

Children's Pavilion

2016 **Activity** Report



**La chaîne
de l'espoir**

Ensemble, sauvons des enfants



**La chaîne
de l'espoir**

Ensemble, sauvons des enfants

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Project

The Children's Pavilion (new terminology for the Children's House programme) is a structure providing free access to the quality surgical care offered by the French Medical Institute for Mothers & Children (FMIC) for the most disadvantaged children from the 34 provinces of Afghanistan. This paediatric hospital was founded in 2005 by La Chaîne de l'Espoir, which continues today to accompany the development of the personnel's skills and the quality of care. It is an innovative approach that La Chaîne de l'Espoir initiated in 2008.

For nine years, the Pavilion has been treating children, regardless of their ethnic, social or geographical origin. Their pathology, their physical distance with the capital where all specialised medical facilities are located and the poverty of their families prevented them from accessing the specialised care they desperately needed.

More than just a reception facility, the Pavilion has a variety of functions:

- **A reference centre for referring sick children to other organisations located in Afghanistan:** with the support of a network of 23 public and private partners including the Ministry of Public Health, the International Committee of the Red Cross and of the Red Crescent, local and international NGOs, children and their families are oriented to the Pavilion of La Chaîne de l'Espoir in Kabul.
- **The Pavilion is a friendly and peaceful place managed by a multidisciplinary Afghan team:** children are accompanied, supported and cared for by a team of 21 in addition to the Afghan and French medical specialists of FMIC.
- **It is a reception and accommodation centre for the children and the people accompanying them:** all their needs are paid for during their stay in Kabul (transport, accommodation, food).

Promote access to medical and surgical care for underprivileged children from Afghan rural areas

Identify the most vulnerable children

Organise their transfer, care and follow-up

Cover 100% of all medical and social costs

Develop the programme in order to better meet children's needs

A total of **5,691 children** have benefited from this programme since its beginning. Overall, **6,404 surgeries** have been performed and more than **33,886 consultations** carried out. **The number of referred patients, outpatient consultations and surgical procedures kept on growing substantially**, proving that this programme responds to a vital need. However, every year, more than a hundred children remain on the waiting list.

Activities in 2016

3% population increase and 1.4% economic growth: Afghanistan became poorer in 2016. Afghanistan remains one of the most dangerous and violent crisis zones in the world. The Global Peace Index (GPI) ranked it third after Syria and Iraq. Taliban insurgency, spread of ISIS, unstable political environment and faltering peace talks between the Taliban and the Afghan government fail to give solace to an exhausted nation.

Afghan security forces have been sorely tested by an active and efficient Taliban insurgency in a position to assert its authority in roughly 150 of the country's 400 districts. Regular troops have lost on average 40 soldiers every day and suicide bombings have continued including in the security perimeters of Kabul, the capital city. Not to mention the deadly murderous missions of the Islamic terrorist groups, Al Qaeda and the Islamic State.

In a country hit by violence and frequent natural disasters, where life expectancy at birth remains of thirty years less than that of French standard, where 9.3 million Afghans (i.e. one third of the population) rely on humanitarian assistance, substantial development progress has however been made in the last fifteen years with a better access to health and education and the development of infrastructures. However, results remain insufficient in regard to accumulated delays and people's expectations. At the last Brussels summit in October 2016, representatives from 70 countries, opposing the fatigue dreaded by Kabul, have agreed to offer assistance and empathy.

Against such a backdrop, our teams on the ground have remained fully committed despite political uncertainties and conflicts. La Chaîne de l'Espoir and its partners (the French and Afghan governments and the Aga Khan Development Network) share the same priorities: bring hope, ensure access to specialised care for the most vulnerable populations seeking a decent life, and increase skills.

Surprisingly, despite a very deteriorated environment, adverse impacts have been limited and the main goal of the programme of the Children's Pavilion has been achieved. In August 2016, two months ahead of the scheduled date, a new larger facility intended for vulnerable young patients, women and newborns, was opened with no interruption in operations.

A. Sustained growth in activity in 2016

We addressed the challenges we had set ourselves for 2016: improve the conditions for receiving and looking after sick children and continue to treat as many needy children from the 34 provinces of Afghanistan as possible.

In 2016, this programme benefited 3,559 patients, of which 1,037 “new” children.

Children’s Pavilion	2016
Newly registered children in 2016	1,037
Surgeries	984
Consultations	4,543
Stays at the Pavilion	3,559
Number of provinces reached by the project	34/34

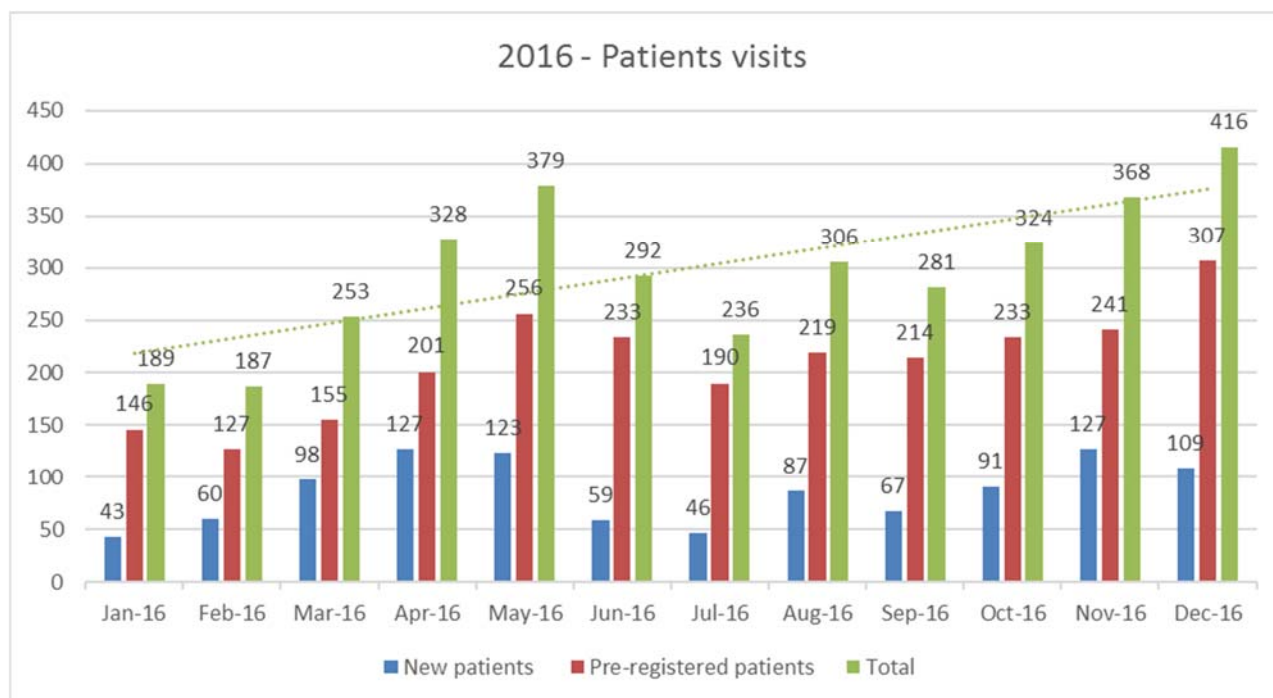
The Pavilion accommodated **300 children each month on average; 984 operations and 4,543 consultations** have been carried out as part of this programme. With an average of 82 surgeries per month, the most commonly treated pathologies related to orthopaedics (51%), cardiac surgery (24%), general and plastic surgery (21%), ENT, dental and ophthalmologic surgery.

Many children have an underlying disease when they arrive at the Children’s Pavilion. They suffer from malnutrition, tuberculosis and other conditions making an immediate operation impossible. In this case, they receive an appropriate therapy before surgery. Most of the time, they have to come back for further consultations, examinations, tests, and a second or third operation.

A patient benefits on average from six consultations and at least one surgery.

Thanks to the expansion of our network of partners, their continued efforts and dynamism, and the use of less expensive surgeries, **33% more patients were taken care of compared with 2015.**

The teams of La Chaîne de l'Espoir have taken advantage of the 2015-2016 winter lull to strengthen the partners' network dynamic with enhanced communication on quarterly results, new admission criteria (new pathologies) and development priorities for the Medical Institute. The impacts were seen as early as the spring of 2016 and the number of referred children increased rapidly. The number of children treated has remained important until year-end following a slight slowdown related to the Ramadan festivities. The average of 300 children a month has been maintained.



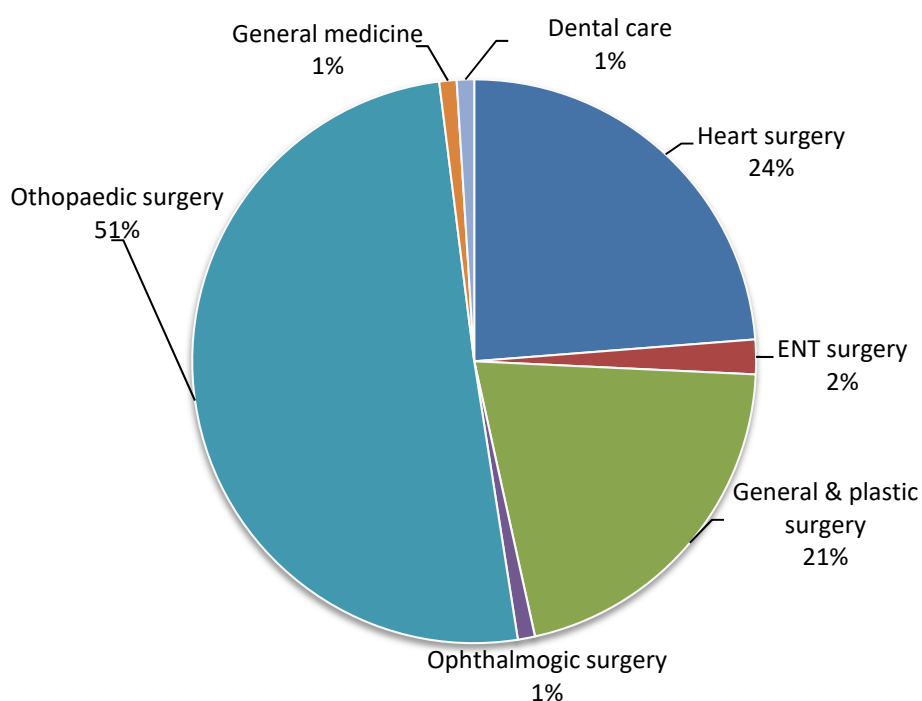
B. Promote the treatment of increasingly complex pathologies

Thanks to the Pavilion, children from remote provinces with complex pathologies which cannot be treated locally (due to lack of equipped medical structures and trained staff) are being taken care of.

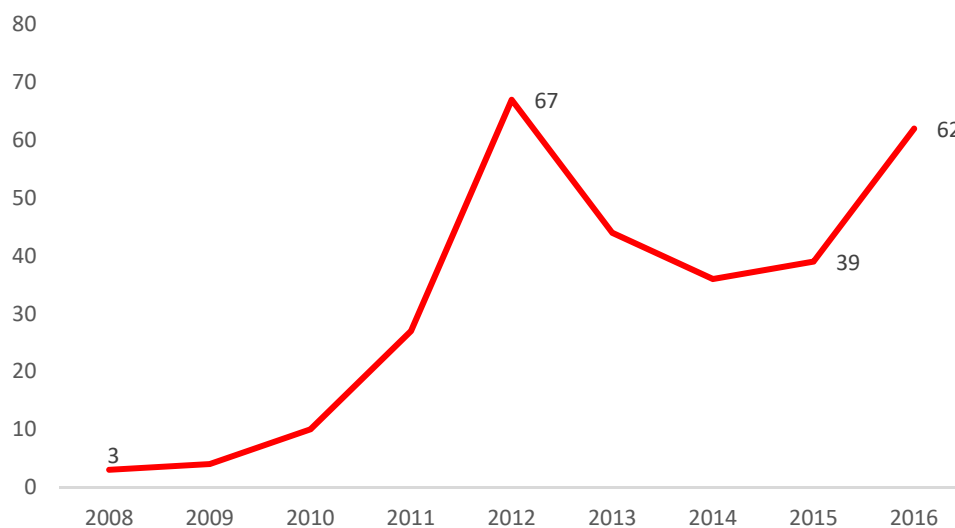
The programme's activity is closely linked with the development of the Medical Institute's Afghan personnel's skills, a process in which La Chaîne de l'Espoir is actively involved through training. Today, Afghan medical teams are more and more effective and nearing autonomy. Apart from some specialties such as interventional child cardiology, retinal surgery and complex neurosurgery depending on international missions of La Chaîne de l'Espoir, local medical teams are able to operate on patients all year round. However, complex cases that cannot be managed by the Medical Institute's medical staff are treated during specialised missions organised by La Chaîne de l'Espoir. The Pavilion's programme can thus meet larger and more complex medical needs. Pathologies managed and treated at the French Medical Institute for Children via the Pavilion's programme require so-called elective surgery, which can be scheduled in advance.

An average of 82 surgeries and 379 consultations take place every month. The most represented specialties remain **orthopaedics (51%)**, **cardiac surgery (24%)** and **general and plastic surgery (21%)** for consultation as well as surgery. Next come ENT surgery, ophthalmologic surgery, dental care and general medicine.

The chart below breaks down consultations and operations carried out by specialty.



Cardiac surgery needs have been particularly significant over the year. 62 children suffering from congenital diseases have been treated via the programme. It represents an **increase of more than 60%** relating in particular to complex open-heart surgery such as tetralogy of Fallot. **Since 2008, 292 patients have undergone cardiac surgery.**



Despite the fact that children often arrive quite late to receive surgery or therapy, the vast majority will have a chance of a normal life thanks to this programme. The mortality rate for patients who underwent surgery in 2016 remains low and the rate of immediate complication or infection following surgery is minimal.

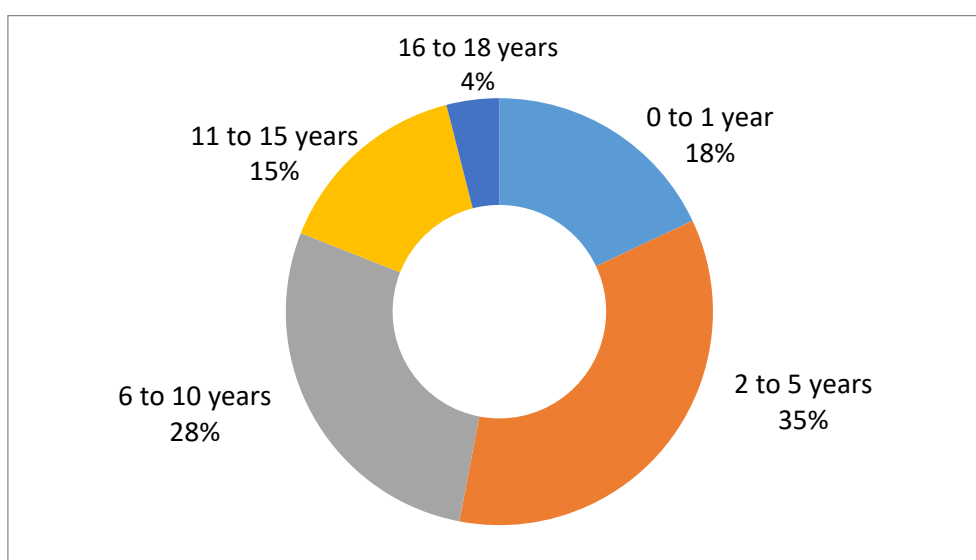
This year, **735 children were completely cured** and returned home without needing to come back to the Medical Institute. At the end of December 2016, **102 patients were on the waiting list for future missions, also due to budgetary constraints:** 10 for cardiac surgery, 58 for orthopaedic surgery, 10 for plastic surgery, 5 for ENT surgery, 17 for general surgery, 2 for ophthalmologic surgery and 5 for paediatric medicine.

C. Improved patient referral

Despite a very complex political and security environment, the network of partners has expanded and the programme's team have been mobilised to allow children from all over Afghanistan to be treated and operated on. The Pavilion welcomes children from the 34 Afghan provinces.

The increasing number of cases referred to the Pavilion shows that more and more sick children, from rural and urban areas alike, can have access to the specialised care they need from an early age.

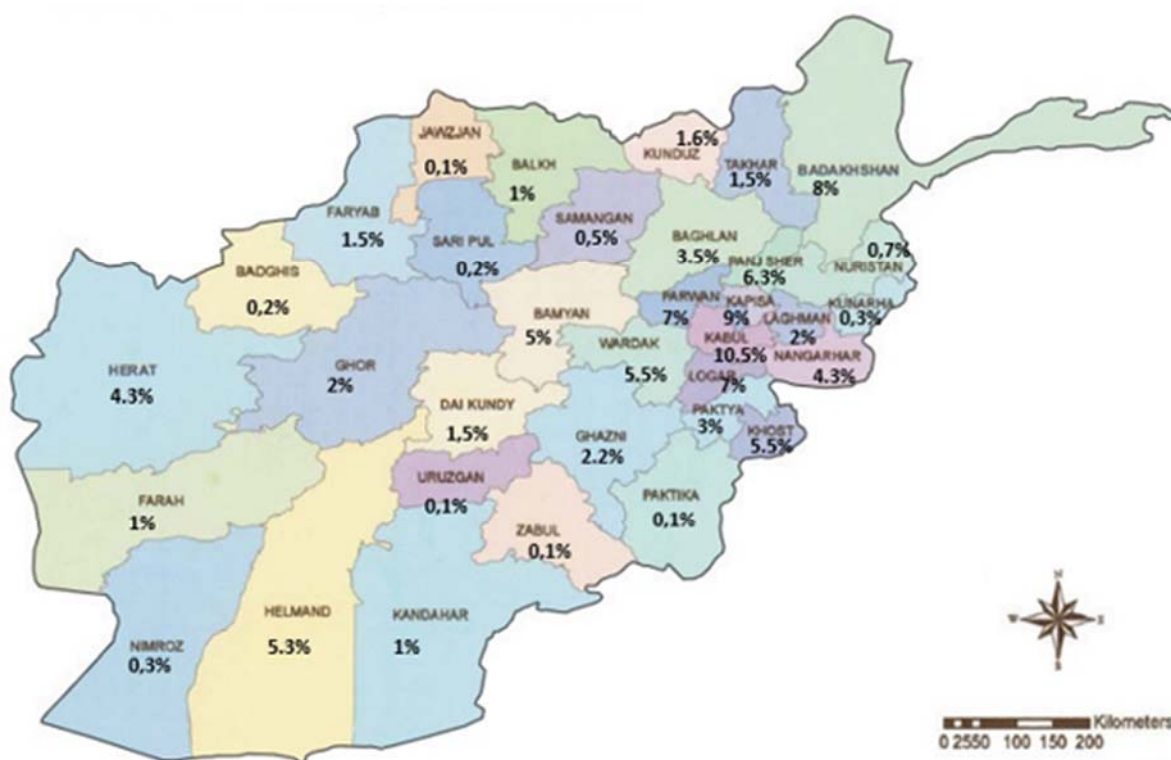
Afghanistan ranks third in the world for under-five mortality. Our efforts to increase awareness within our network have enabled us to welcome a **majority of children below the age of five: 53%** (as against 42% in 2015) and **81% of the children are less than ten years old**. The age of the patients has been decreasing steadily since 2008 proving the excellent condition of the project and the quality of referrals. This ability to care for children from an early age – **18% of patients are under age 1** – greatly improves the chances to best treat the conditions of children referred to this programme. The gender balance continues to be maintained over the years. In 2016, the ratio was as follows: **48% girls against 52% boys**.



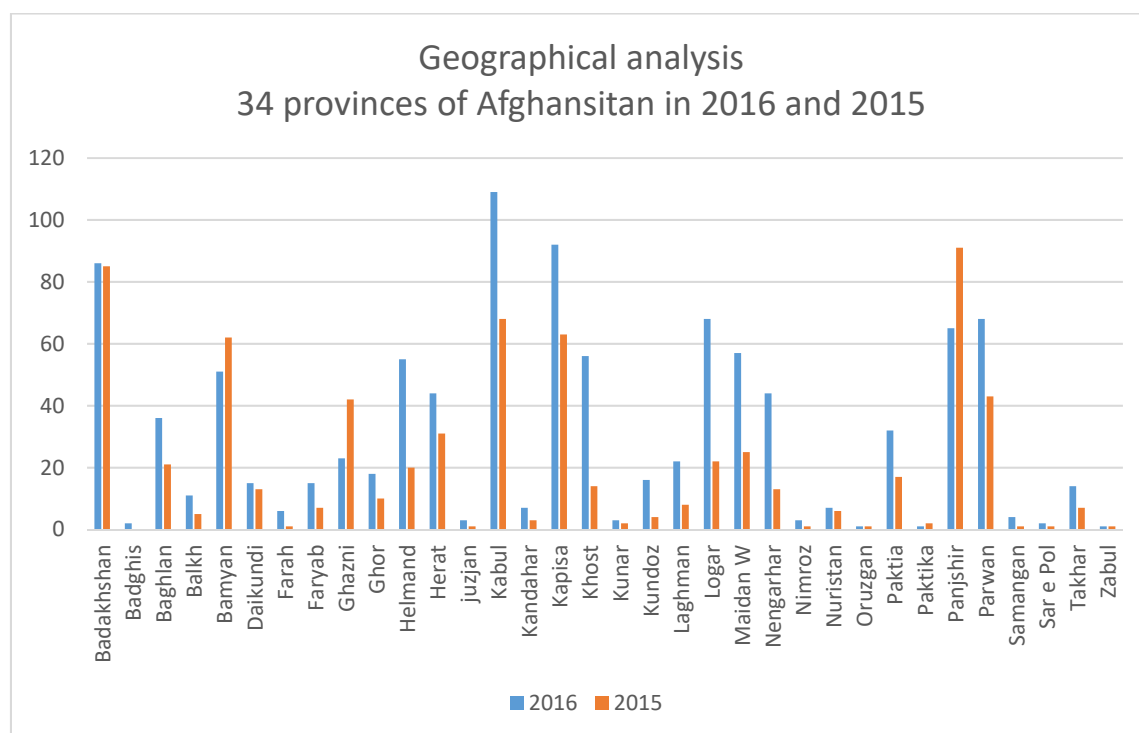
Although patients still come from a great variety of areas, **60% come from the northern half of Afghanistan and more particularly from the twelve provinces around Kabul**: Badakhshan (8%), Kabul (10%), Kapisa (9%), Parwan (7%), Khost or Wardak (5,5 %) and Nangarhar (4%).

The concentration around the capital city can be explained by a massive exodus towards Kabul (more than 700,000 Afghan refugees came back home in 2016 - International Monetary Fund).

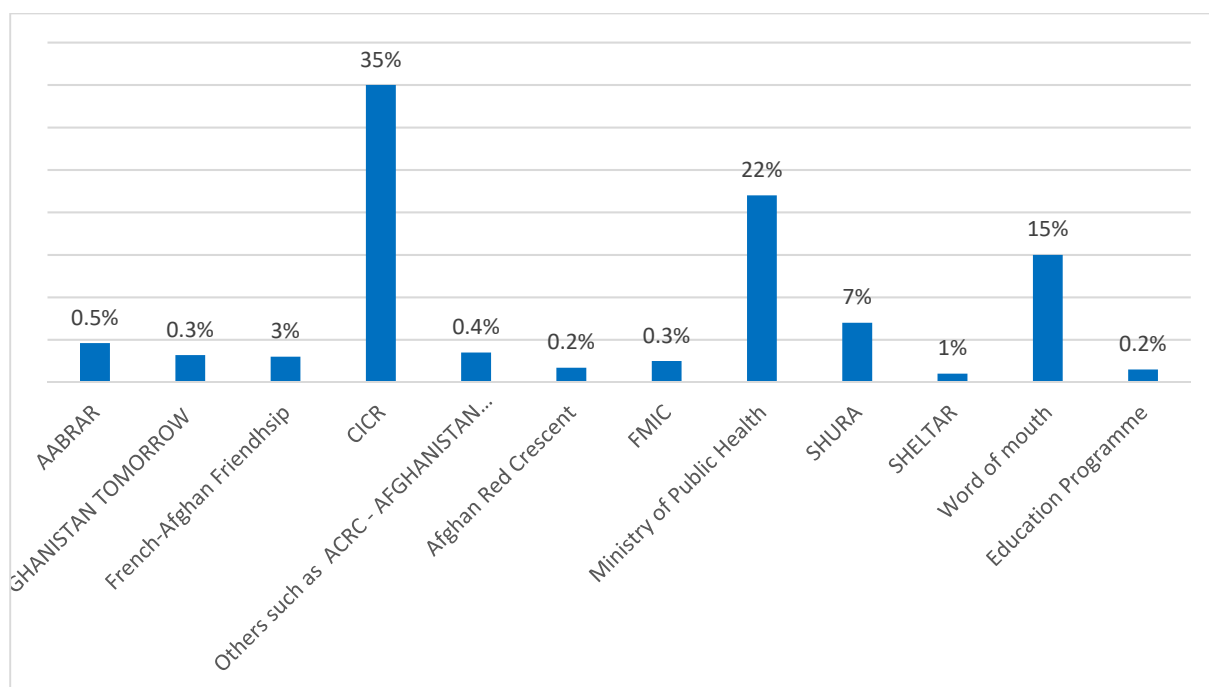
Map showing the home provinces of the 1,037 children newly referred to the Pavilion in 2016



The signature of new agreements with partners specialised in child welfare and/or health such as Terre des Hommes, Médecins Sans Frontières (Khost/Helmand), Première Urgence Internationale, have contributed to the **strengthening of our presence in some regions far from the capital such as Helmand, Kunduz, Nangarhar, Khost, Paktia, Logar, Maidan Wardak, Parwan** (as shown in the chart below, the number of referred children can be twice as high compared with 2015).



Our network already comprises **23 partners** including the Ministry of Public Health (22%) and ICRC (35%) and we have strengthened our links with awareness actions. Additionally, more and more children are referred by **word of mouth**. It accounts for **15%**, which is twice as high compared to 7% in 2015.



The expanded network is essentially comprised of local, national and international NGOs, the Committee of the Red Cross and of the Red Crescent, local health authorities (hospitals and clinics) and local organisations (Shura).

Those general trends hold with regular communication between partners and continued awareness actions.

D. Improve reception conditions for children

The Children's Pavilion opened following one year of work. In August 2016, children and their parents moved in a friendlier new structure more adapted to their needs thanks to the dynamism of the team and the involvement of the patients' parents. The Pavilion, larger and closer to the French Medical Institute for Mothers & Children, is above all a family house.



It is located on the site of the French Medical Institute for Mothers & Children. It now includes 15 bedrooms (33 beds for children, 8 for women and 4 for newborn babies) and provides numerous other benefits:

- ➔ Facilitate access to the Medical Institute where children are cared for. The new Pavilion of 1,400 m² has been built on the adjacent patch of land.
- ➔ Offer a broader range of healthcare for women and vulnerable young mothers with their infants (quality care in gynaecology, obstetrics, paediatrics and neonatology at FMIC's Mother and Child Centre).
- ➔ Offer the option to separate men from women in every part of the Pavilion.
- ➔ Improve the quality of the existing facility, include bright and comfortable areas to welcome, meet, rest, rehabilitate and work, bringing coherence to the overall design in accordance with criteria essential to the management of sick children.

- ➔ Provide a few rooms with one or two beds enabling the most fragile patients to have some private space for a quick recovery.
- ➔ Offer children pleasant playgrounds and an area devoted to fun learning inside and outside the walls of the Pavilion.
- ➔ Facilitate movement with arched galleries for easy and protected journeys (stretchers, wheelchairs, etc.)
- ➔ Provide a friendly and comfortable facility with bright spaces and simple yet high-quality materials.

The very cohesive Pavilion's team has contributed to the definition of a coherent organisation inside the new premises in the weeks following the move. The individual appropriation of space has led to the creation of a quiet environment suited for the well-being of the patients.



In addition to healthcare services, the Pavilion offers a pleasant environment for young patients and their accompanying parents.

The stay has in many positive outcomes:

- **New encounters and receptiveness to others.** In a country struck by ethnical conflicts, the Pavilion does not make any ethnic distinctions: both children and parents have the opportunity to open to others.
- **The discovery of Kabul**, since many have never left their provinces and come from very remote areas.

- **Health education for children and parents.**
- **Hygiene awareness.**

As soon as they arrive in the Pavilion, patients and their parents receive awareness information on health and hygiene. Everyone receives a hygiene kit. The health and hygiene education programme with related training tools has been postponed to the first half of 2017.



E. Difficulties experienced

- Insecurity is once again on the rise in the country, leading to difficulties in managing children's transfer schedule but also the abilities of both patients and their parents to arrive in Kabul.
- Families sometimes have to postpone their children's medical appointments due to summer harvests.
- Tough winter conditions may prevent families from traveling to the Pavilion.
- Some parents do not turn up on the agreed date for a further operation, yet scheduled in advance.
- Some parents do not give their child the medicines needed for his/her recovery.
- Some conditions require the presence of all family members for a better understanding and holistic treatment.
- Poverty has been rising over the past few years: 58.8% of the population live in multidimensional poverty, of which 16% in extreme poverty (UNDP – 2015 Human Development Index)

- The late opening of the maternity ward of FMIC in December 2016 and the progressive development of gynaecological care in mid-2017 has led us to postpone this activity.

Needs and Outlooks 2017

La Chaîne de l'Espoir will continue in 2017 more than ever to defend free access to quality specialty care for the most vulnerable children and women.

2017 will be the year of the implementation of healthcare for women and newborns. To fulfil this mission, we keep on working on the mobilisation of our local partners on patient referencing and on the development of financial partnerships and innovative funding ways in order to be able to maintain and increase the number of our patients.

Objectives in 2017

- ✓ **Progressively increase the Pavilion's reception capacity.** To achieve this, teams continually strive to develop public and private financing.
- ✓ Welcome vulnerable **women and young mothers** with their infants from across the country and give them **access to high-quality care in gynaecology, obstetrics, neonatology and paediatrics** at the future Mother and Child Centre of the French Medical Institute for Children.
- ✓ **Develop and systematise health and hygiene education programmes** for families and children.
- ✓ **Enlarge the partners network** to allow a greater number of children to benefit from this programme.

Medium and long-term outlook

The availability of additional funding would enable us to develop a more comprehensive approach better adapted to the health and psycho-social needs of women and children.

- ✓ Provide **psychological support** to the children and women hosted at the Pavilion.
- ✓ Implement **nutrition** prevention and awareness-raising measures.

2016 Financial Statements

The total expenditure for 2016 amounts to €1,057,160. It includes medical and surgical expenses (consultations, operations, intensive care, pre and postoperative follow-up, etc.), social care expenses for children and their accompanying parent (transport, meals, etc.), as well as expenses for the Pavilion's staff and operating costs.

2016 Financial Statements

2016 EXPENSE				2016 INCOME			
Purpose of the expense	2016 Budget (€)	2016 completed (€)	Variance (€)	French Embassy in Afghanistan SCAC 2016 (€) 37.48%	Private partners (€) 6.08%	CDE (equity) (€) 56.44%	Total income 2016 (€)
HEALTH CARE ACCESS PROGRAMME	720,000	754,535	34,535	333,068	62,142	359,325	754,535
Medical care (consultations, exams, surgical package) - Welfare French Medical Institute for Children	570,000	563,368		260,463	42,000	260,905	563,368
Social care (meal, transport)	150,000	191,167		72,605	20,142	98,420	191,167
HUMAN RESOURCES (local staff)	120,000	96,953	-23,047	50,000		46,953	96,953
Local staff	120,000	96,953		50,000	0	46,953	96,953
RUNNING OF THE AFGHAN CHILDREN'S PAVILION	148,000	103,614	-44,386	0	0	103,614	103,614
Operational costs (rent, maintenance, transport, consumables, etc.)	100,000	60,198		0	0	60,198	60,198
Follow-up and local coordination (2 half-time HR expats)	48,000	43,416		0	0	43,416	43,416
Sub-total	988,000	955,102	-32,898	383,068	62,142	509,892	955,102
Administrative costs 7%	69,160	66,857	-2,303			66,857	66,857
TOTAL (€)	1,057,160	1,021,959	-35,201	383,068	62,142	576,749	1,021,959

2017 Provisional Budget

The programme's provisional costs for 2017 amount to €1,061,801.

2017 EXPENSES		2017 INCOME			
Purpose of expenses	2017 Budget (€)	French Embassy in Afghanistan SCAC 2017 (€) 20%	Health Action Plan for Afghanistan (HAPA) Aga Khan Foundation French Development Agency Global Affairs Canada	CDE (fequity) (€) 61%	Total 2017 Income (€)
HEALTH CARE ACCESS PROGRAMME	852,360	200,000	204,530	447,830	852,360
Medical care (consultations, exams, surgical package) - Welfare French Medical Institute for Children	607,680	200,000	204,530	203,150	607,680
Social care (meal, transport, consumables, etc.)	244,680	0	0	244,680	244,680
HUMAN RESOURCES (local staff)	114,817	0	0	114,817	114,817
Local staff	114,817	0	0	114,817	114,817
RUNNING OF THE AFGHAN CHILDREN'S PAVILION	25,160	0	0	25,160	25,160
Operational costs (maintenance, transport, consumables, etc.)	25,160	0	0	25,160	25,160
Sub-total	992,337	200,000	204,530	587,807	992,337
Administrative costs 7%	69,464	14,000	0	55,464	69,464
TOTAL (€)	1,061,801	214,000	204,530	643,271	1,061,801

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Acknowledgements

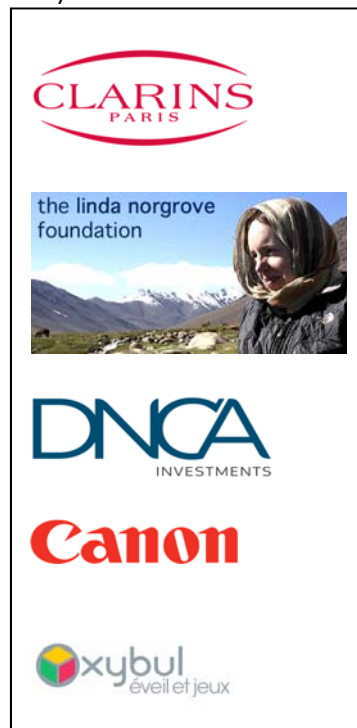
We thank our partners for their commitment and support in 2016.

Financial support

- The Cooperation and Cultural Action Department of the French Embassy in Afghanistan
- Agence Française de Développement (French Agency for Development)
- Linda Norgrove Foundation
- DNCA Finance
- Merymu Funds
- Canon
- Clarins
- Private donors



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In-kind donations (toys, clothes, decorative items)

- Oxybul
- The missionaries of La Chaîne de l'Espoir



Appendices

Appendix 1 - Children treated at the Pavilion in 2016

Ferdaws, 6 years old, starts running again with his friends

Ferdaws comes from the Baghlan province and was referred to the Children's Pavilion by the Afghan Ministry of Public Health for a complex congenital heart condition called tetralogy of Fallot.

With the help of the Pavilion, Ferdaws had open heart surgery during a mission by Dr. Bina.

The total cost of his operation amounted to \$3,440, a sum that Ferdaws' family of 7 (his parents, 3 sisters and 1 brother) would only earn in several years. Ferdaws' father is a mechanic earning 5 dollars a day. The Children's Pavilion's support was essential.



After surgery

Sajad, 3 years old, his heart is beating again and he is in great shape

Sajad comes from the Sajad province and was referred to the Children's Pavilion by the Afghan Red Crescent for a congenital heart condition called ventricular septal defect.

With the help of the Pavilion, Sajad had open heart surgery during a mission by Dr. Bina. He will be able to resume his normal life and continue growing.

The total cost of his operation amounted to \$2,968, a sum that Sajad's family of 5 (his parents, 2 sisters and 1 brother) would only make in several years. Sajad's father is a farmer living on 3 dollars a day. The Children's Pavilion's support was essential.



After surgery

Zahra, 6 years old, his heart won't skip a beat again

Zahra, a native from the province of Ghazni, was referred to the Children's Pavilion by the Minister of Public Health for patent ductus arteriosis, a condition wherein her ductus arteriosis failed to close after birth.

With the support of the Pavilion, Zahra was operated on during a mission by Dr Bina. She had heart surgery consisting in closing the ductus arteriosis.

The total cost of her operation amounted to \$1,109, which corresponds to several years of salary for Zahra's family of 10 (her parents and 7 brothers and sisters). Zahra's father is a handler earning 3 dollars a day. The Children's Pavilion's support was essential.



Aminullah, 6 years old, will be frolicking naturally

Aminullah, a native of the Daikundy region, was referred to the Children's Pavilion by the International Committee of the Red Cross of Afghanistan, due to a crippling club foot.

The 6-year old boy arrived with his parents following hours of travel. His family of five is very poor and relies entirely on the father, a farmer whose salary does not exceed 4 dollars a day.

Aminullah was successfully operated on by the orthopaedic surgery team of the Medical Institute. His whole family is relieved and grateful for all the support provided by the Children's Pavilion. Follow-up appointments have been scheduled to make sure he has fully recovered. Total medical and social costs amounted to €526. Supporting this operation was vital.



Malika, 14 years old, is smiling again

Malika was brought to the Children's Pavilion by her parents. She was suffering from a cleft lip, a malformation of the lower face commonly called "harelip".

The day after her arrival at the Pavilion, Malika was examined by the plastic surgery team of the Medical Institute and operated on two days later.

Her operation went very well and her cleft-lip is now but a distant memory.

The total cost of medical and social care amounted to \$612 which corresponds to several months of her fathers' salary, a farmer who has to provide for 9 people with \$4 a day.



Ekhkula, 6 months old, went back home with a brand-new heart

6-month-old Ekhkula is a little girl who suffered from patent ductus arteriosus, a congenital heart disease.

She was referred to the Children's Pavilion by the Ministry of Public Health's services in Nangarhar, her home province. Ekhkula was operated on by the Medical Institute's cardiac surgery team.

Heart surgery is often a serious and expensive procedure. The total cost of medical and social care amounted to \$1,280 for Ekhkula and her family. It corresponds to several tens of the monthly income of her father, who is the only one providing for this family of 4 with only \$3 a day.



Safetullah, 7, dares smile now

Safetullah is a 7-year-old boy born with a cleft lip.

He was referred to the Children's Pavilion by the Ministry of Public Health's services of Ghazni, his home province. Safetullah was operated on by the Medical Institute's plastic surgery team.

The total cost of medical and social care amounted to \$574 for Safetullah and his family.

It corresponds to several tens of the monthly income of his father, who is the only one providing for this family of 9 with only \$3 a day.

After surgery, Safetullah's parents are very grateful for the Children's Pavilion's help without which their son could not have been cared for.



Appendix 2 – 2016 Press review

French and international media

In 2016, the growth of La Chaîne de l'Espoir's activities in Afghanistan were widely covered by the media.

- **Afghan News, 14 March 2016**
- **Kabul Tribune, 14 March 2016**
- **Khaama Press, 14 March 2016**
- **Middle East Press, 14 March 2016**
- **South Asian Time, 14 March 2016**
- **Tolo News, 14 March 2016**
"6 medical specialists graduated from the post-doctoral training of FMIC".
- **AKIpress, 21 March 2016**
"The University of Central Asia hosts a presentation on innovative four-way partnership between the government of Afghanistan, the government of France, AKDN and La Chaîne de l'Espoir."
- **Kabar.kg, 21 March 2016**
"Increasing access to quality health care in Central Asia through effective private-public partnerships."
- **South Asian Time, 25 May 2016**
"Countdown to 2015: a future of hope for Afghanistan"
- **Partner hospital, November 2016 - Interview with Eric Cheysson**
- **The Kabul Times, 6 November 2016**
"FMIC celebrates 10 years of saving lives in Afghanistan"
- **L'Humanité Dimanche, 17 November 2016**
"Giving birth in Kabul"
- **La Croix, 19 November 2016**
"Giving birth in Kabul"
- **RTL, RTL Weekend, Odile Pouget, 19 November 2016**
"The health situation in Kabul is in dire strait. Opening of FMIC's maternity ward"
- **France Inter, Interception, Vanessa Descouraux, 20 November 2016**
"Birth of a maternity ward: Giving birth in Kabul"
- **La Gazette du Laboratoire, 1 December 2016**
"Pure water for the French hospital of Kabul - Dow Water & Process solutions' technologies accept the challenge"
- **Filtration + Separation.com, 8 December 2016**
"Dow technologies to provide fresh water to Kabul hospital"
- **Techno Aqua, 20 December 2016**
"Dow Water & Process Solutions suministra agua potable al hospital francés en Kabul"

Institutional websites

- French embassy in Kabul
"The Ministry of Foreign Affairs receives the French Ambassador in Kabul to bid him farewell"
"France in Afghanistan - Development - Health"
"Doctor Najeebullah Bina receives the insignia of the National Order of Merit"
- Ismaili Worpress
"Afghanistan's Embassy in USA publication profiles the French Medical Institute for Children"
"French Medical Institute for Mothers and Children celebrates 10 years of saving lives in Afghanistan"
"Doctor Najeebullah Bina receives the insignia of the National Order of Merit"

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- La Chaîne de l'Espoir
[Presentation of projects in Afghanistan](#)
[Medical training](#)
[Presentation of the Children's Pavilion project](#)

Appendix 3 – The French Medical Institute for Children in short: a sustained growth

In 2016, FMIC continued its mission by providing quality health care and contributed to strengthen the skills of local health players.

Several achievements have marked the year 2016:

- ✓ 4,492 consultations were conducted via the “E-Health” connected programme of FMIC.
- ✓ 50,837 patients have benefited from charitable funds designed to help vulnerable people.
- ✓ Implementation of the first cardiac surgery of abdominal aortic aneurysm.
- ✓ Implementation of the first orthopaedic surgery by Interlocking of Tibia Fracture.
- ✓ The sixth international conference of FMIC was attended by 300 participants and 90 printed presentations were distributed.
- ✓ The sixth convention on patient quality and safety presented 36 quality projects to more than 200 participants.
- ✓ FMIC celebrated its tenth anniversary in the presence of the Ministry of Public Health, diplomats and members of international organisations.
- ✓ Beginning of the maternity services at the end of November. FMIC welcomed “Helia”, first baby born at FMIC.

Despite challenges in terms of security and the decrease in the financing of the patient charity fund, FMIC managed to meet most of its objectives and continue to grow.

ACTIVITY VOLUME OF THE FRENCH MEDICAL INSTITUTE FOR CHILDREN IN 2016

6,125	admissions
2,165	surgeries (cardiac excluded)
282	cardiac surgeries (238 paediatric cases/44 adult cases)
128,096	consultations
366,985	laboratory procedures
64,338	radiology procedures (IRM, CTScan, ultrasound...)

2016, CHRONOLOGY OF AN EXCEPTIONAL YEAR

28 January	Interventional cardiology, the Afghan team carries out its first angioplasty.
6 March	First graduation ceremony for the postgraduate training programme
8 August	Opening of the Children’s Pavilion
7 September	Opening of gynaecology-obstetrics consultations at the Mother and Child Centre
3 November	10th anniversary of FMIC
5 November	Inauguration of the Children’s Pavilion
14 November	Opening of the neonatology department at the Mother and Child Centre
21 November	Opening of the obstetrical technical platform
23 November	Birth of the first baby

1. Patient satisfaction

The 2016 good results show that in spite of a complex climate, the Medical Institute’s entire staff was committed to best meet patients’ needs. A survey carried out among hundreds of patients (in and outpatients) throughout the year shows that satisfaction sits at an average of 87 to 94%.

Performance over the last 10 years

BACK ON 10 YEARS OF ACTIVITIES IN PAEDIATRIC MEDICINE AND SURGERY

846,345	consultations
46,371	hospitalisations
20,310	surgeries of which 2,440 cardiac surgeries

- ✓ FMIC provided health care to 892,716 patients from all over Afghanistan (consultations and ambulatory).
- ✓ In terms of diagnosis, FMIC carried out 2.8 million laboratory tests and 511,000 radiology procedures.
- ✓ First ISO-certified hospital in Afghanistan since 2009, FMIC is now working towards JICA certification (Joint Commission International Accreditation).
- ✓ FMIC was the first hospital in Afghanistan to carry out open and closed heart surgeries; more than 2,400 cardiac surgeries have been performed over the last 10 years.
- ✓ FMIC is a training centre for doctors, nurses and other staff members in Afghanistan. About 1,900 health professionals from various hospitals were trained at FMIC.
- ✓ FMIC is constantly improving and expanding its telemedicine and cyberhealth programme, benefiting more than 23,000 patients every day.
- ✓ FMIC is the only hospital in Afghanistan with a high-technology CT scan (128 slices) operated by qualified radiologists. The FMIC radiology department is also the first one in Kabul to provide cardiac angiography.
- ✓ The qualified pathologists of FMIC's laboratory have performed more than 900 tests. The laboratory is affiliated with the Aga Khan Teaching Hospital in Karachi (Pakistan) and boasts expertise in microbiology, haematology, cytopathology, serology and biochemistry.
- ✓ FMIC has launched a programme of postgraduate medical training in seven disciplines: paediatric medicine, paediatric surgery, anaesthesiology, paediatric orthopaedics, paediatrics, cardiology, pathology and radiology. There are currently 53 residents.
- ✓ FMIC has recently started a number of new services such as neurology, psychology, vision, dental care and adult cardiac care with a cardiac catheterisation laboratory.

2. Long-term objectives

FMIC has many ambitious expansion plans. After a world-class Mother and Child Centre fully operational since the end of 2016, the next step will be to have enlarged medical facilities including a tertiary care centre with 250 to 400 beds for adults in most of the medical subspecialties. The facility will be built on land adjacent to FMIC main hospital.

FMIC should play an essential role in the years to come as a medical and tertiary teaching hospital of excellence and a regional reference centre.