



COURS MÉDICAUX DE RECYCLAGE POUR AFGHANS
MEDICAL REFRESHER COURSES FOR AFGHANS

LOGAR PROJECT

History

The implementation of BPHS by MRCA in the Logar Province starts in December 2004

In December 2004, MRCA receives a grant from the European Commission (EC) to implement the Basic Package of Health Services (BPHS), according to the Afghan Ministry of Public Health (MoPH) requirements, in Pol-e Alam, Mohammed Agha, Khoshi, Azra and Kharwar districts of Logar Province. As from 12th December 2004, MRCA starts the fieldwork in establishing the provincial Sub-Office and Training Centre in Pol-e Alam and in recruiting the key position staff for the field activities.

After three months, most of the 18 existing Health Facilities (HF) placed at that time under its responsibility are taken over by MRCA. Most of the HFs already has a building, or a building is under construction under the umbrella of the MoPH/USAID Program. Staffing for male staff is done and is going well for female one, despite cultural barriers. MRCA encourages health workers from Kabul and other locations to move to Logar providing, when possible, with the support of local communities, accommodation facilities and job to their spouse, husband or family member.

In August 2005, MRCA receives funds from the United Nations Population Fund (UNFPA) for the running of two Emergency Obstetrics Centers (EOC), one located in Azra and another one in Kharwar districts. As extremely bad roads – most of the time blocked by snow in winter – and unavailability of obstetric services are indeed the leading causes of maternal mortality in those two districts located in remote areas, the set-up of those two HFs is a major step forward to ensure access of pregnant women to safe and clean delivery facilities.

In August 2006, the French NGO Aide Médicale Internationale (AMI) hands over to MRCA all the HFs run in Baraki Barak and Charkh Districts, including one District Hospital (DH). That means that about all of the Logar Province HFs are now placed under MRCA responsibility.

Renovation and equipment of Health Facilities begin in spring 2005

MRCA starts the renovation and the equipment of all HFs in spring 2005, with special focus on the two DHs located in Pol-e Alam and Mohammad Agha, as there is no Operation Theater (OT) in both of them and, in the second one, no In-Patient Department (IPD).

The renovation of Nayeb Aminullah Khan Hospital in Pol-e Alam starts with the rehabilitation of the OT and the radiography room, the installation of electricity, the functionalizing of the dental and laboratory Units and the equipping of emergency and recovery rooms. The construction of both the female ward and the OT in Lodin Hospital, in Mohammad Agha district, begins.

At the end of June 2005, the Nayeb Aminullah Khan Hospital OT is ready for serving the emergency surgical cases as well as scheduled operations. A few months later, the first two caesarian sections ever made in the Logar Province are successfully performed in that hospital.

The renovation of buildings, the construction of surrounding walls and incinerators, and the equipment of all HF's continues until the end of year 2005 and during year 2006. The medicines are provided to all HF's, according to their needs. Great care is taken in this regard as far as access to HF's in winter is concerned (Stocks of medicine for six months are needed for Azra and Kharwar HF's and EOCs).

MRCA begins training as from the first quarter of year 2005

During the first quarter of year 2005, MRCA develops an action plan for the Community Health Worker (CHW) Trainers/Supervisors and a long term action plan for CHW training. On the other hand, MRCA develops an action plan for medical staff of the project both class and on the job oriented. Training action plans are developed based upon the priorities and are supported by training need assessments.

MRCA selects two CHW Trainers/Supervisors (one male, one female) from each of the target districts – except from Kharwar where only a male CHW Trainer/Supervisor is ready to work –, and launches a two weeks initial Training of Trainers (ToT) and CHW training course in April 2005.

Training activities continue with training of pharmacists, CHWs, persons in charge of the HF's for the HMIS (Health Management Information System) implementation, according to the MoPH policies. Other trainings are followed by medical MRCA staff, in particular in the fields of pregnancy, immunization and related issues.

MRCA opens a Community Midwifery School in August 2006

Thanks to UNFPA funding, MRCA opens in August 2006, in Pol-e Alam, Capital of the Logar Province, a Community Midwifery School. The students are provided with theoretical and practical training, within the framework of the nation wide Community Midwifery Education Program (CMEP).

On December 25th, 2007, a graduation ceremony is held for the first batch of 20 midwives, who are awarded with their diploma by HE Dr. S. Amin Fatimie, the Afghan Minister of Public Health. A second batch started its training during spring 2008.

MRCA strengthens the provision of integrated outreach services in remote or scarcely populated areas

Whereas BPHS is a quite successful policy that has resulted into satisfactory coverage of basic and secondary health services to a major proportion of the population, the geography and the rude climatic conditions in remote districts, the scattered pockets of population, the absence of basic infrastructure such as roads and bridges over the rivers, ethnic and cultural barriers and so on, all have posed questions to the definition of the BPHS HF's, which is based on the number of population in a given area. That led MoPH to propose the establishment of smaller size HF's, called Sub-Centers (SC) and to promote the provision of regular integrated outreach services, which well fits with Azra and Kharwar districts needs.

This considered, MRCA continues to manage Azra and Kharwar districts EOCs, and in June 2007 starts operating one Comprehensive EOC in Pol-e Alam, together with two SCs and two mobile clinics, with the objective of strengthening the provision of outreach services for these specific districts where numerous nomadic people stay during the summer season.

After three years of operation 750,000 patients have attended MRCA run HF's

In pace with the buildings renovation, the HF's equipment, and the medical staff recruitment and training, more than 750,000 patients have attended the MRCA run HF's in the Logar Province during the first three years of operation.

About 8,000 patients were hospitalized. Some 2,500 surgeries, 15,000 dental and 6,200 physiotherapy interventions, 18,000 laboratory exams and 530,000 immunizations were performed. There were more than 7,000 safe deliveries in HF's. Almost 585,000 people received health education. Last, but not least, more than 1,500 health workers were successfully trained.

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