

**German Afghanistan
Committee**

23c, Park Avenue
PESHAWAR - U.T.
Pakistan
Phone 0521-42446
Telex 08 252 464 GACPK
Telefax 0521-42223



~~TSN 110507~~ PD-ABU-399
P958
**Deutsches Afghanistan
Komitee e.V**

Am Bommerich 2-4
5300 BONN 2
Germany
Telefon (0228) 38 45 33
Telex 886 834 fsbbo d
Telefax (02228) 384534

111952

Quarterly Narrative Report

GAC OPERATED CLINICS IN AFGHANISTAN

Target Regions

Name of the Hospital	District	Province
1. Chak	Chak-e-Wardak	Wardak
2. Yakaolang	Yakaolang	Bamian

Reporting period:

Fourth Quarter 1991 (1-10-1991 to 31-12-1991)

This report was prepared by

Dr. Peter Schwittek

Director GAC

BEST AVAILABLE COPY

SURVEY OF THE GAC-CLINICS IN AFGHANISTAN

IN DECEMBER 1991

<u>CLINIC</u>	<u>STAFF</u>			<u>PATIENTS</u>	<u>FACILITIES</u>
<u>District/Province</u>	<u>M.D.</u>	<u>Nurse</u>	<u>N.Med.</u>	<u>per day</u>	<u>(more than OPD)</u>
CHAK Chak-e-W./Wardak	4	7	8	80	OT, X-ray, den- tistry, lab, 16 beds for pa- tients
YAKAOLANG Yakaolang/Bamian	-	8	3	50	OT, midwife, 12 beds

REC NO....: 10884
INSTCODE...: 010884
INSTNAME...: German Afghanistan Committee
INSTCITY...: Peshawar
INSTCNTY...: PK
IDATEEN...: 2001-12-18

A SUMMARY OF PROGRESS

The hospital in CHAK made progress with respect to building and staffing. Especially a surgeon was found. The hospital could be supplied by EC-financed medicine. Our activities in YAKAOLANG had been given up with the end of this quarter, mainly as a consequence of the setbacks, we had to face, when we tried to send expatriate staff and equipment to this place in the preceding quarters. Fortunately the agency MSH was ready to take over the support of YAKALANG from January 1992 on.

B COMPLETED ACTIVITIES

As mentioned under A the work in CHAK was successful. The hospital in CHAK is operating. Our expatriate nurse was working there for seven weeks. Later Dr. Müller, our medical director, joined her for three weeks. They treated patients, improved the organization of the hospital, trained the staff and had negotiations with members of the Shora. It has to be mentioned, that our nurse fell dangerously ill by an infection during her stay.

A surgeon from Wardak, who is ready to work in our hospital, was found. He was sent to Peshawar to work there under the supervision of experienced surgeons known to us, before he will be sent back to CHAK.

C VERIFICATION

About the presence of own expatriate staff in CHAK is reported in B. In December a UNOCA-mission and an IRC-mission payed a visit to the hospital in CHAK. In YAKAOLANG missions of UNICEF and WFP had been. The UNICEF-mission tested the skills of some of the cooperators and provided the hospital with a small amount of medicine. GAC had not been informed about the missions to YAKAOLANG and its results by UNICEF, because the relations between YAKAOLANG and the GAC-office had been too weak, and UNICEF is not represented in Peshawar.

D UNCOMPLETED, UNSUCCESSFUL, AND CANCELLED ACTIVITIES

YAKAOLANG was given up, because of the difficulties we had to face in the preceding quarters. No supplies had arrived in YAKAOLANG from Peshawar this year. After the UN made it possible for some cooperators of NGOs to fly with their aeroplane via Kabul to YAKAOLANG, they made in December the definite decision to

transport noone but UN-cooperators and rejected my request to bring me to YAKAOLANG too. So we had to give up the hope to reach our aim by air too. After we failed to monitor and supply YAKAOLANG till December, we could not do it before June 1992. But then it would have been uncertain, whether we would be able to finance YAKAOLANG after the expiration of the AID/IRC-grant in July. So we decided to stop our support for YAKAOLANG in December, and issued a paper to enable a delegation of YAKAOLANG to approach other agencies. It turned out, that MSH was immediately ready to replace us.

E IDENTIFIED CONSTRAINTS AND PROPOSED SOLUTIONS

The most important constraint was for most of the AID-funded agencies the ban to supply the institutions inside Afghanistan. In the preceding report, we had to give notice, that money and equipment for YAKAOLANG had been seized on the way from CHAK to YAKAOLANG. These items had been brought to CHAK before the ban was imposed, when our transport to YAKAOLANG had been stopped in Parvan-province by thieves too, and the travelling team decided to bring everything back to the safe place CHAK. So there was no supply for YAKAOLANG during the ban-period, and the supply for CHAK was done by means of the EC, which is cofinancing this hospital. Other remarkable constraints must not be identified in this quarter.

F UNANTICIPATED ACTIVITIES

There had been no important activities, which had not been planned before.

G WORKPLAN FOR THE NEXT QUARTER

In the wintertime there will be no monitoring in CHAK. Even the sending of supply by medicine and equipment is not necessary and would be very difficult in the next months. Our Afghan surgeon, who was working in Peshawar in a hospital, will be sent to CHAK in February to work there.

The above mentioned UN-team, visiting CHAK in December investigated the possibility to establish a rehabilitation-center in Ghazni, Logar, or Wardak. It came to the conclusion, that in CHAK not enough space was available immediately. Furthermore for geographical reasons, it preferred to run its programme in Saydabad. But soon two physioterapists belonging to this programme will be sent to the CHAK-hospital to work there. Furthermore the rehabi-

litation-center in Saydabad, where artificial limbs are produced, will have a close cooperation with our surgeon. To prepare this cooperation meetings will be held. This will be as well possible to establish a cooperation with the French agency AVICENNE, planning to run an injection-programme in CHAK and being willing to support GAC in the field of the training of female nurses.

H ABOUT OUR MONITORING

There are no new remarks necessary about our monitoring. It is expensive but effective.

I LESSONS LEARNED

No remarkable new experiences had been made in this quarter.

Peshawar, January 16th 1992



(Dr. Peter Schwittek)

Director GAC