
October 1 - December 31, 1989

Submitted by:

Robert H. Brenner
Project Director

Summary of Progress

Freedom Medicine experienced continuity as well as significant changes during the second quarter of FY90. Candidates for the Advanced Training Program were selected and scheduled to begin their training in January 1990. The entrance examination was held at the Ministry of Public Health's (MOPH) Training Institute on December 10, 1989. Ninety-eight (98) applicants took the exam and sixteen (16) candidates were selected jointly by Freedom Medicine and the Ministry to participate in the three-month course. The curriculum was completed and implemented into the training component of the program. To this end, the FM training staff initiated a Trainer of Trainers (TOT) workshop, whereby the trainers were taught non-formal educational techniques and training skills in two-hour sessions three times per week for one month. The competency-based teaching approach aimed to standardize the teaching methods used for the advanced curriculum. The curriculum and the TOT will be updated and revised throughout the course of the program.

Freedom Medicine's activities at the Chitral facility have also been productive. The first phase of the Maternal and Child Health (MCH) Care Project was completed; six women were trained in three (3) two-hour sessions per week for one month. The participants learned how to deal with the problems of tetanus, postpartum hemorrhage and diarrhea/dehydration - the three major killers of women and children. Further, in response to an ammunition explosion in Garem Chashma, Freedom Medicine initiated an air-evacuation for the critically wounded. Freedom Medicine was the only health care provider on the scene during the evacuation of the Chitral and Garem Chashma facilities.

A monitoring mission was conducted in five provinces in Afghanistan: Ghazni, Logar, Paktia, Paktika and Wardak. The objective of the mission was to verify the presence of Freedom Medicine paramedics and their clinics and to evaluate the conditions in which they work. The monitoring team assessed thirty (30) clinics by completing questionnaires, conducting interviews, and taking photographs of the clinics visited. The overall assessment of the paramedics was very good; the monitoring team, patients and villagers reported the medics to be hard-working and respected in the communities in which they work. A monitoring report has been completed and distributed to the agencies in the FVO community.

The management evaluation of the Special Projects office was also completed. The assessment resulted in the implementation of several measures to tighten financial control and accountability. New forms and policies and procedures were standardized and used in the in-house management training workshop. The policies will also serve as a training tool during the transition of the Special Projects department to the MOPH.

Finally, Freedom Medicine continued to make progress with the transition of Freedom Medicine's Afghanistan Project into the Ministry of Public Health for the Afghan Interim Government. Plans for the programmatic transfer of activities were prioritized and initiated. Both transition teams concentrated on clinic consolidation and the logistics of incorporating Freedom Medicine's paramedics and facilities into the operations of the Ministry.

Component #1

Training Programs

1. Completed Projects Activities:

a.) Advanced Training Program Activities

The first advanced class is scheduled to begin in January, 1990. Members of the Ministry of Public Health (MOPH) Transition Team participated in the curriculum development, while their counterparts in the Training Institute assisted with the screening and selection process. The entrance examination was held at the Ministry's Training Institute on December 10th; ninety-eight (98) applicants took the exam and sixteen (16) candidates were selected jointly by Freedom Medicine and the MOPH to take the course.

b.) Curriculum Changes

Work continued this quarter on the advanced curriculum. The bulk of the course materials and examinations have been completed; minor revisions will be made once the first class is underway.

The primary focus during the quarter has been on the "Training of Trainers" (TOT) component, whereby the training staff participated in a workshop held in three two-hour sessions per week for one month at the Thal facility. The objective of the TOT program was to standardize the trainers' teaching methods through non-formal educational training techniques. In doing so, the trainers were also taught how to evaluate the students' competency in practical and theoretical subject matter.

c.) Field Training Clinics Operated:

Freedom Medicine did not operate any field training clinics in Afghanistan during this quarter.

d.) Refresher Training:

Forty-four (44) medics received refresher training at the Thal facility between October 1st and December 31st.

e.) Patients Treated:

15,714 patients were seen at the Freedom Medicine training facilities during the quarter. Please refer to Chart 5 for detailed information.

f.) Interagency Training Programs:

Freedom Medicine responded to a request from Operation Salam, the United Nations Demining Contingent, to assist the Contingent in more effectively

reaching the refugee population with its mine-awareness educational program. Freedom Medicine obtained detailed information which allowed the Contingent to target refugees who had not previously been included in the mine-awareness training programs. Further, Freedom Medicine served as a liaison between the Operation Salam staff and the Afghan Interim Government's ministry of Health. It is hoped that the Ministry will identify individuals who can benefit from Operation Salam's training program.

g.) Maternal and Child Health

The Maternal and Child Health Project at the Chitral facility began during the month of November. Six women were trained in three two-hour sessions each week for one month. The students attended all sessions, showed animated interest and participated well. The women's newly-acquired knowledge of preventive health practices will undoubtedly benefit others more numerous than themselves and will contribute to a decrease in infant mortality and maternal mortality both among the refugee population and within their communities after repatriation.

2. Unanticipated Activities:

a.) Advanced Training Program Activities:

No unanticipated activities.

b.) Curriculum Changes:

No unanticipated activities.

c.) Field Training Clinics:

No unanticipated activities

d.) Refresher Training:

No unanticipated activities

e.) Patients Treated:

No unanticipated activities

f.) Interagency Training Programs:

See section (1) (f).

g.) Maternal and Child Health

No unanticipated activities

3. Incomplete or Unsuccessful Activities, Constraints Identified, Solutions Proposed:

a.) Advanced Training Program Activities:

No incomplete or unsuccessful activities.

b.) Curriculum Changes:

Freedom Medicine encountered some difficulty in having the curriculum translated in a timely manner. However, the MOPH was instrumental in identifying physicians who assisted with this task. The Ministry's efforts insured that the progress of the curriculum development was not delayed for an inordinate period of time.

c.) Field Training Clinics:

No incomplete or unsuccessful activities.

d.) Refresher Training:

No incomplete or unsuccessful activities.

e.) Patients Treated:

No incomplete or unsuccessful activities.

f.) Interagency Training Programs:

No incomplete or unsuccessful activities.

g.) Maternal and Child Health:

No incomplete or unsuccessful activities.

4. Workplan for Next Quarter

a.) Advanced Training Program

The first class of advanced paramedics is scheduled to begin in January, 1990. Personnel from the Ministry of Health Training Institute will participate in the didactic phase of the course. One member of the Ministry's transition team is scheduled to teach the clinic management component, while two others have been identified to undergo the "Training of Trainers" course prior to being incorporated into the advanced program. Freedom Medicine is also considering how best to assist the Ministry in developing a one-year training program for healthcare providers.

b.) Curriculum Changes:

It is anticipated that minor changes will be made in the curriculum during the course of the first session. These will not be substantive changes, but will merely consist of modifications resulting from feedback from trainers, students and curriculum developers as the course progresses.

c.) Field Training Clinics:

The first advanced training course will continue to be conducted through the first week of April, 1990. FM and MOPH physicians will participate in the training component. FM trainers will also update and revise the curriculum during the course and oversee the administration of the program.

d.) Refresher Training

Freedom Medicine will continue to work with the Ministry of Public Health's transition team to determine how best to incorporate routine refresher training for returning paramedics (not to be confused with advanced paramedic training) into the Ministry's structure. Ultimately, a site will be identified inside Afghanistan, where resupply, debriefing and refresher training can be conducted. In the interim, however, Freedom Medicine will turn those responsibilities over to the MOPH officers in Peshawar on a province by province basis.

e.) Patients Treated:

It is estimated that 16,000 patients will be treated at Freedom Medicine's Pakistan training facilities during January -- March 1990.

f.) Interagency Training Programs:

Freedom Medicine will continue to assist personnel from the United Nations Demining Project in conducting mine awareness workshops for personnel identified by the Afghan Interim Government as requested by representatives from Operation Salam.

g.) Maternal and Child Health:

A second pilot project of the MCH Health Education Initiative will be conducted for the women in the Chitral valley. The curriculum developer and trainer and assistant trainer/translator will conduct the training sessions three times per week. Revisions to the training curriculum will be made as the teaching continues. The objective of the program is to improve the capability of Afghan women to deal with the problems of tetanus, postpartum hemorrhage and diarrhea/dehydration -- the three major killers of women and children.

Component #2

Medical Facilities Inside Afghanistan

1.) Completed Project Activities and Verification Status

a.) New Medical Facilities:

No new medical facilities were established inside Afghanistan during the second quarter of FY90, although eight clinics were consolidated into the existing facilities.

b.) Medical Equipment and Supplies:

Forty-two (42) medics were resupplied in Pakistan during this quarter, bringing 11,605 kilos of medicine back to their clinics in Afghanistan.

Chart 6 provides a graphic representation of the foregoing.

Finally, forty-four (44) paramedics who returned for resupply were provided with generators, water pumps, autoclaves, clothing and/or medical equipment, as is illustrated in Chart 7.

c.) Patients Treated:

Freedom Medicine estimates that approximately 250,000 patients were treated at Freedom Medicine's facilities inside Afghanistan during the quarter*. This projection is based on clinic records presented by paramedics who have returned from Afghanistan for debriefing and resupply, as well as information provided by the monitors who surveyed clinics in five provinces during October and November, 1989.

* This statistic is nearly three times greater than the figures previously reported. The change is based on approximately 25 patients per day per clinic, and more accurately depicts the actual number of patients seen per year.

2. Unanticipated Activities:

a.) New Medical Facilities:

No unanticipated activities.

b.) Medical Supplies and Equipment:

No unanticipated activities.

c.) Patients Treated:

On November 15, 1989 a Jamiat ammunition dump at Garem Chashma exploded, killing approximately forty (40) and critically wounding several others. Over the course of the next two days, Freedom Medicine, with the International Committee of the Red Cross (ICRC), initiated an air-evacuation of eight individuals suffering from shrapnel wounds and chest trauma injuries. The injured persons were transported from the FM Chitral clinic site to Peshawar via ICRC helicopter. At the request of the the Pakistani police, FM sent an ambulance with two (2) American nurses and one (1) Afghan medical physician to manage the field triage at the scene of the accident. Freedom Medicine was the only health care provider on the scene during the evacuation of the Chitral and Garem Chashma facilities.

On December 3, 1989, Freedom Medicine responded to an International Rescue Committee (IRC) request by dispatching an ambulance to an IRC facility in Peshawar to transport a head-injured patient to Islamabad for specialized treatment.

d.) Special Initiatives: (New Section)

Freedom Medicine supported the efforts of the Jamiat-I-Islami party to return wounded mujahideen to their homes in Afghanistan during the second quarter of FY90. Approximately 700 wounded had been brought to Peshawar for treatment of war-related injuries and illnesses. Freedom Medicine provided transportation and incidental expenses for sixty-five (65) men to return to Afghanistan during the months of November and December 1989.

3. Unsuccessful/Incomplete Activities, Constraints Identified, Solutions Proposed:

a.) New Medical Facilities:

No incomplete/unsuccessful activities.

b.) Medical Supplies and Equipment:

No incomplete/unsuccessful activities.

c.) Patients Treated:

No incomplete/unsuccessful activities.

d.) Special Initiatives (New Section):
No incomplete/unsuccessful activities.

4. Workplan for Next Quarter:

a.) New Medical Facilities:

No new Freedom Medicine facilities are planned for inside Afghanistan during the following quarter.

b.) Medical Supplies and Equipment:

Freedom Medicine expects to provide equipment to paramedics who return next quarter in the same proportion as was provided this quarter.

c.) Patients Treated:

Freedom Medicine estimates that 260,000 patient visits will be recorded at the clinics inside Afghanistan during the upcoming quarter.

d.) Special Initiatives: (New Section)

Freedom Medicine will continue its efforts to return Mujahideen to their homes in Afghanistan once they have been medically cleared by Peshawar physicians.

Component #3

Data Collection and Monitoring

1. Projects Completed and Verification Status:

a.) Monitoring Trips:

One monitoring mission was conducted during the second quarter of FY90. On October 18, 1989, a three-man team left Peshawar to visit clinics in five provinces in Afghanistan: Wardak, Logar, Ghazni, Paktia and Pakteka. The objective of the mission was to verify the presence of FM paramedics and their clinics and to evaluate the conditions in which they work. Of the sixty (60) clinics planned to be visited, thirty (30) clinics were evaluated, with questionnaires and photographs accompanying the monitors' report. The overall assessment of the paramedics was very good; the medics were described as dedicated workers by the monitors, patients and local villagers. In several clinics, structural improvements are needed. The monitoring mission summary report has been completed and distributed to the PVO community.

b.) Verifications:

The Special Projects office reviewed a monitoring report from the Ministry team which surveyed Wardak Province in September 1989. This data was compared to the Freedom Medicine team report to determine the degree of consistency in assessment and whether any overlap occurred between the two missions.

Results:

The MOPH report focused on all clinics and hospitals in Wardak province and the services and activities they provide. Although there was no description of the FM clinics, the MOPH report verified the presence of six FM clinics in the area they surveyed. This figure accurately reflects the number represented in the FM statistics. Also, the description of the clinics buildings was similar to the comments made by the FM monitors; many of the clinics building are in

need of repair and structural improvements. The information provided by the MOPH will complement the FM data on clinic locations in Wardak province and will be useful in the efforts to consolidate clinics in the region and improve the quality of healthcare provided by the PVO community.

Freedom Medicine also completed its first report of clinic activities for the Shura-I-Nezar model clinic program initiated by FM in September 1989. The report indicated that 34,814 outpatients were seen between March and October, 1989. In addition, 426 patients were admitted to the hospital and 130 operations were performed.

c.) Monitor Selection and Training:

The individuals who served as monitors during the October/November mission have returned to their regular posts with Freedom Medicine and will be available for future missions if the need arises.

d.) Paramedic Debriefing:

Forty-four (44) medics were debriefed during the first quarter of FY 1990, in comparison with forty-three (43) paramedics debriefed during the last quarter.

e.) Database Development:

Freedom Medicine began compiling greenbook data in a revised format during this quarter, focusing primarily on age and sex categorizations. In response to a request by a USAID evaluation team, statistics were also generated pertaining to cost analysis of various aspects of the Freedom Medicine training program and transition process.

2.) Unanticipated Activities:

a.) Monitoring Trips:

No unanticipated activities.

b.) Verifications:

No unanticipated activities

c.) Monitor Selection and Training:

No unanticipated activities.

d.) Paramedic Debriefing:

No unanticipated activities.

e.) Database Development:

No unanticipated activities.

3. Incomplete or Unsuccessful Activities, Constraints Identified, Solutions Proposed:

a.) Monitoring Trips:

Due to security problems in Paktia, Ghanzi and Lugal, poor road conditions and vehicle problems, the monitoring team was unable to visit all of the sixty (60) clinics which had been targeted. Nonetheless, the team was able to visit thirty (30) clinics and provide a substantial amount of information which has been summarized into a mission report.

b.) Verifications:

The monitors also noted the paramedics who were absent from their clinics and the reason for their absence. The SP Director will use this list as a reference check when the paramedics return for debriefing.

c.) Monitor Selection and Training:

No incomplete or unsuccessful activities.

d.) Paramedic Debriefing:

No incomplete or unsuccessful activities.

e.) Database Development:

No incomplete or unsuccessful activities.

4. Workplan for Next Quarter

a.) Monitoring Trips:

The possibility of additional monitoring missions in the third quarter depends upon the weather conditions in Afghanistan. The report compiled from the October/November mission will serve as a basis for clinic-consolidation decision-making. These decisions will be made in tandem with the MOPH Public Services department.

b.) Verification:

Freedom Medicine will continue to work with the MOPH to verify the existence and operation of its clinics in regions where the Ministry is actively monitoring.

c.) Monitor Selection and Training:

Freedom Medicine will coordinate with MOPH regarding the preparation and

logistics of monitoring missions. Freedom Medicine has offered its mission questionnaire to the MOPH and will train MOPH representatives on all issues of monitoring missions.

d.) Debriefing of Paramedics:

Freedom Medicine plans to debrief forty-five (45) paramedics during the upcoming quarter. In anticipation of the inclement weather and inability to transport medicines during the winter months, Freedom Medicine resupplied its Northern-based medics with one year's worth of medicines. This action may have an impact on the frequency with which medics return for debriefing.

e.) Database Development:

Freedom Medicine will continue to expand the Paramedic Database, incorporating information pertaining to resupply, equipment issued to each clinic, etc. In addition, efforts are underway to incorporate a financial component so that cost analyses of project components can be readily produced.

Component #4

Transition to the Ministry of Health

1. Completed Project Activities:

a.) Administrative Transition:

-Finance: The finance department continued to update and revise personnel and financial forms as well as the financial software systems. These developments will be instrumental in transitioning Freedom Medicine's administrative component to the MOPH.

- Special Projects: A management evaluation of the Special Projects office was completed. The assessment resulted in the implementation of several measures to tighten financial control and accountability within the department. In addition, the filing system was altered to allow greater accessibility to paramedic and clinic information.

-Thal Facility: Enhanced quality assurance efforts were initiated at the Thal facility with the introduction of morbidity and mortality rounds. It is anticipated that an ongoing review of clinical cases will strengthen the peer review process and contribute to a higher level of patient care. In addition, preliminary interviews for a management evaluation (similar to the one performed in the Special Projects office) were conducted at the hospital and clinic.

-Management Training: The first of a series of management training sessions designed to upgrade the office skills of Freedom Medicine's Afghan staff was held in November. The class focused on memo-writing and the proper form for documenting business expenses. Six (6) staff members from the Peshawar office attended this seminar.

b.) Interaction with the Ministry of Public Health:

During the second quarter, Dr. Ferozadin Amani was named as the third member of the Ministry's Transition Team. Dr. Feroz works in the Public

Services division, which has responsibility for all clinics which the Ministry operates inside Afghanistan. His input and expertise have proven valuable as Freedom Medicine prepares to consolidate its operations with other sites which have been established by the MOPH.

Freedom Medicine provided technical and editorial assistance to the Ministry in the outreach efforts which it directed at the PVO community. In early November, the Ministry sent an informational letter to the Peshawar-based PVOs and received numerous letters of support in response. A second letter was drafted at the end of December for distribution in early January.

Finally, much progress was made in involving members of the Ministry (other than those on the Transition Team) into planning, developing and implementing the Advanced Training Program. For more detailed information, please refer to the following section.

c.) Medical Training Program Transition: (New Section)

The Transition Teams discussed several scenarios through which the Ministry of Public Health could assimilate the Freedom Medicine training program into its structure. As the conversations proceeded, it became clear that more active participation by each side's training personnel was critical to a smooth and orderly programmatic transfer. To this end, representatives of the MOPH's Training Institute were invited to Thal to meet their counterparts at Freedom Medicine and to attend a presentation describing the status of the advanced curriculum.

The meeting and presentation were held on November 9, 1989. The Ministry staff was favorably impressed with the Thal complex, commenting that it was more extensively developed than they had realized. The proposed advanced training model was well-received. Subsequently, Dr. Fatemi, Director of the Ministry's Training Institute, identified two MOPH physicians who collaborated with Freedom Medicine's training staff in the student selection process and who will undergo the Training of Trainers (TOT) workshop to prepare for teaching the advanced program. By gaining experience in the operations of the advanced program, the Ministry representatives will be better prepared to participate in the programmatic transfer.

Finally, Dr. Fatemi offered the use of the Training Institute as a site to administer Freedom Medicine's Advanced Program entrance examination and provide support staff to assist in proctoring the exam.

2. Unanticipated Activities

a.) Administrative Transition:

No unanticipated activities.

b.) Interaction with the Ministry of Public Health:

In December, 1989, Dr. Dost Mohammad left Pakistan to pursue studies in the United States. His contributions to the transition process were significant. Freedom Medicine is optimistic that the Ministry's new appointee, Dr. Sediqui, Director of Curative Medicine, will make many positive contributions as well.

c.) Medical Training Program Transition:

No unanticipated activities.

3. Incomplete or Unsuccessful Activities, Constraints Identified, Solutions Proposed

a.) Administrative Transition:

No unsuccessful activities.

b.) Interactions with the Ministry of Public Health:

No unsuccessful activities.

c.) Medical Training Program Transition:

No unsuccessful activities.

4. Workplan for Next Quarter

a. Administrative Transition:

- Finance: New and revised forms and computer systems will continue to be updated. The administrative policies and procedures will be finalized and prepared for the training component of the administrative transition to the MOPH.

- Special Projects: Training sessions will be held to fully orient the Special Projects staff on the department's policies and procedures. The paramedic database will be updated and reorganized to better facilitate the clinic consolidation process. Among the new elements will be data obtained through the monitoring missions by Freedom Medicine, the Afghan Interim Government (AIG) and other voluntary organizations.

- Thal facility: The management evaluation will be completed, as will revisions in job descriptions and policies and procedures specific to the functioning of

the activities of the hospital and clinic. It is anticipated that changes emanating from the report will contribute to a more smoothly-operating and high quality facility.

- Management Training: Management training sessions for the Afghan staff will continue both in Peshawar and Thal. Topics for future sessions include management information systems, record-keeping, interoffice communications, memo and letter-writing, etc.

b.) Interaction with the Ministry of Public Health:

The primary focus during the upcoming quarter will be on planning the consolidation of clinics and for gradually shifting responsibility for clinics on a province-by-province basis from Freedom Medicine's control to that of the Ministry of Public Health. In addition, Freedom Medicine will continue to provide the Ministry with technical assistance in its outreach and public relations efforts.

c.) Medical Training Program Transition:

The Medical Coordinator will continue to meet weekly with Dr. Fatimi, the Director of Training /MOPH, and Dr. Ismatullah, to design and develop an advanced mid-level training program. Topics to be covered include: competency-based curriculum design, supervision plans, preparation of Training for Trainers (TOT), and program administration. A one-day workshop is also planned, which will discuss all issues relevant to primary health care in Afghanistan and the roles of mid-level health workers for primary health care in Afghanistan.

(Charts 1-4 discuss student progress through training programs. Since there were no paramedic training courses implemented this quarter, these charts have been omitted.)

Chart 5: Patients Received in Training Facilities (by Calendar Year)

This chart shows the number of patients received each quarter at the various Freedom Medicine training facilities. The Afghan field clinics mentioned are training clinics, such as the recently closed site in Jalalabad. The figures are grouped by calendar year and do not include patients received in clinics of graduated paramedics.

Quarter	Training Hospital	Training Clinic	Refresher Clinic	Field Train. Clinics/Pak.	Field Train. Clinics/Afgh.	Total
87-3rd	271	3,276	2,360	4,625	419	10,951
87-4th	271	2,726	2,961	310	7,786	14,054
Total 87*	542	6,002	5,321	4,935	8,205	25,005
88-1st	351	3,154	4,077	1,960	7,260	16,802
88-2nd	593	3,953	4,944	750	4,800	15,040
88-3rd	906	4,457	4,521	1,756	2,103	13,743
88-4th	1,043	5,829	3,085	0	5,260	15,217
Total 88	2,893	17,393	16,627	4,466	19,423	60,802
89-1st	1,258	†4,734	3,321	0	4,682	13,995
89-2nd	1,570	†4,275	3,771	0	2,037	11,653
89-3rd	1,835	††5,481	5,620	0	N/A	12,936
89-4th	1,793	†6,901	†7,020	0	N/A	15,714
89 YTD	6,456	21,391	19,732	0	6,719	54,298

*Complete figures for 1987 are available only for the third and fourth quarters.

†Estimate.

††Revision: actual figures substituted for previously-reported estimates.

Chart 5A: Patients Received in Training Facilities (by Fiscal Year)

This chart shows the number of patients received each quarter at the various Freedom Medicine training facilities. The Afghan field clinics mentioned are training clinics, such as the recently closed site in Jalalabad. The figures are grouped by fiscal year and do not include patients received in clinics of graduated paramedics.

<u>Quarter</u>	<u>Training Hospital</u>	<u>Training Clinic</u>	<u>Refresher Clinic</u>	<u>Field Train. Clinics/Pak.</u>	<u>Field Train. Clinics/Afgh.</u>	<u>Total</u>
88-1st	271	3,276	2,360	4,625	419	10,951
88-2nd	271	2,726	2,961	310	7,786	14,054
88-3rd	351	3,154	4,077	1,960	7,260	16,802
<u>88-4th</u>	<u>593</u>	<u>3,953</u>	<u>4,944</u>	<u>750</u>	<u>4,800</u>	<u>15,040</u>
FY 88	1,486	13,109	14,342	7,645	20,265	56,847
89-1st	906	4,457	4,521	1,756	2,103	13,743
89-2nd	1,043	5,829	3,085	0	5,260	15,217
89-3rd	1,258	†4,734	3,321	0	4,682	13,995
<u>89-4th</u>	<u>1,570</u>	<u>†4,275</u>	<u>3,771</u>	<u>0</u>	<u>2,037</u>	<u>11,653</u>
FY 89	4,777	19,295	†4,698	1,756	14,082	54,608
90-1st	1,835	5,481	5,620	0	N/A	12,936
90-2nd	<u>1,793</u>	<u>†6,901</u>	<u>†7,020</u>	<u>0</u>	<u>N/A</u>	<u>15,714</u>
90 YTD	3,628	12,382	12,640	0	N/A	28,650

†Estimate.

††Revision: actual figures substituted for previously-reported estimates.

Chart 6: Medicine Transported into Afghanistan (by Calendar Year)

This chart shows the number of kilograms of medicine transported into Afghanistan by Freedom Medicine paramedics; the data are by calendar year.

<u>Quarter:</u>	<u>Kilograms:</u>	<u>Percent Increase Over Preceding Year:</u>
7/86--9/86:	3,640	
<u>10/86--12/86:</u>	<u>0</u>	
1986 Total:	3,640	N/A
1/87--3/87:	3,080	
4/87--6/87:	900	
7/87--9/87:	6,140	
<u>10/87--12/87:</u>	<u>540</u>	
1987 Total:	10,660	192%
1/88--3/88:	1,885	
4/88--6/88:	6,327	
7/88--9/89:	10,761	
<u>10/88--12/88:</u>	<u>7,056</u>	
1988 Total:	26,030	144%
1/89--3/89:	6,532	
4/89--6/89:	11,074	
7/89--9/89:	13,182	
<u>10/89--12/89:</u>	<u>11,605</u>	
1989 YTD:	42,393	63%
Grand Total:	82,723	

Chart 0A: Medicine transported into Afghanistan (by fiscal year)

This chart shows the number of kilograms of medicine transported into Afghanistan by Freedom Medicine paramedics; the data are by fiscal year.

<u>Quarter:</u>	<u>Kilograms:</u>	<u>Percent Increase Over Preceding Year:</u>
7/86--9/86:	3,640	
10/86--12/86:	0	
1/87--3/87:	3,080	
<u>4/87--6/87:</u>	<u>900</u>	
FY87 Total:	7,620	N/A
7/87--9/87:	6,140	
10/87--12/87:	540	
1/88--3/88:	1,886	
<u>4/88--6/88:</u>	<u>6,327</u>	
FY88 Total:	14,893	157%
7/88--9/89:	10,761	
10/88--12/88:	7,056	
1/89--3/89:	6,532	
<u>4/89--6/89:</u>	<u>11,074</u>	
FY89 Total:	35,423	137%
7/89--9/89:	13,182	
<u>10/89--12/89:</u>	<u>11,605</u>	
FY90 YTD:	24,787	40% (Proj.)
Grand Total:	82,723	

Chart 7: Equipment Transported into Afghanistan

The following equipment was distributed to paramedics working inside Afghanistan:

<u>Item:</u>	<u>Quantity:</u>
Autoclave	18
Clothing (shoes, socks, coat, pants, etc.)	1
ENT (Ear, Nost & Throat) Set	2
Generator	10
Otoscope	1
Sphygmanometer (Blood Pressure Cuff)	2
Torch	2
Water Pump	10
"Logistics" *	32

*Logistics equipment includes sleeping bags, backpack and clothing.

Chart 8: Number of Paramedics by District

This chart shows the number of paramedics working in each district in Afghanistan and the changes in those numbers since last quarter.

Total: 168 No new medics entered Afghanistan during this quarter.

Badakshan	6	Qarabagh	2	Logar	8
Badakshan	1			Baraki	2
Baharak	1	Ghor	2	Moh. Agha	6
Darwaz	1	Lal-wa-			
Faizabad	2	Sarjengal	2	Nangarhar	2
Keshim	1			Chaparhar	1
		Helmand	1	Kama	1
Badghis	2	Baghran	1		
Qades	1			Oruzgan	2
Qala Nau	1	Herat	10	Shahristan	2
		Enjeel	1		
Baghlan	12	Gozarah	3	Pakteka	4
Anderab	1	Gulran	2	Urgoun	4
Khenjan	4	Herat	2		
Khost wa Freng	4	Obey	1	Paktya	11
Nahreim	2	Pasht/Zarghoon	1	Chamkani	2
Puli Khumri	1			Jaji	3
		Jawzjan	2	Jani Khel	1
Balkh	6	Sari Pul	1	Khost	1
Chemtal	1	Sangcharek	1	Mosa Khel	3
Mazar-i-Sharif	3			Sperah	1
Sholgera	12	Kabul	6		
		Charasyab	1	Parwan	6
Bamyan	7	Paghman	1	Charikar	2
Bamyan	2	Shakar Dara	2	Jabal Saraj	1
Shibar	2	Qarabagh	2	Salang	1
Waras	3			Surkh Parsa	1
		Kapisa	18	Tagab	1
Farah	1	Kapisa	1		
Purchaman	1	Kohistan	1	Samangan	2
		Panjshare	14	Khulm	1
Faryab	5	Tagab	2	Samangan	1
Belcheragh	1				
Maymana	1	Konar	2	Takhar	11
Pashtoon Kat	2	Bar Konar	1	Eshkamesh	1
		Konar	1	Farkhar	4
Ghazni	16			Taloqan	6
Adena	1	Kunduz	5		
Ajristan	1	Archi	1	Wardak	18
Deh Yak	1	Khanabad	2	Behsud	3
Ghazni	1	Kunduz	12	Chake Wardak	3
Jaghata	4			Jaghata	4
Jaghori	1	Laghman	3	Jalrez	2
Khwaja Omari	1	Alingar	1	Markaze Behsud	1
Moqor	1	Alishing	2	Meyden Shar	2
Nawor	3			Sayad Abad	3

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**Freedom Medicine
Quarterly Report
July - September 1988**

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Summary

Freedom Medicine trains Afghan *mujahideen* as paramedics and supports clinics run by these paramedics inside Afghanistan. Freedom Medicine has sent 95 of its trainees into Afghanistan in the 25 months since its first class graduated. Individually, and in groups, these paramedics have established 86 clinics in all but six of Afghanistan's 28 provinces. Freedom Medicine has paramedics belonging to all seven Alliance political parties as well as two other parties.

As part of its training program Freedom Medicine operates two permanent clinics and a 30-bed surgical hospital in Pakistan. It also runs temporary field clinics on either side of the Pak-Afghan border. As of the end of this quarter there were 40 paramedic trainees and two postgraduates at these sites. Trainees received 13,743 patients in the months of July, August, and September.

Of the 95 Freedom Medicine paramedics now working inside Afghanistan, 30 were sent in this quarter to start work. Freedom Medicine supplied the new and already existing clinics with 10,761 kilos of medicine. Established clinics were upgraded with such equipment as electric generators (seven sent this quarter) and water pumps (two sent). Paramedics who serve wide areas were provided with horses or motorcycles dependant on the terrain in those areas (six and five were sent respectively).

Paramedics who returned to Pakistan for resupply were debriefed by Freedom Medicine's training and monitoring departments. Of the paramedics who have been working the longest, 90% have been debriefed at least once. Of the clinics established by these paramedics, 80% have now been visited on site by monitors. In order to expand the monitoring program, eight full-time monitors were trained this quarter.

This quarter Freedom Medicine sent two 22-bed packaged disaster hospitals to health care networks inside Afghanistan where its paramedics are collaborating with paramedics and doctors from other programs. The hospitals, including equipment ranging from operating tables to syringes, were assembled from US Civil Defense Hospitals provided by Senator Humphrey of New Hampshire. To expedite their transport over the mountain passes into Afghanistan, Freedom Medicine sent a caravan of 56 horses.

Finally, in a new initiative this quarter, Freedom Medicine conducted

research that will lead to the establishment of a maternal/child health education program.

Training program

Freedom Medicine paramedics are trained in a six-month program. During this time they learn clinical skills that allow them to provide basic health care, and they learn advanced first aid so they can treat victims of war wounds. Since the program started in February 1986, Freedom Medicine has trained six classes, graduating 101 paramedics. Of these paramedics, 18 from FM-6 (the sixth class) graduated this quarter (see table 1).

Table 1: Paramedics graduated from the Freedom Medicine training program as of 30 September 1988

<u>Month of graduation</u>	<u>Class</u>	<u>Paramedics</u>	
August 1986	FM-1	15	
February 1987	FM-2	14	14
September 1987	FM-3	19	19
February 1988	FM-4	17	23
March 1988	FM-5	18	
August 1988	FM-6	18	(this quarter)
Total		101	

Starting with FM-7, all trainees will receive instruction in two new areas: dentistry and vaccinations. As reported in the previous quarter, paramedics returning from the field had identified basic dental skills as their greatest single training need. Freedom Medicine had arranged dental training in simple extractions and local anaesthesia for 13 of these paramedics. Now, working in conjunction with the Afghan Dental Clinic of Dr. Balouch in Peshawar, Pakistan, Freedom Medicine provides each trainee with two weeks of dental instruction as part of the regular program.

With the increase in the number of vaccination teams working inside Afghanistan, the training staff decided to also add a course on vaccines to the program. The new course teaches the paramedics about the different vaccines and how they are administered. Most importantly it teaches them the logistics necessary to host vaccination teams traveling through their areas. In teaching this course Freedom Medicine is collaborating with Avicen, the French vaccination organization.

Trainees

At present, Freedom Medicine is training 40 paramedics (see table 2). New classes enter every two months. All Freedom Medicine trainees are *mujahideen* with letters of guarantee from their commanders inside Afghanistan and from their provincial party offices. These letters commit them to return to Afghanistan to work. They are selected on the basis of their intellectual promise, physical fitness, and the health care needs of their areas.

Table 2: Paramedic trainees enrolled in the Freedom Medicine training program on 30 September 1988

<u>Class</u>	<u>Students</u>
FM-6	5
FM-7	19
FM-8	16
Total	40

19
16
35

Training through patient care

The Freedom Medicine trainee learns directly by working with patients two-and-a-half hours a day starting the third week of the program. Training for the first four months takes place in the clinic and hospital at Fort Freedom near Thal, Pakistan. In the clinic and hospital, trainees provide the patient care while the training staff supervises and instructs.

Field rotations during part of the last two months provide training in the logistic and administrative aspects of running a clinic. In this quarter Freedom Medicine operated one field site at Gabor, just on the Pakistani side of the main route for *mujahideen* entering the North of Afghanistan. Trainees in Gabor treated both *mujahideen* and the horses they use to bring supplies across the mountain passes.

Jaji, in Afghanistan's Paktia province, was the site of three field clinics this quarter. Trainees established their base clinic at the Chowni (or Chamkani) garrison hospital captured from the Soviets. From there, one group set up a tent clinic located on a main *mujahideen* route through Logar province to Kabul. They treated wounded coming from the fighting in those areas. Another group operated a mobile clinic and ambulance service treating *mujahideen* in each of the different political party camps in the

area. Thirty-five mine blast victims were stabilized by the trainees and transported back to the Fort Freedom hospital during this period. The Chitral clinic is the site for postgraduate training. Returning paramedics are sent there for evaluation and skills upgrading. All trainees together, including postgraduates, saw 13,743 patients this quarter (see table 3).

Table 3: Number of patients received at Freedom Medicine medical training facilities July through September 1988

<u>Facility</u>	<u>July</u>	<u>August</u>	<u>September</u>	<u>Total</u>
Fort Freedom Hospital	206	318	382	906
Fort Freedom Clinic	1,873	1,367	1,217	4,457
Jaji clinics	701	728	674	2,103
Chitral Clinic	1,441	1,718	1,362	4,521
Gabor Clinic	585	608	563	1,756
Total	4,806	4,739	4,198	13,743

55

Paramedics and clinics

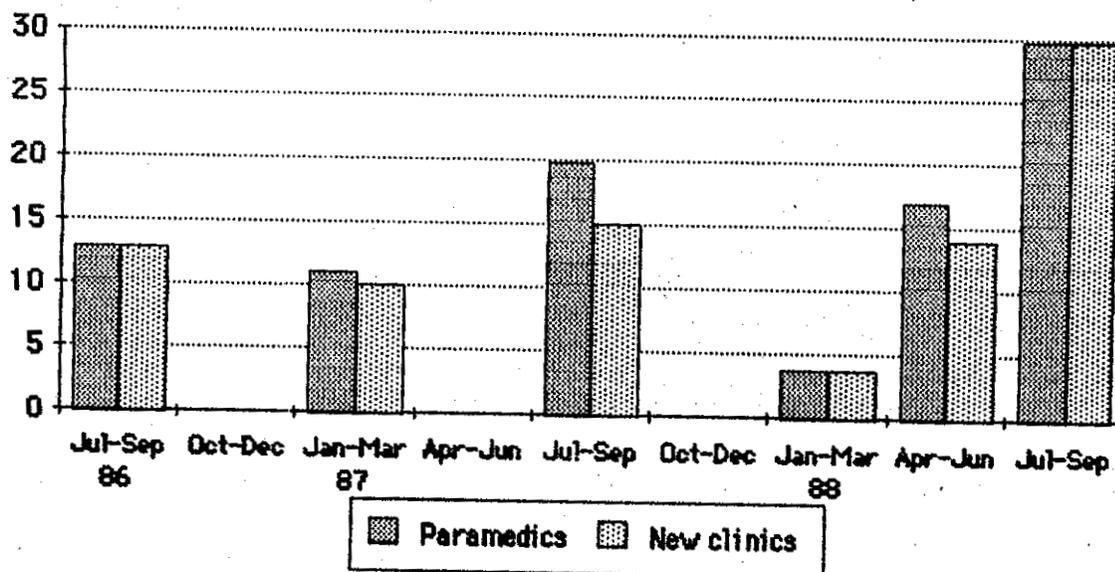
Freedom Medicine has sent 95 paramedics inside Afghanistan to work; 30 this quarter alone. Most paramedics establish new clinics where none had existed before. A few work in groups of two or three to establish larger clinics. The 95 paramedics sent by Freedom Medicine established 86 new clinics (see table 4 and chart 1).

Table 4: Paramedics sent into Afghanistan to work each quarter as of 30 September 1988

<u>Quarter</u>	<u>Paramedics</u>	<u>New clinics</u>	
July - September 1986	13	13	
October - December 1986	-	-	
January - March 1987	11	10	
April - June 1987	-	-	
July - September 1987	20	15	
October - December 1987	-	-	
January - March 1988	4	4	
April - June 1988	17	14	
July - September 1988	30	30	(this quarter)
Total	95	86	

Chart 1

Paramedics sent into Afghanistan



Geographic scope

Freedom Medicine paramedics now work in all but 6 of Afghanistan's 28 provinces (see table 5).

Table 5: Provinces in which Freedom Medicine paramedics are working as of 30 September 1988

1. Badakhshan
2. Badghiz
3. Baghlan
4. Balkh (Mazar-i-Sharif)
5. Bamiyan
6. Farah
7. Faryab
8. Ghazni
9. Herat
10. Jozjan
11. Kabul
12. Kapisa
13. Konar
14. Kunduz
15. Laghman
16. Logar
17. Paktia (and Paktika)
18. Parwan
19. Samangan
20. Takhar
21. Wardak (and Maidan)
22. Zabul

Cooperation with Afghan political parties

All seven of the Afghan Alliance political parties are represented among Freedom Medicine paramedics, along with two non-Alliance parties (see table 6).

Table 6: Parties to which Freedom Medicine paramedics belong as of 30 September 1988

Alliance parties

1. Etehad-i-Islami
2. Harakat-i-Enqelab-i-Islami
3. Hezb-i-Islami (Hekmatyar)
4. Hezb-i-Islami (Khalis)
5. Jamiat-i-Islami
6. Mahaz-i-Milli (NIFA)
7. Nejat-i-Milli

Other parties

1. Harakat-i-Islami
2. Shora-e-Etefaq

Medical supply

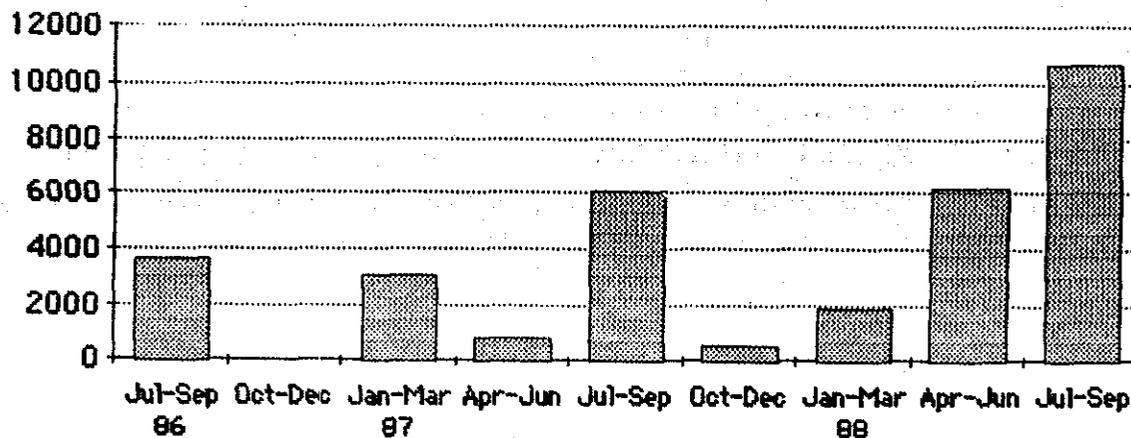
Each paramedic receives a six-month supply of medicine when he enters Afghanistan to work. Resupply for another six months follows a review of the paramedic's performance. The present six-month standard supply provided through the Swedish Committee for Afghanistan weighs 252 kg. and requires four horses to transport. This quarter, the Freedom Medicine logistics department arranged for the transport of 10,761 kg. of medicines by horse, camel, and truck (see table 7 and chart 2). These medicines supplied 13 existing clinics and 30 new ones.

Table 7: Kilograms of medicine transported to Freedom Medicine clinics as of 30 September 1988

<u>Quarter</u>	<u>Kilograms</u>
July - September 1986	3,640
October - December 1986	-
January - March 1987	3,080
April - June 1987	900
July - September 1987	6,140
October - December 1987	540
January - March 1988	1,886
April - June 1988	6,327
July - September 1988	10,761 (this quarter)
Total	33,274

Chart 2

Kilograms of medicine transported.
 As of 30 September 1988.



Equipment supply

Paramedics with established clinics are supported with equipment from Freedom Medicine to help them expand and improve their services.

Paramedics who serve large areas, for instance, are provided with a horse or a motorcycle (depending on the terrain) so that they can see all of the patients who depend on them. Paramedics use pressure cookers to sterilize their instruments. Beds accommodate inpatients in clinics where paramedics have trained their own assistants to provide nursing care (see table B).

Table B: Equipment transported to Freedom Medicine clinics as of 30 September 1988

<u>Item</u>	<u>Previous</u>	<u>This quarter</u>	<u>Total</u>
Horses	4	6	10
Motorcycles	7	5	12
Generators	11	7	18
Water pumps	5	2	7
Heaters	3	5	8
Wood stoves	-	4	4
Pressure cookers	6	3	9
Beds	46	42	88

Through its monitoring program Freedom Medicine has identified health care networks that would benefit from medical facilities more advanced than those of the average clinic. These are networks in which Freedom Medicine paramedics are collaborating with paramedics and doctors from other programs. Hospital facilities would allow paramedics in these networks to refer seriously ill patients to a place where they could receive a higher level of care.

Freedom Medicine provided hospital facilities to two such networks this quarter. It assembled the hospitals from US Civil Defense hospitals provided by Senator Humphrey of New Hampshire. Each recipient received packages containing 22 beds, along with equipment ranging from operating tables through syringes. To carry these hospitals over the mountains, Freedom Medicine assembled a caravan of 56 horses.

Monitoring and debriefing

Freedom Medicine sends on-site inspection teams to monitor its clinics inside Afghanistan. Monitors verify that the clinics are functioning properly. For future planning they also assess local situations and needs. In preparing their assessments, monitors speak with the paramedics and with local commanders. In areas that need more health care providers, monitors recruit trainee candidates.

In the time since Freedom Medicine started monitoring, it has monitored 24 of its clinics. Eight of these are among the 10 oldest clinics, established between 24 and 26 months ago; meaning that 80% of these longest-running clinics have been monitored (see table 9).

Table 9: Number of Freedom Medicine clinics monitored on site as a function of the length of time since the clinic was established. As of 30 September 1988.

<u>Number of months since clinic was established</u>	<u>Number of clinics</u>	<u>Number monitored</u>	<u>Percentage monitored</u>
0 - 2	30	-	0%
3 - 5	15	3	20%
6 - 8	4	1	25%
9 - 11	-	-	-
12 - 14	14	7	50%
15 - 17	-	-	-
18 - 20	9	5	56%
21 - 23	-	-	-
24 - 26	10	8	80%
Total	82	24	29%

In just over one year that Freedom Medicine has been sending monitors into Afghanistan, it has received reports from eight missions (see table 10). In order to expand its monitoring beyond these occasional missions, Freedom Medicine trained its first eight full-time monitors this quarter. Six of these monitors have since been dispatched on three separate monitoring missions. Each mission will visit clinics in three provinces, for a total of nine provinces.

**Table 10: Number of monitoring missions
each quarter up to 30 September 1988**

<u>Quarter</u>	<u>Missions</u>
July - September 1987	1
October - December 1987	1
January - March 1988	-
April - June 1988	2
July - September 1988	4
Total	8

In addition to monitoring its paramedics in the field, Freedom Medicine debriefs them upon their return to Pakistan for resupply. Debriefing by the training staff ascertains whether paramedics have retained their level of medical knowledge. Other debriefing interviews focus on local situations and needs. Of the ten paramedics who have been working the longest, nine, or 90%, have been debriefed at least once (see table 11). Some paramedics have been debriefed up to three times.

Table 11: Number of paramedics debriefed in Pakistan as a function of the length of time the paramedic has been working. As of 30 September 1988.

<u>Number of months the paramedic has been working</u>	<u>Number of paramedics</u>	<u>Number debriefed</u>	<u>Percentage debriefed</u>
0 - 2	30	-	0%
3 - 5	17	4	24%
6 - 8	4	1	25%
9 - 11	-	-	-
12 - 14	19	8	42%
15 - 17	-	-	-
18 - 20	11	8	73%
21 - 23	-	-	-
24 - 26	10	9	90%
Total	91	30	33%

Other activities

This quarter a Freedom Medicine anthropologist conducted research among Afghan refugee women in the Chitral area of northern Pakistan. Her research concerned these women's attitudes towards illness. The results of these investigations will guide Freedom Medicine in establishing an educational program in maternal/child health for Afghan women. A Freedom Medicine nurse-midwife has prepared the curriculum for a four week pilot program that will focus on educating women about tetanus, post-partum hemorrhage, and diarrhea and dehydration. She will begin teaching next quarter.

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**FREEDOM MEDICINE
Quarterly Report
October - December 1987**

FEB 17 1988
MEDICAL

The mission of Freedom Medicine is to train Afghan paramedics. By the end of the October to December reporting period we had 42 paramedics working inside Afghanistan. Two Freedom Medicine monitors visited three of these paramedics. We continued to train 38 more paramedics during this time and also turned out 12 basic combat first aiders. During training, our paramedics saw 10,822 patients in our clinics and our advanced trainees spent an average 69 hours each in our hospital. This training period was notable in that twelve of our trainees provided emergency medical aid for the *mujahideen* at the battle of Khost.

Freedom Medicine now has clinics in 17 Afghan provinces: Badakshan, Baghlan, Balkh, Bamian, Farah, Herat, Jozjan, Kabul, Kunduz, Logar, Maidan, Mazar-i-Sharif, Paktia, Paktika, Parwan, Takhar, and Wardak. The members of Freedom Medicine's classes include people from all seven of the Afghan Alliance parties: Harakat, Hezb-i-Islami (Hekmatyar), Hezb-i-Islami (Khalis), Etehad, Jamiat-i-Islami, Mahas-i-Melle, and Nejat-e-Melli, as well as Shora-i-Itifaq.

Table 1: Freedom Medicine paramedics,
31 December 1987

working inside Afghanistan	42
undergoing training	38
	—
total	80

Paramedics: FM1, FM2, and FM3

Between October and December, Freedom Medicine transported 17 paramedics into Afghanistan to set up new clinics. Our attrition included, to our deep regret, the death of an FM1 paramedic. He was reportedly killed in October by Soviet forces while transporting wounded from his clinic site, which was under attack.

Those paramedics which entered Afghanistan this period carried with them a total of 4,853 kilograms of medicines, an average of 285 kilograms each. Our basic supply is intended to provide enough medicines for each

clinic for six months. We give a greater supply to paramedics in regions where access is difficult or where fighting is heavy. Less is given to paramedics whose clinics are easily resupplied or who have lighter patient loads.

Freedom Medicine sends monitors inside Afghanistan to examine clinic sites, provide consultation for the paramedics, and report on their findings. The monitors give Freedom Medicine independent verification that our clinics are functioning properly. This reporting period saw the monitors who had been in Afghanistan during the warmer months returning to Pakistan before the mountain passes were closed by snow. Two monitors remained until November, during which time they visited three of Freedom Medicine's paramedics.

Rotations: FM4

Freedom Medicine's fourth class, FM4, is scheduled to graduate in early February. This period saw the final two months of their classroom instruction and the first month of their rotations. During this rotation Freedom Medicine is sending twelve of the class to provide emergency medical aid to *mujahideen* at the battle of Khost.

The purpose of rotations is to develop the trainees' independent administrative skills and to integrate what they have learned into a total realistic setting. Ordinarily the trainees rotate through field clinics, the field surgical training hospital, the Fort Freedom clinic, and a *mujahideen* camp. Freedom Medicine saw the call for medical assistance from *mujahideen* at Khost as an opportunity to provide vital aid to the Afghans while preparing our trainees for the field conditions they will encounter once they leave the program. FM4 trainees at one of the field sites and at the *mujahideen* camp were thus reassigned to establish three clinics at Khost for the duration of the fighting.

At the Jaji field training site in Afghanistan which remained active, our trainees were seeing an average of 100 patients a day at the end of this reporting period. At their three separate sites in Khost, they were seeing between 200 and 225 patients each day.

Our trainees were also rotating through the field surgical training hospital and clinic at our Fort Freedom facility. In the hospital the students provide all of the emergency room care as well as the nursing care for patients. In the clinic, students treat patients with the same assortment

65

of medicines they later bring into Afghanistan.

Instruction: FM4 and FM5

During their first four months of training, Freedom Medicine paramedic trainees undergo instruction at our Fort Freedom facility. The classes at Fort Freedom between October and December, FM4 and FM5, received an average of 173.5 hours of instruction each month. This time was divided between classroom instruction, practical application, and specialized training.

The Freedom Medicine training program puts strong emphasis on practical application of the medical skills it imparts. In addition to 170.5 hours of classroom instruction during this period, FM4 practiced their skills during 119.5 hours of supervised patient contact in the Fort Freedom clinic and field training hospital. Working in groups of four in the clinic, the paramedic trainees take medical histories, measure vital signs, conduct physical exams, diagnose and treat patients. In the hospital, the trainees concentrate on patient care and wound management. Freedom Medicine's trainers correct and guide them in these tasks they will need to perform on their own once inside Afghanistan.

Freedom Medicine's new class, FM5, began seeing patients in their second month of training. The 32 hours they spent with patients in November increased to 60 in December. As the trainees are just developing their skills during the second and third months of training, the patient contact time is used to familiarize them from the beginning with the realities of medical treatment and to provide them with instruction in clinical and nursing skills.

Freedom Medicine trains its medics not only in medical care but also in the first aid treatment of trauma. Here also the practical application component is emphasized. FM4 spent 19.5 hours during this period conducting field practicals. These are simulated emergency cases that hone trainees' skills in triage, patient transportation, and patient stabilization. FM5 started with 7.5 hours of field practicals in their third month of training.

The Freedom Medicine curriculum also provides specialized training in specific areas that will be important to the trainees as paramedics. One of these areas is physical conditioning. Physical conditioning is considered important for the paramedics so they can undertake the

oftentimes arduous journey from Pakistan to their clinic sites inside Afghanistan. Once at their clinics, paramedics must be capable of moving about rapidly with quantities of medical supplies in order to service a large patient area. When called upon to perform the role of combat medic, they must be able to maintain pace with fellow *mujahideen*, and be able to carry any wounded off the battlefield. Freedom Medicine's trainees undergo between twelve and 15 hours of physical conditioning each month.

Other areas in which trainees receive specialized training are English and medical dose calculation. The paramedics will need to understand the instructions on medicines and in manuals, and they will need to be absolutely precise in the quantities of medicine they administer. Freedom Medicine provides between five and eleven hours of English instruction each month and between four and six hours of dose calculation practice.

Tables 2a and 2b: instruction hours,
October - December 1987

FM4	Oct	Nov	Dec	total
classroom	86.5	84	*	170.5
patient contact	72.5	47	*	119.5
field practicals	12.5	7	*	19.5
physical training	12.5	13.5	*	26
English class	8	5	*	13
dose calculation	4	4	*	8
total	196	160.5	*	356.5

*FM4 was on rotations during the month of December.

FM5	Oct	Nov	Dec	total
classroom	142	115	72	329
patient contact	0	32	60	92
field practicals	0	0	7.5	7.5
physical training	15	14.5	12	41.5
English class	7	11	6	24
dose calculation	5.5	5	6	16.5
total	169.5	177.5	163.5	510.5

Hospital and clinic

In carrying out their role as teaching facilities, Freedom Medicine's hospital and clinics provide free health care to the Afghan mujahideen and refugee communities. During this reporting period we treated 11,093 patients in these facilities, 2,502 more than the previous period. The field surgical training hospital emergency room received 271 patients, the same number as in the previous period. The clinic at Fort Freedom saw 2,726 patients and the four field locations saw, collectively, 8,096 patients. Clinics at Teri Mangal and the *mujahideen* camp were open just a few days before the call came to provide aid in Khost.

Table 3: Patients received in Freedom Medicine facilities
October - December 1987

field surgical training hospital	271
Fort Freedom clinic	2,726
Teri Mangal clinic	240
Jaji clinic	4,600
three Khost clinics	3,186
<i>mujahideen</i> camp clinic	70
total	11,093

Program

As stated in the previous report, Freedom Medicine now trains two classes concurrently. In the previous reporting period, FM3 and FM4 were receiving training at the same time: one primarily at Fort Freedom, the other on rotations. In the current period, 19 students from FM4 and 19 students from FM5 were both at Fort Freedom for two months before FM5 went on rotations. Based on this experience, Freedom Medicine is preparing to train three classes, FM6, FM7, and FM8 concurrently, starting in the April through June 1988 reporting period. In this way Freedom Medicine will maximize the use of its facilities for turning out greater numbers of qualified paramedics.

Freedom Medicine continued to respond to the recommendations of the USAID evaluation team which visited us in July 1987. The committee had recommended an increase the level of data collected on Freedom

October - December 1988.

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Medicine's activities, and a better use of that data to shape the program. It had also recommended increased delegation of responsibility within the organization. An administrative assistant was hired in October to help comply with these recommendations. He is implementing a computer database for Freedom Medicine and is also designing organizational management systems.

Robert H. Bunker

14-2-88