



Michael Von Bergen/ICRC

ICRC PAKISTAN ACTIVITIES

January to March 2010

KEY FACTS

- The ICRC is supporting a Ministry of Health hospital in Paroa, Dera Ismail Khan, an initiative aimed at meeting health needs of Waziristan IDPs and the local population.
- Supporting 10 Pakistan Red Crescent Society (PRCS) basic health units working in the NWFP to provide health assistance to displaced population.
- Supporting 24 health facilities of the Ministry of Health in the NWFP and the FATA.
- Running a surgical hospital for weapon-wounded in Peshawar, where more than 950 weapon-wounded patients have been treated since February 2009.
- Re-establishing family links for people separated from their relatives by the situation in NWFP and FATA.
- Visiting Pakistanis detained in Guantanamo, Iraq and Afghanistan to ensure humane detention conditions and help maintain their family links.

Focus on the ICRC Medical Activities

In Pakistan, like in any other situation of violence, it is civilians who pay a high price. Hundreds of thousands had to flee their homes, have lost their livelihoods. Too many have died or have been injured as a direct or indirect consequence of the fighting.

The ICRC has continued to do its best to help the victims of fighting. In 2009, we assisted 1.7million victims of the fighting in the Malakand Division. As the situation stabilises in NWFP, our focus has shifted to agricultural recovery projects in favour of 315,000 farmers. Besides this, we have also begun preparatory work to start livelihood programmes such as business grants, cash for work and distribution of dairy cows to widows.

The ICRC is now seeking to step up its humanitarian assistance to the victims from Federally-Administered Tribal Areas (FATA), where operations have been under way. Unfortunately, these areas are notoriously difficult to access safely.

The ICRC has adapted its working modalities to overcome the challenges faced by supporting 24 medical facilities of

the Ministry of Health, as well as facilities of the Pakistan Red Crescent Society (PRCS), ICRC'S national partner.

With the PRCS, the ICRC has already assisted close to 350,000 victims in NWFP, FATA and Baluchistan with food assistance since January 2010. Cooperation with the PRCS, which reached new heights in 2009, is set to increase further in 2010.

This issue of our newsletter focuses on the medical mission of the ICRC in Pakistan, which is one of the roots of the organisation's identity and was the starting point of all its humanitarian work, both world-wide and in Pakistan.

Although the ICRC gradually developed a broad range of humanitarian activities and services, from visits to detainees to mine-awareness, the medical mission has remained central. This issue seeks to highlight this crucial aspect of our work in Pakistan.

Pascal Cuttat
Head of ICRC Delegation in Pakistan



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AN INTERVIEW WITH DR OSCAR AVOGADRI, ICRC HEALTH CO-ORDINATOR IN PAKISTAN



Tell us about the importance of the medical mission in the multi-disciplinary humanitarian work of the ICRC.

The medical mission is a pillar of ICRC's humanitarian work. In situations of fighting, it aims at protecting wounded civilians and those who are no longer taking part in hostilities. The ICRC not only provides quality medical treatment to people wounded in fighting, it also strives to ensure that the civilian population affected by fighting has access to medical facilities.

In a nutshell, the ICRC's medical mission focuses on two areas: providing wounded patients medical treatment and protecting health facilities and medical staff during fighting.

What is the ICRC doing to provide health assistance to Waziristan IDPs living in Dera Ismail (DI) Khan?

We are supporting the Tehsil Headquarters Hospital in Paroa, DI Khan. We have hired and trained new medical staff for the hospital and donated medicine and medical equipment. This support will provide surgical and obstetrics capacity for IDPs and residents of DI Khan.

Hostilities continue in various areas of the FATA, adversely affecting the civilian population. What is ICRC's medical mission doing for the victims?

The ICRC is working to help the wounded and the affected people to have access to proper medical care. In coordination with the FATA Health Department, the ICRC is

supporting 24 existing hospitals, providing medicine, dressing material and medical equipment. The ICRC medical team would like to have access to the health facilities of the FATA to evaluate the needs and to make a follow-up of the donations.

In February 2009, the ICRC set up in Peshawar a surgical hospital for weapon-wounded to treat weapon wounded patients coming from the FATA and the NWFP.

What difficulties have you and your colleagues faced in the field?

The message that ICRC's medical mission is independent, impartial and neutral is not well-understood in some cases, which creates difficulties for us in the field. Similarly, in some instances, wounded patients do not have unimpeded access to medical treatment, which is heart-rending and frustrating.

ICRC SURGICAL HOSPITAL FOR WEAPON-WOUNDED IN PESHAWAR

Salma's Ordeal and Resilience

"I had just offered my prayers after a blissful day of Eid celebrations. Suddenly our house banged with a deafening sound and a shower of bullets sprayed over my leg and abdomen. My elder brother, who was sitting beside me, was also injured. We were both screaming, for it was unbearably painful," says Salma, 15, a resident of strife-torn Mohmand Agency of Pakistan's Federally Administered Tribal Areas.

Salma is under treatment at the ICRC Surgical Hospital for weapon wounded, a 92-bed hospital that offers specialised surgery for weapon-related injuries from the NWFP and the FATA. The hospital has its own operational theatre, intensive care unit, laboratory and x-ray equipment. "The free treatment available here is a blessing for poor people like us. We could not afford to take Salma to a private hospital," says the aunt of Salma.

Faith Nkatha, an ICRC ward nurse who looks after Salma, has developed a lot of affection for the patient. "With an amputated leg, a fractured arm and multiple injuries, Salma used to be a hopeless and gloomy girl. However, she has improved a lot since she came here. While she still has fears about the future, Salma is quickly learning to be self-reliant."

Between January and March 2010, over 150 patients have been admitted at the hospital and the doctors performed more than 500 surgeries. Weapon-related wounds usually require more than one surgery.



Salma and nurse Faith Nkatha in the women's ward in Peshawar Weapon Wounded Hospital

ICRC'S REHABILITATION CENTRES IN PAKISTAN

PIPOS IN PESHAWAR

Restoring Dignity

"When I opened my eyes, my body was drenched in blood. Doctors at a local hospital amputated one of my legs to save my life," says Bashir Khan, 40, who was working as a watchman at a CD market in Peshawar when a bomb blast went off there.

Bashir says: "After that incident, I was helpless. I have had to beg to provide food to my family, for I could not find any job due to my disability. A local physical rehabilitation centre demanded Rs 20,000 to provide an artificial leg. Since I did not have the money, I gave up hope of ever getting an artificial leg. Then someone told me about the Pakistan Institute of

Prosthetic and Orthotic Sciences (PIPOS) and that is how I reached here."

The ICRC supports the PIPOS that provides orthotic and prosthetic devices to physically disabled patients from the NWFP and the Federally Administered Tribal Areas. Since January 2009, around 2,800 disabled patients have been treated at the PIPOS, including 298 prostheses and 1,556 orthoses cases.

"I felt that I was on the top of the world when I was fitted with an artificial leg for the first time at PIPOS and when I started walking with its help. As my children saw me walking normally, when I reached home, they rushed towards me and hugged me with delight and affection."



Sadiq Mohammad/ICRC

Bashir Khan after getting training to use his artificial leg at the PIPOS/ICRC centre

CHRC IN QUETTA

"I'm Walking Again!"

"It was the end of the world for me after I lost both my legs in a landmine blast near the Afghan border," says Habibullah, as a physiotherapist helps him to walk. Habibullah is being fitted with artificial limbs at the CHRC, a facility run by the ICRC in Quetta.

"The tragic incident occurred seven years ago. Since then, I have been living the life of a disabled man. I was completely dependant on others for even the smallest chores, which was very painful for my ego," says Habibullah, 23, who comes from the Pishin district of Balochistan.

"Recently I heard about the ICRC's rehabilitation centre and decided to come down to Quetta. You can see that I already got new legs. I am walking for the first time after seven years."

Habibullah adds: "The ICRC is taking care of my accommodation and food and they have reimbursed the money I spent on travelling to Quetta. They will also give me my bus fare when I return to Pishin."



Imran Khan/ICRC

Habibullah with Asghar Emmanuel, an assistant physiotherapist, at the CHRC in Quetta

Mark Broomfield, the in charge of the CHRC, says: "The CHRC is the only properly functioning physical rehabilitation facility in Balochistan." Since October 2004 until June 2008, the ICRC was only providing technical and material support to the CHRC. But since June 2008, we are directly running the facility. The 20 staff members of the CHRC are on ICRC's payroll. We treated around 1,500 patients in 2009. We have had patients coming from border areas of Afghanistan, Sindh and Punjab, since we treat them free of charge."

ICRC's Hygiene Programme in Kashmir

To improve hygiene and sanitation conditions in various villages of Muzaffarabad, the capital of Pakistan-administered Kashmir (PaK), and to compliment its water supply projects, the ICRC and the PRCS launched a Participatory Hygiene and Sanitation Transformation (PHAST) programme in March 2008. The PRCS staff, supported by the ICRC, has sensitised around 61,000 people of 10,500 households about standard hygiene and sanitation practices.

"The October 2005 earthquake killed thousands of people in PaK, rendering hundreds of thousands homeless. The disaster also destroyed water supply systems in the affected areas, hampering the access of the population to water and sanitation facilities," says Fabienne Deraemaeker, who is head of the ICRC office in Muzaffarabad.

Fabienne adds: "The ICRC has rehabilitated 144 water supply schemes in various villages of Muzaffarabad. The ICRC personnel, who worked in the villages to rehabilitate water supply schemes, observed that the local people were living in poor hygiene conditions due to lack of awareness, leaving them vulnerable to diseases such as diarrhea and scabies. Therefore, PHAST was launched to sensitise them and avert preventable diseases." Chaired by PaK President Raja Zulqernain Khan, a concluding ceremony was organised at the PRCS PaK branch office on 24 February to mark the successful completion of the programme.



SUMMARY OF THE ICRC ACTIVITIES FROM JANUARY TO MARCH

The ICRC and the PRCS continued their humanitarian activities between January and March, distributing food among more than 350,000 people in Buner, Hangu, Khyber, Kohistan (victims of avalanche), Lower Dir, Malakand and Swat districts of NWFP. In Quetta, the capital of Balochistan, the ICRC also assisted over 3,400 IDPs from Waziristan.

During the period under review, the ICRC provided medicine and medical equipment to the Ministry of Health hospitals, medical facilities and PRCS basic health units in Swat, Lower Dir, Bajaur Agency, Mohmand Agency, Orakzai Agency, North Waziristan, Khyber Agency, Lakki Marwat, Hangu,

Malakand and Nowshera districts.

The ICRC also held awareness sessions to sensitise IDPs about the dangers posed by unexploded weapons. Around 900 weapon contamination awareness sessions were held in Benazir, Jalozi and Palosa IDPs camps as well as in Azam Khan, a village in Mardan. In total, more than 20,000 people benefited from these sessions.

The ICRC and the PRCS also distributed food to Bajauri IDPs living with host families and in Samar Bagh, Sadbar Kalay and Khungi Shah camps. Set up for the Bajauri IDPs, the ICRC and the PRCS are jointly running the latter two camps.

EVENTS



ICRC staff getting ready to provide medical assistance to the mock patients of the triage exercise in the ICRC weapon wounded Hospital in Peshawar

ICRC Mandate

The International Committee of the Red Cross is an impartial, neutral and independent organisation whose exclusively humanitarian mandate is to protect the lives and dignity of victims of war and internal violence and to provide them with assistance. It directs and coordinates the international relief activities conducted by the Movement in situations of conflict. It also endeavors to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles. Established in 1863, the ICRC is at the origin of the International Red Cross and Red Crescent Movement.



In February, the ICRC and the PRCS organised, in Peshawar, a first aid training for 40 journalists from NWFP



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