

# Relocation of the HOAP- RMF Health care Unit from Jabri to Talhata, Balakot

By  
Rubina Mumtaz  
Country Director  
RMF Pakistan

**RMF. HOAP Health Unit**  
Talhatta.

*Inaugurated By: Dr. Rubina Mumtaz Country Director*  
*Real Medicine Foundation U S A. December 2006.*

# Background

- The HOAP-RMF Health Care Project achieved one of its major objectives in Oct 2006, exactly one year after the earthquake.
- This objective was to provide free primary healthcare and referral services to the earthquake affectees in Jabri, Union Council Shawal Muizullah till such time that the original healthcare apparatus of the area was restored.
- In Oct 2006, the government-run Basic Health Unit (BHU) was inaugurated and became fully functional by Nov 2006.

# Decision to relocate

- Keeping in mind the collective mission statements of both HOAP and RMF, a decision was made to relocate the healthcare project to an area which lacked basic health facilities
- The location selected is a village in Talhata that is strategically located on an all-weather main road at the junction of two union councils (UC) – UC Shawal Muizullah and UC Talhata.
- The new location addresses residents of several more villages increasing the target population to about 44,000 persons.
- There is no MCH center in either of the two union councils, giving us a goal to base the expansion of our existing clinic structure.

# Relocation

- The month of November was spent in the process of relocation. The materials (metal sheets) of the temporary transitional structure of the existing clinic in Jabri proved to have a reduced utility in reuse in the process of reconstruction
- The need for additional construction material was an expenditure not budgeted for but help came in form of donation by SPAPEV.NVM, the National Volunteer Movement. This was made possible due to personal efforts made by Dr. Zahoor, the Health Coordinator of the HOAP-RMF project.



# The RMF-HOAP Healthcare Clinic in Talhata



A roof top view



Staff residence

Kitchen

General OPD

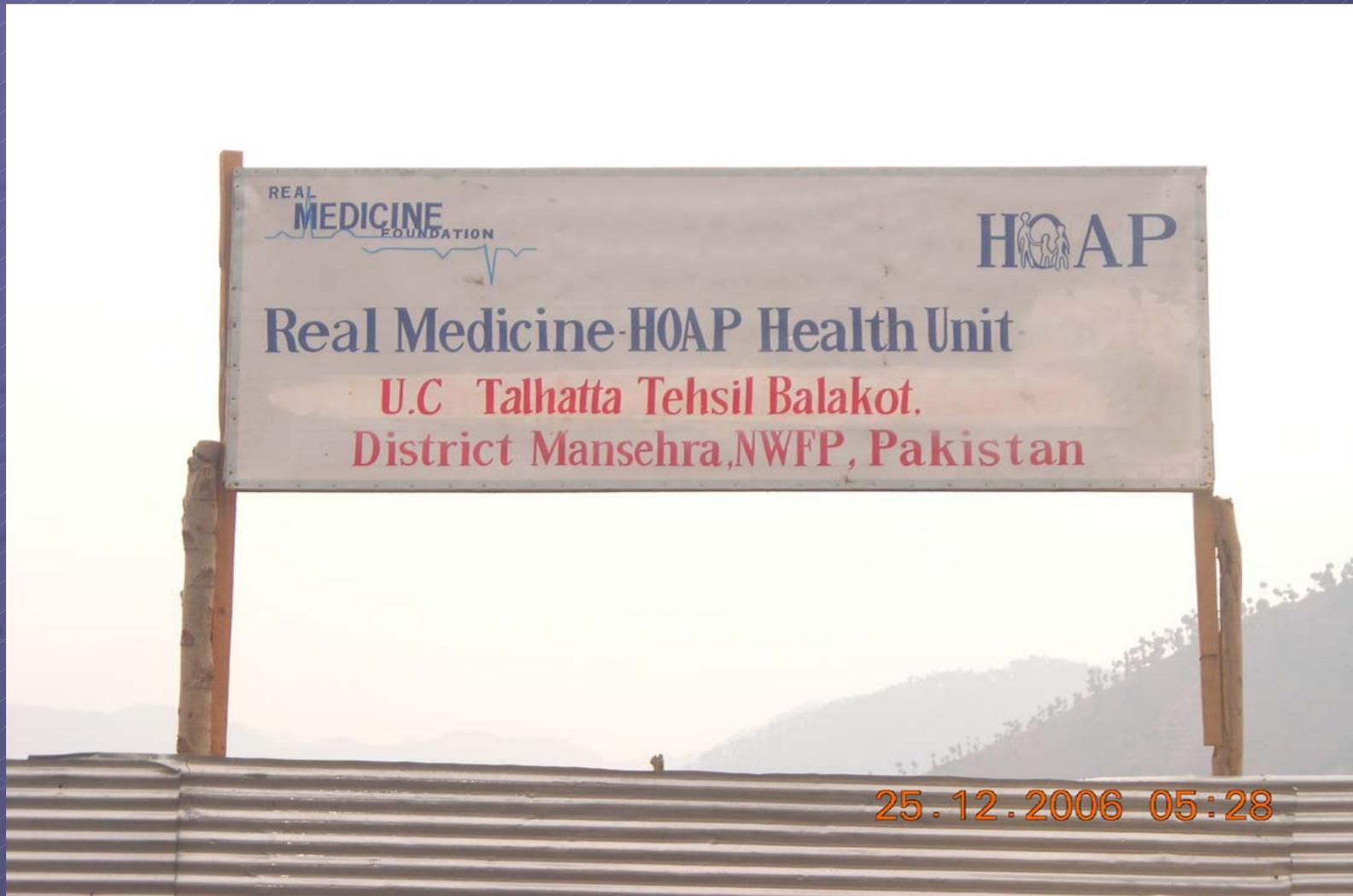
Pharmacy

4 bed ward

LHV OPD

Resuscitation room

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Edition of the main sign board

# Inauguration of the Clinic in Talhata



L-R Dr. Kifayat (Medical officer), Mr. Mumtaz Shah (landlord of location), Dr. Rubina Mumtaz, (CD, RMF Pakistan), Mr. Sajjad, (Field Coordinator, HOAP), Dr. Zahoor (Health Coordinator, RMF-HOAP), Naib Nazim of Talhata

# First stop – OPD clinic



**Meeting Dr. Kifayat**  
The OPD had an average of 30 patients daily within the first week of opening its door to the public. He expects this to double within a month since the news that a free clinic is available has spread like wildfire.

# Welcome additions to the Clinic



Dr. Kifayat is particularly happy with the addition of an ECG machine (kindly donated by Denise of 'Pay it forward'), the nebulizer and oxygen cylinders. This has enabled him to diagnose and treat some patients who would otherwise have to be referred to an RHC, the nearest being in Mansehra,

# Next stop - Pharmacy



Mr. Nazar Karim, Paramedic showing the stock ledger. A new, more efficient system of maintaining the medicine stocks has been introduced by Mr. Sajjad

# The LHV OPD



Ms Nargis



Ms Razia

The two Lady Health Visitors (LHV) are the only source of Mother Child Health care and Family Planning. Surprisingly many women come forward for birth control methods and the most common form demanded is contraceptive pills/injections. Other methods are either not popular or are unknown.

# A glimpse of the examination room in the LHV OPD

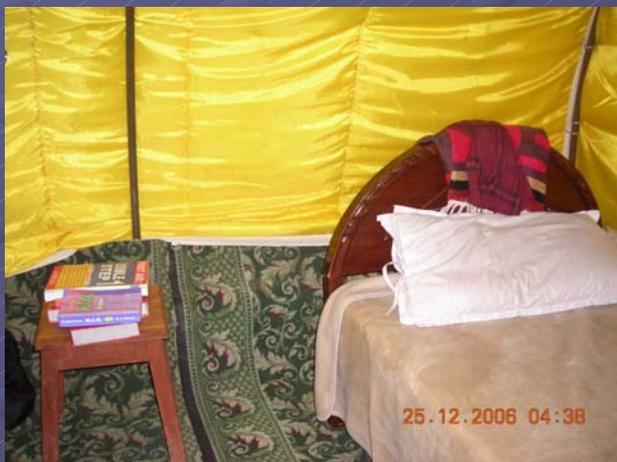


# 4-Bed Ward



The new set up has an additional structure, a 4-bed ward where patients can be kept for observation all day or overnight, if needed. This was lacking in the previous location. The beds have been kindly donated by an Islamabad based philanthropist, Mrs. Khan.

# Doctor's residences



The staff residences are comfortable and fully equipped encouraging the staff to stay for long periods of time at the camp

# LHV Residence



Keeping in mind the local cultural conventions, HOAP and RMF came to the conclusion that housing the female staff within the same camp with the rest of the staff would give rise to a potentially scandalous situation in this new place. Hence a nearby, independent residence has been rented out for the LHVs which would be shared with female staff of other projects of HOAP based in the same area.

# Outreach Community Programs

- The 8-month consolidated morbidity reports of the RMF-HOAP healthcare project indicate that there is a seasonal variation of the most commonly presented diseases, majority of which are preventable at grass root levels by simply educating of the people
- The tentative topics for the Health Education program include Hygiene, Maternal Child Health and Nutrition of Under-5 Child.
- The first phase of this outreach program was to meet with the key stakeholders in the two Union Councils.

# Meeting with the Key Stakeholders



The 6 Key Stakeholders are the Mayor, Councilors and 'Naib Nazim' (political agent) of both Union Councils, Shawal Muizullah and Talhata

# Topics of discussion

- The main discussion was the need for health education at the grass root level where the importance of hygienic living and eating condition was a first step for preventive care in the home.
- The importance of the women's exposure to this knowledge was of key importance. However gender restrictions of the local culture means that permission to access the women has to be granted by their men folk.
- The key stakeholders were assured of our intentions to simply impart health education and not to jeopardize the social gender mechanism of this area by adhering to local traditions and maintaining the 'purdah' of the women folk.
- The stakeholders were then given the task to identify at least 5 communities and conveying our intention to their elders, who would then be further given the task to select at least 3-4 women to represent each community.
- The team of women would ideally include two young semi-literate women and two elderly, respected women.
- The selected members would then participate in a training seminar to be held at the clinic camp.

# Chalking out an outline of the role of the LHV's in the Outreach Community program.



# Note of Departure

- ERRA (Earthquake Rehabilitation and Reconstruction Authority) has disallowed the construction of permanent structures. However, during summer many people left the government based refugee camps (tent villages) to live in makeshift structures over their destroyed houses.
- The bitter cold of the winter months have unfortunately forced thousands of people to move back into the tent villages.
- The government has displayed a distinct apathy in addressing this situation.

# A tent village near Talhatta



# Young residents of the tent village



# Thank you

A Special thanks to 13-yr old Abeq, our youngest volunteer of RMF, Pakistan for his contribution of the photographs in this presentation.