

# BULLETIN

## ICRC HOSPITAL PESHAWAR ICRC



INTERNATIONAL COMMITTEE OF THE RED CROSS



To save lives by taking care of injured children, women and men, young and elderly, without distinction along ethnic, social, religious or political lines, based purely on needs, is neutral, independent humanitarian work in its purest form. In its hospital in Peshawar, the ICRC treats any weapon wounded who comes there or is brought there for treatment, without distinction, based on the approach that weapon wounded are neither friend nor foe, neither good nor bad: they are injured human beings who need immediate attention and care.

The medical mission is at the very core of how the ICRC came into being, when a group of volunteers, led by a Swiss businessman, were unable to stand by and watch injured soldiers bleed to death on a battlefield in northern Italy in the 19th century. They took it upon themselves, as volunteers, to treat and assist the wounded.

To this very day, right here in Pakistan, the medical mission remains at the core of our humanitarian work.

In the phase leading to the opening of the ICRC hospital in Peshawar, we have found broad support across the entire spectrum of society.

We are therefore confident that all stakeholders, regardless of their social standing, political affiliation or religious belief, will continue to contribute their share to protect the humanitarian space we need in order to deliver assistance to all the victims of conflict.



**Pascal Cuttat**  
Head of Delegation  
ICRC Pakistan

## Background

The ICRC began providing medical assistance in Pakistan in 1981, when two independent ICRC hospitals were established in Quetta and Peshawar to treat victims of the Afghan war. Those two hospitals were closed down in the early 90's. In the early 80's, the ICRC also constructed and ran a paraplegic centre in Peshawar for Afghan conflict victims with spinal cord injuries. Later on, the centre was handed over to the provincial Ministry of Health.

In 2004, the Weapon-Wounded Assistance Project (WWAP) was started with the aim of treating weapon-wounded patients from the conflict along the Pak-Afghan border, including the tribal areas. The services offered

were organised in cooperation with two private hospitals. The ICRC also provided hospitals along the north-western frontier with medical supplies and training for staff.

From 2007 onwards, the number of weapon wounded patients from conflict-hit regions of Pakistan increased. To respond to the rising numbers of weapon wounded patients after the beginning of the armed conflict in Bajaur agency in August 2008, the ICRC dispatched expatriate surgeons to the two private hospitals. It also provided training in the management of weapon-wounded patients for health staff from FATA. A total of 442 patients were treated in

contd. from page 1 > >

the framework of the weapon-wounded project between August and December 2008. Because of the ever-increasing number of weapon-wounded patients, the ICRC decided to set up an independent surgical hospital in Peshawar.



## Facts and figures

Capacity: 60 beds in the field hospital, 100 beds in the permanent structure.

National staff: 145

Multinational: 18



## Aims

The goal of the hospital is to

- provide surgical services to weapon-wounded patients, according to ICRC standards.
- train local surgical and medical staff in conflict-affected areas and thus increase the level of medical services there.

The ICRC believes that the hospital will be a neutral humanitarian space, freely accessible to weapon-wounded patients and respected by all.



**S**han is 12 years old and grew up in Mingora (Swat Valley) where he lived together with his parents, three sisters and two brothers. In February 2009, when he came back from school, he played with some friends close to his home. Suddenly, he heard fire shots around him, felt an immense pain and lost his consciousness. Shan had a bullet shot right through his chest. His father brought him immediately to the main hospital where Shan was operated twice to save his life. He stayed a few days in the hospital until some friends of the father informed the family that ICRC had opened a hospital for weapon-wounded patients in Peshawar. The family immediately made the necessary steps to transfer Shan to the ICRC hospital. Shan is still very weak and still feels often immense pain in his chest and abdomen. He will stay for several weeks more at the hospital but is very happy to think that one day he will be able to return back to his home and to school.

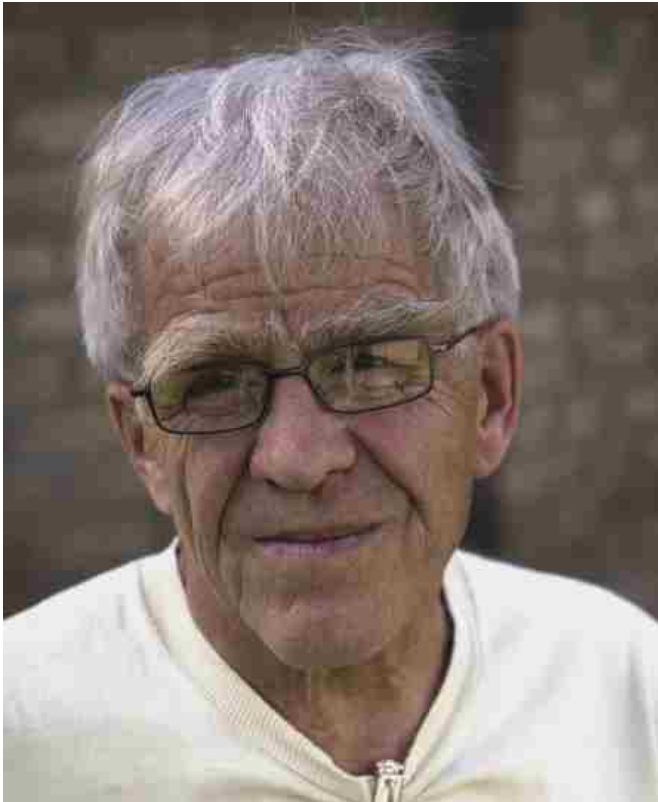
## Present setup

Because of the urgency of responding to acute medical needs and the time required to design and build a permanent structure, the ICRC surgical hospital has begun operations using a 60-bed field hospital provided by the Finnish Red Cross and financed by the Finnish government.

The field hospital is fully equipped, with an operating theatre, X-ray services, laboratories, physiotherapy services and an intensive care unit.

The first patients were admitted on 18th February 2009.

When the adjacent concrete hospital is fully rehabilitated, the final capacity will be 100 beds.



## Who is eligible for treatment?

All weapon-wounded patients, combatant or civilian, are eligible to be treated, according to the ICRC mission

The ICRC mission is to strive to protect and assist ALL victims of armed conflicts and other situations of internal violence.

The ICRC acts and provides medical assistance in accordance with the principles of neutrality, impartiality, independence and medical ethics.

According to International Humanitarian Law (IHL) and to national legislation (Medical Aid Act, Section 3, 4 and 8), no one should be left without proper medical treatment

But the hospital is by no way a safe haven. The ICRC works in full transparency with the Pakistan authorities and the armed opposition groups regarding the rights of all wounded-people to receive medical care and to be respected within the ICRC surgical premises, while not interfering with Pakistan's security interests outside these facilities, on the understanding that the ICRC may follow up any arrested outgoing patients, in accordance with its mandate in relation to people deprived of their freedom.

The Finnish war surgeon Dr. Jorma Salmela started working with the Finnish Red Cross in 1974. In 1982, his first mission abroad brought him to Pakistan, where he worked in the ICRC's first War Surgical Hospital for Afghan Weapon-Wounded in Peshawar for three months. He came back to Peshawar in 1985, 1986-87, 1992-93 and 2005 either as a surgeon or as a medical coordinator. He also trained Pakistani surgeons in Peshawar, FATA and Quetta. Dr Jorma also spent three months in Muzaffarabad in the aftermath of the 2005 earthquake, where he was in charge of the ICRC's emergency tent hospital. He finally came back to Peshawar in January 2009, where he is currently the senior surgeon at the ICRC Surgical Hospital for Weapon-Wounded Peshawar.

**Dr. Jorma, you are now 69 years old and you could enjoy your well-deserved retirement with your family in Finland. What made you pack your luggage again and travel to Peshawar?**

It is my passion for my work as a war surgeon and my love for the Red Cross. I strongly believe that the Red Cross Movement is the most practical humanitarian organization. It can really achieve something and make a difference to many people in need.

However, what is true is that going on missions always means sacrifices on a personal level. In fact, none of us humanitarian workers could live this life without the broad and tremendous support given by our families and our friends. They are in fact enabling us to do this kind of work, to be ready and available for missions abroad.

**What are your experiences here at the hospital in Peshawar?**

Since the opening of the hospital on the 18th of February, we have already carried out many operations and I have to say that all staff members are extremely motivated, which makes work a pleasure.







"I used to share the bed with my little sister, said Ali. One night in November 2008, I woke up without warning, a deafening explosion tore my breath away and, after several moments of intense pain, I lost consciousness."

The parents, sleeping in the other side of the house rushed to help him. Ali was seriously injured. His father brought him immediately to the nearest hospital, where he underwent a lifesaving operation. However, his right leg had many fractures and couldn't be treated there. Doctors working in the hospital knew about ICRC's weapon wounded prog-

**A**li Nazir was born 9 years ago in a village in Bajaur Agency where he used to live a quiet life together with his parents and four siblings. His father was working as a farmer, cultivating crops on his own land. Ali used to go to school in a nearby village. However, some 7-8 months ago the school closed down due to the outbreak of the conflict. Life became more difficult as security was getting worse.

ramme and transferred Ali to Khattak hospital in Peshawar, which was supported by the ICRC. From Khattak hospital he was then transferred to Khyber hospital where he underwent another operation, which was conducted by an ICRC surgical team. Once the ICRC *Surgical Hospital for Weapon-Wounded Peshawar* opened in February 2009, Ali Nazir was finally transferred to the newly opened ICRC hospital. Doctors at the hospital say that he might have to stay another few weeks before being able to return back to his village in Bajaur.

## Staff training

The staff of each technical departments have been fully trained by ICRC specialists.

They have also taken part in workshops to get a better understanding of the general ICRC modus operandi and Fundamental Principles.



## Working methods

The ICRC is fully transparent : it communicates with all the parties in a conflict about what it does, and how, for whom and where it does it. The ICRC never accepts armed escorts and moves in the field, in full visibility marked with the Red Cross emblem, only when all parties have accepted its presence. This method of work makes the ICRC predictable; and ultimately engenders the trust essential for the security of its staff and for easier access to the victims in need of assistance and protection.

The ICRC shares any comments it may have only with the party concerned. It seeks to improve the humanitarian situation through constructive dialogue - not through public condemnation.

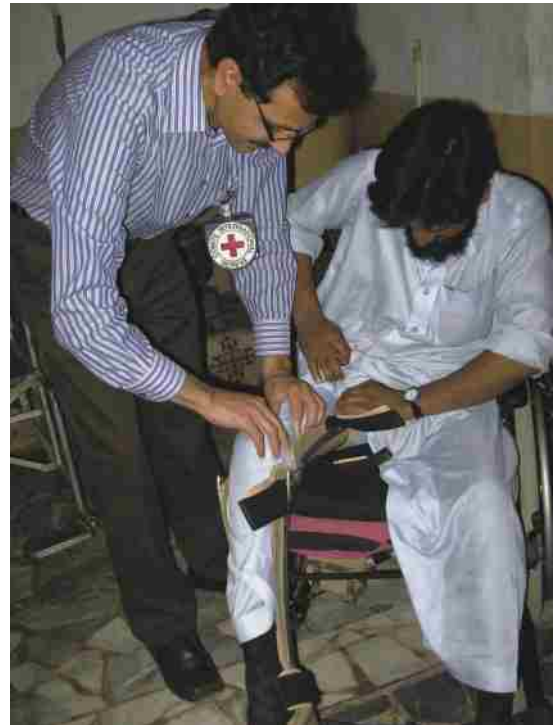
# Other medical services provided by the ICRC in NWFP and FATA

**Supporting district hospitals:** ICRC has provided hospitals in conflict-affected areas with kits for treating weapon-wounded patients. The ICRC has also provided supplies for the DHQ hospitals in Lower Dir, Kohat and Hangu districts and the AHQs in Bajaur and Kurram Agencies.

**Assisting Internally Displaced People (IDPs):** The ICRC provides supplies for Pakistan Red Crescent Society (PRCS) medical teams based in the two camps of Timergara (Lower Dir). The PRCS is providing medical consultations and carrying out a hygiene promotion program that has significantly contributed to a decrease in endemic diseases among displaced population.

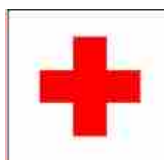
**Assisting Physically Disabled Persons:** Under a memorandum of understanding with the Pakistan Institute for Prosthetic and Orthotic Sciences in Peshawar, the ICRC provides physically disabled people from NWFP/FATA with orthopaedic appliances and physiotherapy. More than 1,600 patients have received these ICRC services in NWFP over the past three years. Another 900 patients have been referred to the ICRC physical rehabilitation centre in Jalalabad, Afghanistan, to receive these services.

**Assisting Spinal Cord injured Patients (Home Care Project) :** Since 2007, the ICRC has carried out a programme seeking to reintegrate spinal cord injured patients in their families and communities and to restore their dignity. A total of 300 patients have been registered by and received home visits and rehabilitation services from ICRC physiotherapists.



The Red Cross emblem was adopted as a compliment to Switzerland, the birthplace of the International Red Cross and Red Crescent Movement and the Geneva Conventions, by reversing the colours of the Swiss flag. The emblem has no religious connotation whatsoever.

It was created to protect both the victims of armed conflicts and those who come to their aid. All combatants must respect the Red Cross emblem and show restraint.



## What is the ICRC?

The ICRC, one of the oldest humanitarian organizations, was founded in Geneva, Switzerland, in 1863. It is a private organization independent of all governments and international bodies. Its legal mandate to protect and assist the victims of armed conflicts, conferred on it by the international community through the four Geneva Conventions, sets it apart from other humanitarian organizations. The Geneva Conventions have been adhered to by every State in the world, including Pakistan. The States party to the Conventions have given a permanent mandate to the ICRC to:

- minimize the dangers to which people in conflict situations are exposed
- respond to the needs of conflict victims
- promote knowledge and respect of international humanitarian law

In its efforts to meet these humanitarian objectives the ICRC adheres to the seven Fundamental Principles of the International Red Cross and Red Crescent Movement.

## THE FUNDAMENTAL PRINCIPLES

The Fundamental Principles of the International Red Cross and Red Crescent Movement bond together the ICRC, the National Red Cross and Red Crescent Societies, and the International Federation of Red Cross and Red Crescent Societies, and guarantee the continuity of the Movement and its humanitarian work.

### Humanity

The ICRC endeavours to prevent and alleviate human suffering wherever it may be found.

The ICRC has delegations in around 80 countries and more than 12'000 staff.

In Pakistan, the ICRC carried out activities pursuant to its mandate during the 1948, 1965 and 1971 wars. Since 1981, it has maintained a permanent presence in the country. Most of its activities have focused on helping the victims of the Afghan war. In 2005, it launched a large-scale assistance program for survivors of the earthquake in Pakistan-administrated Kashmir (around 250'000 beneficiaries). Currently, the ICRC is carrying out humanitarian activities for victims of armed violence in NWFP, FATA and Baluchistan.

### Neutrality

In order to continue to enjoy the confidence of all, the ICRC does not take sides in hostilities or engage in controversies of a political, ethnic, religious or ideological nature.

The security of ICRC staff depends on the acceptance of its presence and activities by all parties to a conflict. That is why the ICRC talks with all sides to clarify its humanitarian activities.

### Impartiality

Help for ALL victims, without considerations of sex, race, nationality, religion or political opinions, according to the most urgent need.

Civilians are paying the price as a result of the fighting. Their needs are a priority for the ICRC. All ICRC activities in Pakistan have the same aim – to help the people adversely affected by the conflict to live with dignity, without any discrimination.

### Independence

In order to be able to serve the victims, the ICRC stays away from and resists any pressure, whether it comes from political, military or economical forces, or public opinion and media or other international organisations, that would keep it from respecting neutrality and impartiality.

The ICRC is not part of any other humanitarian agency, and of the UN system, and it is not an NGO. The ICRC can independently assess a humanitarian situation only if all the parties in a conflict grant and facilitate access to its staff.

### Voluntary service

The ICRC is a voluntary organisation not prompted in any manner by desire for gain.

All ICRC services are provided free of charge. Hospital staff have been instructed to refuse any gift of any kind whatsoever.

### Universality

The International Red Cross and Red Crescent Movement is worldwide. All National Societies help each other.

In Pakistan, in accordance with this Principle, the Finnish Red Cross has provided the temporary 60-beds field hospital, and the Pakistan Red Crescent Society is an key partner in many ICRC activities.

### Unity

There can be only one Red Cross or one Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

#### ICRC Islamabad Delegation

House 12, Street 83, G-6/4, Islamabad.

Phone: 051-2824780

email: [islamabad.isl@icrc.org](mailto:islamabad.isl@icrc.org) website: [www.icrc.org](http://www.icrc.org)

#### ICRC Lahore

House (02) - 4D, Aziz Avenue,  
Justice Sardar Iqbal Road.  
Canal Bank, Gulberg 5, Lahore  
Phone: 058810 34213

#### ICRC Karachi

House 186, KDA  
Scheme 01 - Karachi  
Phone: 021-4522711

#### ICRC Muzaffarabad

Upper Chattar Housing  
Scheme - Muzaffarabad  
Phone: 058810 34213

#### ICRC Peshawar

40, Jamal-uddin Afghani  
Road - Peshawar  
Phone: 091-5840146

#### ICRC Quetta

21-A Chaman Housing  
Scheme - Quetta  
Phone: 081-2834330