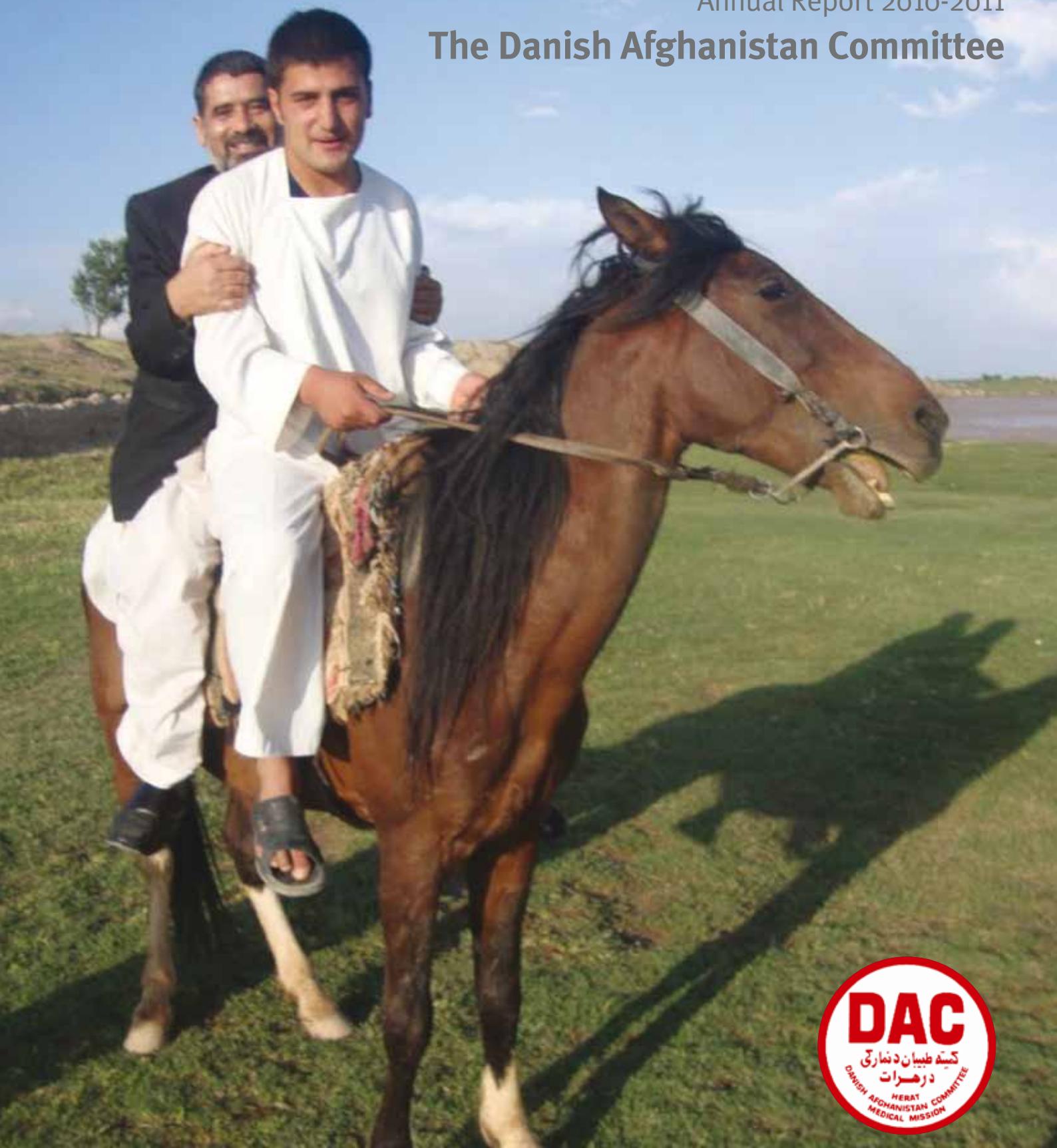


Årsberetning 2010-2011
Den Danske Afghanistan Komité

Annual Report 2010-2011
The Danish Afghanistan Committee



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Årsberetning 2010-2011
Redaktion: DAC København
Foto: DAC Herat

Forsidebillede: Farmaceut Bashir Ahmad Salehi
(og rytter) på supervisionsbesøg på hesteryg

Grafisk design: Klavs Christensen

Print: XL Print

Annual Report 2010-2011

Editorial Staff: DAC Copenhagen

Photos: DAC Herat

Cover Photo: Pharmacist Bashir Ahmad Salehi
(and rider) on a supervision visit by horse

Graphic Design: Klavs Christensen

Print: XL Print

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Formandens beretning

Det forløbne år - 2010-2011 - har været præget af gode resultater for Den Danske Afghanistan Komité (DAC), men der har også været problemer omkring sikkerheden og komitéen har ulykkeligvis mistet en af sine afghanske ansatte på grund af en vejsidebombe.

Den forbedring i sikkerheden, som prægede det meste af 2010, er ikke fortsat i 2011. En mere indgående analyse af, hvad der ligger til grund herfor, kan ikke foretages på nuværende tidspunkt. I områder af de to distrikter Obeh og Pashtoon Zarghoon har der været bevæbnede mænd - nogle på gennemrejse - der har skabt problemer. Myndighederne har grebet ind med større eller mindre intensitet. Arbejdet ved Gozarah Distrikthospital og klinikkerne, heriblandt de to store klinikker i Obeh og Pashtoon Zarghoon, har dog kunnet fortsætte. Det har derimod i en periode været nødvendigt at indstille arbejdet med de mobile teams på grund af sikkerheden.

En af vores afghanske ansatte omkom på tragisk vis i august måned sammen med andre afghanere som følge af en vejsidebombe. DAC har støttet den efterladte enke økonomisk og har endvidere tilbudt hende arbejde i vores projekt, så hun får en bedre chance for at forsørge sig selv og sine seks børn – et tilbud, hun har taget imod.

Usikkerheden i Afghanistan, der blev forstærket af den vanvittige afbrænding af koraner iværksat af en rabiat præst i Florida og som betød et blodigt overfald på FN-ansatte i Mazar-i-Sharif, indebar, at DAC måtte træffe nogle særlige sikkerhedsforanstaltninger, heriblandt at vores projektdirektør Inge-Lise Aaen og projektadministrator Sumitra Mukherjee i en periode måtte forlade deres post. Uroen i Herat blev heldigvis begrænset.

Den gradvise overdragelse af ansvaret for sikkerheden fra de internationale (primært italienske) styrker til den afghanske hær og politi blev iværksat i Herat den 21. juli 2011. Det foregik ceremonielt på et beskedent niveau, og der har ikke været meddelelser om sammenstød i den forbindelse. Taliban har et par gange sendt selvmordsbomber ind i Herat, angiveligt fra Pakistan, for at destabilisere byen, men de fleste af disse er blevet pågrebet af myndighederne. Vi kan ikke forudsige, hvordan udviklingen vil blive i den kommende tid. Vi vælger som altid at lade sikkerheden gå foran andre hensyn, også selvom vi i en periode må skrue ned for nogle af aktiviteterne.

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”

As always we let security of our staff be the predominant consideration even though we may have to reduce some activities temporarily.

Words from the Chairman

Year 2010-2011 has been successful for the Danish Afghanistan Committee (DAC). Security, however, has been less satisfactory and DAC has lost an Afghan staff member, who in July along with other civilians tragically was killed due to a roadside bomb.

The improvements in security that took place in the Herat Province during 2010 thus did not continue in 2011. No attempt shall be made in this report of a more thorough analysis of the causes of this development. In parts of the districts armed men, some in transit, have caused problems. The authorities have intervened with more or less force. The activities at the clinics, including the two major ones in Obeh and Pashtoon Zarghoon, have continued, but it was considered necessary to discontinue the mobile teams for a period of time. As mentioned above, unfortunately one of our Afghan staff members died due to a road-side bomb. DAC has supported the widow economically and employed her in the organization, so that she will be able to provide for herself and her six children. The insecurity in Afghanistan was reinforced in the spring of 2011, due to a burning of the holy Qur'an by an extremist priest in Florida. This caused an uprising and attack on UN-staff members in Mazar-i-Sharif, some of whom were killed. Due to this episode, DAC decided to take some special precautions including the project director and the project manager departing Herat for a while. The turmoil in Herat, luckily, was only for a limited period. The gradual transfer of responsibility as regards security from ISAF to the Afghan authorities was initiated in Herat July 21 at a low key level and without particular trouble. Taliban has repeatedly sent suicide bombers into Herat, apparently from Pakistan, to destabilize the city, but most of them have been apprehended by the authorities. We cannot predict the development in this field, but as always we let security of our staff be the predominant consideration even though we may have to reduce some activities temporarily.

As regards our Afghan staff, which constitutes the predominant part of DAC's employees, they are doing a fine, competent and committed job. The biggest staff challenge is the fact that some of the major international organizations are offering very high local wages. I consider this an irresponsible policy, not sustainable considering the situation and the future of Afghanistan. We cannot compete with such wages and thus from time to time some of our good staff members leave DAC for such higher wages. We try to handle this challenge by offering our staff the best possible working conditions and additional training in Afghanistan or nearby countries. DAC has therefore sent three doctors for a medical course in India this spring.

New initiatives have been taken, i.a. three nutrition clinics for undernourished children in cooperation with World Food Programme (WFP) and construction supported by the Italian Provincial Reconstruction Team (PRT). These clinics have been set up in relation to the DAC Baby Well Clinics, developed with support from consultants sent

“

Omkring 27.000 landsbybeboere i de 49 landsbyer, hvor borerne har fundet sted, har fået glæde af ”sikkert vand”.

”

27.000 persons in the 49 villages now have access to ”safe water”.

indenfor vores budget. Vores tilgang til denne problematik er, at vi prøver at behandle vore ansatte så godt som muligt og f.eks. tilbyde dem videreuddannelse i Afghanistan eller i nærliggende lande. DAC har således i forsommeren 2011 givet tre læger mulighed for at deltage i kurser i Indien.

Indenfor sundhedsprojektet, er der taget en række nye initiativer. Blandt andet er der i samarbejde med World Food Programme (WFP) og det italienske Provincial Reconstruction Team (PRT) blevet åbnet tre ernæringsklinikker for underernærede børn. Dette er et initiativ, der sker i tillæg til DAC's Baby Well Clinics. Det er blevet meget positivt modtaget og udviklet, ikke mindst med støtte fra konsulenter udsendt fra Danmark. Der vil utvivlsomt blive behov for en yderligere indsats på børne- og ernæringsområdet som bidrag til at reducere børnedødeligheden og samtidig se til, at flere børn kan vokse op på den – efter forholdene – bedst mulige måde. DAC har også høstet fine resultater og ros for en effektiv indsats i kampen mod tuberkulose.

Hvad angår den sundhedsfaglige udvikling i øvrigt i det forløbne år henviser jeg til medlemsorienteringerne samt andetsteds i denne årsberetning. DAC har, som det vil fremgå, trods en del vanskeligheder således også i de forløbne 12 måneder kunnet yde en omfattende sundhedsorienteret indsats i overensstemmelse med egne samt de afghanske sundhedsmyndigheders målsætninger. Herunder, at aktiviteterne skal tjene som forbillede for det øvrige Afghanistan. Det sidste skønnes særliges vigtigt i et land med mange og store udfordringer på sundhedsområdet.

Vandprojektet er nået til sin slutfase. I alt blev det takket være indsamlingen ”Vand mod Krig” i samarbejde med Politiken til 49 brønde – heraf 45 med håndpumper, 3 med dieselgeneratorer og én med en pumpe drevet ved solenergi. Omkring 27.000 landsbybeboere i de 49 landsbyer, hvor borerne har fundet sted, har fået glæde af ”sikkert vand”, bl.a. til gavn for nedbringelse af antallet af diarrétilfælde.

Angående kvindekollegiet i Herat kan det oplyses, at søgningen er større end nogensinde, og at der for tiden er venteliste. Vi siger tak til de mange medlemmer, der bidrog i et interval, hvor vi manglede finansiering. Vi har efterfølgende fået tilladelse af Udenrigsministeriet (Danida) til at overføre ubrugte midler fra sidste års budget til kollegiet, ligesom vi har opnået, at der lokalt skaffes økonomiske midler på forskellig vis. Indtil videre er driften derfor sikret året ud. Det er bestyrelsens holdning, at vi vil forsøge at finde grundlag for videre drift også i det kommende år.

Hvad fremtiden angår, så er det økonomiske grundlag tilvejebragt ved bevilling fra Udenrigsministeriet. I første omgang har vi fået bevilling frem til januar 2012 med en mundtlig tilkendegivelse af, at vi kan forvente støtte frem til 2014. Der skal af praktiske grunde søges år for år, når der er tale om en humanitær indsats.

DAC har endvidere været i dialog med Udenrigsministeriet om fremtiden. På ministeriets



Formand Viggo Fischer / Chairman Viggo Fischer

from Denmark. These initiatives have been met with much goodwill. We expect a continued and increasing demand for further initiatives concerning nutrition with the aim of reducing infant and children mortality, and to let more and more children have the chance of growing up the best possible way under the prevailing conditions.

For further details concerning the DAC health activities for the past 12 months I refer to the specific chapter in this report. All in all, DAC has been able to carry on and expand its activities according to both our own and the Afghan authorities' guidelines in spite of certain difficulties related to the general situation in the province. Furthermore, it is the aim of DAC that our district health system should serve as an inspiration for similar activities in other parts of the country.

Concerning the future activities, DAC is continuously supported by annual grants from the Danish Foreign Ministry through the department of development activities (Danida), and this support is expected to continue up to early 2014. A so-called “assessment” is at present being undertaken as a joint effort by the Ministry and DAC concerning the possible future role of DAC in Afghan health activities.

The water project made possible by contributions from the readers of the Danish newspaper Politiken has reached its completion. All in all 49 wells were dug, 45 of them with hand pumps, 3 with diesel engines and one that runs on solar power. 27.000 persons in the 49 villages now have access to ”safe water”. This has already had the proven effect of less diarrhea cases.

Concerning the Female dormitory, supported by DAC, it should be mentioned that this has become very popular, fully occupied and there is now a waiting list. We thank those members of DAC who have contributed the running of the dormitory. The Danish Foreign Ministry has agreed to transfer some unused funds for the benefit of the

initiativ er der iværksat en såkaldt "assessment" vedr. mulighederne op til og efter 2014. Assessment vil sige en vurdering af, hvilken rolle DAC kan spille i det afganske sundhedssystem fremover. Vurderingen, der er i gang på tidspunktet for færdiggørelse af årsberetningen, finansieres af Udenrigsministeriet og udføres af en afgansk ekspert med opbakning fra DAC af bestyrelsesmedlem, læge og konsulent Ole Frank Nielsen, der siden 1995 har været involveret i sundhedsarbejdet i Afghanistan. Medlemmerne vil senere blive orienteret om resultatet af denne proces, der nu er sat i gang og som kan have indvirkning på tilrettelæggelsen af de følgende års arbejde.

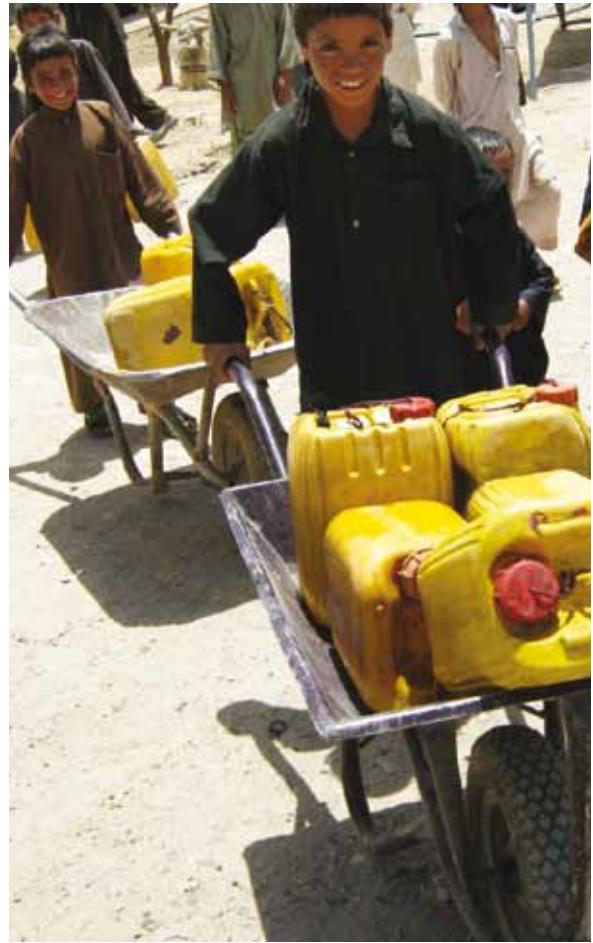
På sekretariatet i Valby er der sket et par ændringer i årets løb. I april gik DAC's projektkoordinator, Mingo Heiduk Tetsche, på barsel og overlod stolen til Karen Høgh, cand.scient.soc., der varetager posten som projektkoordinator frem til februar 2012. Nu i oktober vender studerende ved international virksomhedskommunikation på CBS, Stine Dechmann, endvidere tilbage til arbejdet som projektassistent. Hun forlod stillingen samme tid sidste år for at gå på barsel. Vi siger mange tak til sociologistuderende Julie Jeeg, der med stort engagement og indsigt har vikarieret for Stine i det forløbne år.

Som det er beskrevet i det ovenstående, er situationen i Afghanistan som helhed præget af betydelige sikkerhedsmæssige problemer. Perspektivet er som bekendt samtidig, at den afganske regering fra 2014 selv skal stå for ansvaret for sikkerheden. Om dette er muligt vil tiden vise, og det vil nok også i høj grad afhænge af, om indblandingerne udefra (bl.a. med de såkaldte selvmordsbomber) kan nedbringes. Landet plages fortsat af korruption, især på centrale plan, hvilket i det forløbne år blandt andet kom til udtryk ved de problemer, der opstod omkring landets største bank, der var ved at krakke. Det er en ringe trøst men desværre en kendsgerning, at sådanne forhold er velkendte i skrøbelige stater.

For DAC's vedkommende gælder det, at vi ikke forholder os til de politiske spørgsmål. For os drejer det sig om, at forholdene, hvor vi arbejder, gør det muligt at gennemføre sundhedsarbejde, der kan give befolkningen, især børnene, en varigt bedre fremtid. Vi har i Herat-provinsen et nært samarbejde med de regionale og lokale myndigheder, som det også kommer til udtryk i det budskab, som kan læses andetsteds i denne beretning af Dr. Rashed, direktør for det regionale sundhedsministerium i Herat.

Vedrørende indsatsen for medlemernes bidrag kan det oplyses, at DAC fortsat støtter en syskole i Herat, der siden syprojektets start i 2007 har uddannet 7 hold – hver med omkring 20 afganske kvinder. Kvinderne uddannes til at sy toj m.m. til at dække familiens behov, mens de tillige i nogle tilfælde får et ekstra udbytte af syarbejdet ved salg af det færdige toj og øvrige tekstiler.

Afslutningsvis vil jeg gerne rette en varm tak til vore afganske ansatte for deres ihærdige indsats. Det samme gælder vores projektdirektør og projektadmindistrator. Ligeledes tak til vore medlemmer, sam-



Vand transportereres fra landsbybrønden og hjem til familien.

Water is transported from the local well to the family.

dormitory to assure the continued running throughout 2011. The DAC board is determined in cooperation with the Afghan authorities to try and find the basis for continued funding also in 2012.

Overall, the situation in Afghanistan is difficult to describe in a few words. It is a well-known fact that there are still serious safety problems in several parts of Afghanistan. At the same time, the process of handing over responsibility for safety from ISAF to the Afghan authorities have started in a number of provinces, beginning in a relative calm way in i.a. Herat Province. The country is afflicted by corruption, especially at the central level. During this past year, the corruption issue has been visible through the problems that threatened a major Afghan bank.

DAC does not take position on the political issues, however. Our priority has always been acceptable working conditions in the parts of the country, where we operate trying to ensure the population, especially the children, a prosperous future. The development in Herat Province proves that a close cooperation with the NGOs and the local Afghan authorities is fruitful in order to obtain results. We refer to the message in this report by Dr. Rashed, Director of the Regional Ministry of Public Health.

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arbejdspartnere og donorer, uden hvis støtte DAC's resultater ikke var mulige. Dette gælder blandt andre MultiCenter Syd og Bendix Transport, der tager sig af DAC's indsamlede materiale, når det sendes i containere til Herat. En særlig tak skal gå til det danske flyvevåben og til mandskabet i Helmand i forbindelse med transporten af det nye røntgenapparat til Herats lufthavn. De fortsatte økonomiske bidrag samt donationer i form af medicin og beklædning gør det muligt for DAC at yde en ekstra indsats udover det officielle projekt og at give indsatsen en social vinkel til gavn for særligt udsatte grupper. Værdifuldt medicinsk udstyr fra danske sygehuse, formidlet af Elin Petersen, betyder, at kvaliteten af behandlingen kan forbedres, og at blandt andet fødsler og kirurgiske indgreb kan foregå på mere sikker vis. Tak til Else og Egil Jensen for deres årelange indsamling og pakning af godt børnetøj. Vi siger mange tak for alle disse bidrag.

Med venlig hilsen

Viggo Fischer
Formand

We thank him and the district authorities for the good cooperation, and this also goes to the Governor of Herat and of the districts.

Finally, I would like to offer our Afghan employees my best thanks for their dedicated effort. They contribute largely to a better future for their country - an example for others to follow. This appreciation also includes our Project Director and Project Administrator. Equally, thanks to our members, cooperating partners and benefactors. Without your generous support, many DAC initiatives and results would not be possible. Among others, this includes MultiCenter Syd and Bendix Transport Denmark A/S who manage DAC's collected materials. The continuous support, contributions i.a. from Danish hospitals etc. make it possible for DAC to increase the quality of our services and to include a social angle for the benefit of vulnerable groups, who are not covered by the official project, in our work.

Yours sincerely,

Viggo Fischer
Chairman

Fornemmelser for Afghanistan

Af Karen Høgh

Min første relation til Afghanistan blev skabt i sen- sommeren 2000. Der skulle dog gå næsten 9 år, før jeg var i stand til at se denne sammenhæng. Efter afsluttet studenteksamen udfordrede jeg mig selv ved at pakke min rygsæk og drage af sted på en enkeltbillet til udlandet. Mine oplevelser i Mellemøsten var lærerige, dels i forhold til at forstå kompleksiteterne i dette historiske område, dels for min egen dannelsesproces. Efter en rundtur i det mellemøstlige var mine interesser ved at trække mod Danmark igen – dog med et par afstikkere til Grækenland og Tyrkiet. Den episode, jeg ni år senere blev mindet om, da jeg stod med Rory Stewarts bog: "Stederne imellem", udspillede sig netop i Tyrkiet. Det, jeg mindedes, var et møde med en ung skotsk mand en eftermiddag, hvor jeg besøgte den berømte ruinby Ephesus. Denne mand's fascination af dette imponerende mindesmærke fra en forsvundet storhedstid kom til udtryk ved, at han meget insisterende førte mig til nogle af stedets detaljerige vidnesbyrd om datidens luksus, som f.eks. adgang til både varmt og koldt vand. Efterfølgende fortalte han om sine planer om at vandre mod øst. En vandring, jeg ni år senere lærte, havde ført ham fra Tyrkiet til Bangladesh. En vandring, hvor han på egen hånd havde krydset bl.a. Afghanistan og Pakistan. Beskrivelser fra Rory Stewarts rejse gennem Afghanistan, som fortælles i bogen "Stederne imellem" afslører

A Sense of Afghanistan

By Karen Høgh

My relationship with Afghanistan began in the late summer of 2000. Still, almost 9 years were to pass before I was able to see this connection. After completing high school I challenged myself by packing my backpack and leave on a one-way ticket abroad. My adventures in the Middle East were educative.

After a round trip in the Middle East my interests were drawn towards Denmark again – although I had a few stops in Greece and Turkey before going home. The episode that I nine years later recalled when holding Rory Stewart's book "Places in Between" in my hands, took place in Turkey. What I recalled was meeting a young Scottish man an afternoon when I visited the famous ruins of Ephesus. This man's fascination of this impressive monument from the glorious days of a long gone past was expressed by his insisting way of leading me to some of the site's details, which testify to the extravagance of the past – e.g. access to both cold and hot water. Afterwards he told me his plans of walking east. A walk, which I nine years later, learned had taken him from Turkey to Bangladesh. Among other things, he had single-handedly crossed Afghanistan and Pakistan. The description of Afghanistan from "Places in Between", contains suggestive and strong travel impressions from Afghanistan shortly after the fall of the Taliban in 2002.

Rory Stewart's words of Afghanistan clarify how, among the Afghan rural population, he experienced how

tankevækkende og kraftfulde rejseskildringer fra Afghanistan kort efter Talibans fald i 2002.

Rory Stewarts beskrivelser fra Afghanistan gør det klart, hvordan han blandt den aghanske landbefolkning oplever, at magtbalancen i landet konstant rykker sig, og hvordan landsbyerne regeres af selvbestaltede kommandanter og lokale krigsherrer. Gennem denne forståelse for magtens tomrum er Stewarts rejseskildringer fra Afghanistan en både barsk, men også meget nuanceret fremstilling. Som læser føler man, at Stewart virkelig har mærket Afghanistan. Mærket snedriverne, han er vandret igennem, mærket afghanernes ar på sjælen, men i særdeleshed også mærket afghanernes vilje til at tage imod ham som gæst.

Stewart formår på én og samme tid at formidle en skildring af Afghanistan med stor politisk bevidsthed, kulturel forståelse og personlig indlevelse. Sagt med andre ord, er Stewart i stand til at rykke det afsidesliggende Afghanistan nærmere læseren.

Grundet Stewarts fascinerende fortællinger om og fra Afghanistan var mit blik på Afghanistan blandt andet skabt af disse, da jeg i marts 2011 påbegyndte arbejdet som projektcoordinator i DAC. Sidenhen har jeg gennem de daglige arbejdsopgaver, den daglige kontakt til Afghanistan samt gennem nærorstudier af rapporter – og derigennem viden, fakta og data – foruden billedserier og fortællinger fra Afghanistan udvidet mit perspektiv yderligere. Endvidere har samtalere med kolleger omkring DAC's problemstilinger, succeser og udfordringer været uundværlige i mit forsøg på som barselsvikar, på bedste vis at videreføre DAC's arbejde fra sekretariatet i Valby.

I de syv måneder, der er gået siden min første arbejdsgang hos DAC, har et af nogleordene – til trods for afstanden til Afghanistan – været nærhed. DAC er en lille organisation med et lille sekretariat med mange opgaver og mange udfordringer. Jeg oplever derfor nærheden i min arbejdsgang i den betydning, at vi på sekretariatet skal have ledelsesmæssigt kendskab til enhver forandring, der har betydning for sekretariatet og dets virke i forhold til sundhedsprojektet i Afghanistan. Nærhed i DAC-sammenhæng har derfor den betydning, at når noget skal ordnes, så skal der oftest rykkes nu og her. Vi på sekretariatet får derved fingrene i de allerfleste arbejdsopgaver og dermed kendskab til alt, der sker indenfor organisationen.

I relation til de mange funktioner sekretariatet har, er omstillingsparathed og loyalitet derfor væsentligt – både i forhold til DAC's medarbejdere, samarbejdspartnere og donorer i Danmark og Afghanistan, men i særdeleshed også overfor DAC's medlemmer. Vi føler det derfor altid opmuntrende, når DAC's medlemmer eller andre interesserende henvender sig på kontoret med spørgsmål til DAC's sundhedsprojekt, idéer til hvorledes de kan tilbyde deres hjælp til projektet samt anden interesse. Når det forekommer, at vi ikke kan tage imod velmenende tilbud om frivillige indsatser i både Danmark og Afghanistan skyldes det, at strukturerne ikke er til stede. Dette er noget, vi i DAC jævnligt debatterer, hvorfor vi i fremtiden håber at kunne imødekomme i hvert fald frivillige indsatser i Danmark.

the balance of power constantly moves and how the rural population is extensively ruled by self-appointed commanders and local warlords. Through this understanding of the void of power, Stewart's journey from Afghanistan is tough but also much nuanced. As a reader you feel that Stewart has truly sensed Afghanistan. Sensed the snowdrifts that he walked through, sensed the Afghans' scars of life, but also in particular sensed the Afghans' pure intentions of welcoming him as a guest.

Stewart is able to convey a picture of Afghanistan that shows political awareness, cultural understanding and sympathetic insight – all at the same time. In other words, Stewart is able to bring the country of Afghanistan into the reader's imagination.

When I started working as Project Coordinator at DAC in March 2011, my sense of Afghanistan was influenced by Stewart's fascinating stories from Afghanistan. Afterwards, through the daily work, I have had a daily contact to Afghanistan and the study of reports – to gain knowledge, facts and dates – has expanded my senses further. Furthermore, conversations with colleagues about challenges, successes and the difficult issues DAC often faces have been essential in handling the tasks of DAC's secretariat in Valby.

In the seven months that have passed since my first day of work, one of the keywords has been closeness – in spite of the great geographical distance to Afghanistan. Even though DAC is a small organization with a similarly small secretariat, a lot of tasks and challenges continuously have to be handled. The closeness I experience during my workday is caused by the fact that it is necessary to know of all issues and changes of procedures happening in Herat, influencing the health project. Furthermore, closeness in connection to DAC often means that when work has to be done, it has to be done instantaneously. Therefore, at the secretariat we get our hands into most of the DAC tasks and thus knowledge of all that is happening in the organization.

Willingness to adapt and loyalty are important qualities as regards the many functions at the secretariat. This loyalty stretches to other DAC's employees, business partners and donors in Denmark as well as Afghanistan, and most certainly the members of DAC. We always feel encouraged when members of DAC or other people interested in DAC's work address our office. Interest shown through questions about DAC's Health Project, kind offers of helping and all other expressions of interest are most welcome. When it occurs that we are not able to meet all your nice offers of voluntary work in both Denmark and Afghanistan, it is due to the fact that the capacity within the organization is not there yet. The subject is something we often discuss in DAC for which reason we hope to be able to at least meet the offers of voluntary work in Denmark within a foreseeable future.

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Sikkerhed

Overdragelse af magten fra de internationale styrker til den afghanske hær

Den 21. juli 2011 begyndte overdragelsen af magt fra de NATO-ledede internationale (ISAF) styrker til den afghanske hær (ANA) i Herat. Den fredelige overdragelsesceremoni foregik på ANA-basen i byen under 6 ministres tilstede værelse. Kun sikkerheden i Herat By blev fuldt ud overdraget til ANA, mens ISAF fortsat vil være backup på sikkerheden i provinsens distrikter.

Ligesom de tilsvarende ceremonier i provinserne Bamian, Panjshir, store dele af Kabul og byerne Lashkar Gah, Mehterlam og Mazar-i-Sharif, bliver overdragelsen af Herat By anset som et afgørende skridt hen imod den afghanske hærs fulde overtagelse af kontrollen, som forventes at ske ultimo 2014.

Det er på nuværende tidspunkt vanskeligt at forudsige, om magtoverdragelsen fra ISAF til ANA vil påvirke sikkerhedssituacionen i Afghanistan i positiv eller negativ retning.

Igennem store dele af det forløbne år har sikkerheds-truslerne været mange og kampberedskabet i landet højt. Forholdene for DAC's udsendte medarbejdere såvel som de lokalt ansatte har været udfordrende, eftersom det har været, og fortsat er, vanskeligt at bevæge sig rundt i distrikterne. Sikkerhedstruslerne har dermed haft alvorlige følger for DAC's sundhedsarbejde, eftersom bevægelighed er al-tafgørende for den opsigende sundhedsindsats i de fjernliggende egne, hvor mange af de afghanere, vi i DAC søger at nå med vores sundhedstilbud, befinder sig.

Det, der gør situationen værst, er uforudsigeligheden derved. Og tragisk nok er det ofte denne uforudsigelighed, der koster menneskeliv. Vi tilstræber altid at beskytte vore medarbejdere bedst muligt, men i et land som Afghanistan kan man ikke helgårdere sig. Hvilket den tragiske beretning herunder vidner om.

DAC's håndtering af en nødsituation

De daglige rutiner på Obeh Comprehensive Health Center (CHC+) blev afbrudt den 18. august 2011, da en IED (Improvised Explosive Device, en vejsidebombe) ramte et privat køretøj på strækningen mellem Sirwan og Obeh netop som en minibus passerede det. Eksplosionen førte til, at mindst 25 personer mistede livet.

I alt 35 personer var direkte involveret i ulykken. 23 af disse omkom på stedet, mens en person døde i ambulancen på vej til DAC's CHC+ og en anden på vej til Herat By. Udover disse mange dødsofre fandtes der tillige en del tilskadekomne, som blev bragt til DAC's CHC+ i Obeh.

Mens de afghanske myndigheder sendte militærhelikoptere afsted for at hente 10 af de værst tilskade-

Security Issues

Transition of Power from ISAF to the Afghan National Army

On July 21, 2011 the transition of power from the NATO-led International Security Assistance Force (ISAF) to Afghan National Army (ANA) took place in Herat. The peaceful transition ceremony took place at ANA base with 6 ministers attending. Only the security of Herat City was handed over to ANA, why ISAF will still be supportive in maintaining the security of the districts of Herat Province as a backup unit.

As well as the security transition in the provinces of Bamian, Panjshir, much of Kabul and the cities of Lashkar Gah, Mehterlam, and Mazar-i-Sharif, the handover of Herat is considered a crucial step toward full assumption of control by Afghan forces, scheduled to be completed by the end of 2014.

It is difficult to make predictions whether the transition of power from ISAF to ANA will have positive or negative effects on the security situation.

Throughout most of the year the security risks have been multiple. The conditions for ex-pats and DAC's local employees have been challenged as it has been difficult to move around in the districts of Herat. The lack of security has had severe implications for DAC's health work as it has become difficult to move back and forth to the villages where most of DAC's beneficiaries are living.

What makes the security risk hard to handle is the unpredictability of it. And tragically that unpredictability takes away lives. We always try to protect our employees the best we can but in a country such as Afghanistan it is impossible to hedge one's bets. As the following will show, DAC had to respond to a very serious emergency when an explosive hit a local minibus on its way from Sirwan to Obeh.

DAC's Response to an Emergency

The daily routines at DAC's Obeh Comprehensive Health Center (CHC+) was interrupted August 18, 2011 after an IED (Improvised Explosive Device) hit a local, private vehicle which resulted in the death of at least 25 local civilians. The explosion happened between Sirwan and Obeh, while a minibus was passing by.

A total of 35 local people were on board during the blast. 23 persons were killed on the spot while one died on the way to DAC's CHC+ and another person died on the way to Herat City. Besides the many casualties, the injured people were reported to DAC's CHC+ in Obeh.

While the Afghan Government sent military helicopters to refer 10 of the worst injured from DAC's Obeh CHC+ to the hospital in Herat, the staff at Obeh CHC+ was ready to start treating the wounded's injuries and let them undergo medical services.

Among the victims was Qousuddin son of Dost

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komne og bringe dem fra CHC+en til et hospital i Herat, gjorde DAC's personale sig klart til at begynde behandlingen af de øvrige tilskadekomne.

Blandt dødsofrene var desværre Qousuddin son of Dost Mohammad, der havde arbejdet som vagt på DAC's Sirwan Basic Health Center (BHC) siden den 20. august 2008. Qousuddin son of Dost Mohammad var 43 år gammel og han efterlader sig en enke samt seks børn. Da ulykken indtraf, havde han fri fra arbejde og var på en tur til Obeh for at købe Eid-gaver til familien.

DAC har forsøgt at håndtere dette tragiske tab af en medarbejder ved at betale Qousuddin son of Dost Mommads enke en økonomisk kompensation. Vi har endvidere tilbuddet enken et fuldtidsjob som rengøringshjælp på Sirwan BHC, hvorfed hun bedre vil være i stand til at forsørge de seks børn på egen hånd. Qousuddin son of Dost Mommads enke har indvilliget i denne aftale og er påbegyndt sit nye arbejde den 11. september 2011.

Slutteligt, så har den afganske regering meldt ud, at den vil kompensere samtlige pårørende til ofrene for bomben gennem donationer bestående af hvede og ris.

*Billede tv:
Overrækkelse
af økonomisk
kompensation
til enken efter
Qousuddin
son of Dost
Mohammad*

*Photo (left):
Presentation of
the economic
compensation
to the widow of
Qousuddin
son of Dost
Mohammad.*



Udviklingen i sundhedsprojektet

Som det fremgår af formandens beretning bærer dette års udvikling i sundhedsprojektet præg af en række nye initiativer. Åbningen af tre ernæringsklinikker i tilknytning til DAC's nyskabelse; Baby Well-klinikkerne, er med til at fastslå, at DAC's fokus også i 2010-2011 har været på at yde en særlig indsats for kvinder og børn.

DAC's sundhedsprojekt tæller nu 370 medarbejdere i Herat, som fagligt dækker over medicinsk, paramedicinsk og administrativt/øvrigt personale. Dertil kommer det store antal frivillige landsby sundhedsarbejdere, som alle gør en brav indsats. Fælles prioritering i de tre distrikter er, at personalet – sundhedspersonale såvel som administrative medarbejdere – videreuddannes.

Et andet fælles tiltag i de tre distrikter er familiekvarterer i tilknytning til distrikternes klinikker. Et fami-

Mohammad, who has served as guard at Sirwan Basic Health Center (BHC) for DAC since August 20, 2008. Qousuddin son of Dost Mohammad was 43 years old and leaves his wife and six children behind. He was on a personal trip to Obeh to buy Eid gifts for his family when the tragic accident occurred.

The response from DAC to this tragic casualty has been to pay the widow an economic compensation. Due to the fact that Qousuddin son of Dost Mohammad left six children behind, it was decided to offer his wife a full time cleaning job at the Sirwan Basic Health Center (BHC). DAC has received her agreement to work at Sirwan BHC and she will start working on September 11, 2011.

Furthermore, the Afghan Government has announced that compensation consisting of wheat and rice will be distributed to the relatives of all people killed on the bus.



Development of the Health Project

As Words from the Chairman shows, this year's development in the health project includes a number of new initiatives. The opening of three nutrition clinics in connection with DAC's innovation; the six Baby Well Clinics, establishes how DAC has once again brought women and children into focus the past year.

DAC's Health Project counts a staff of 370 employees in Herat which professionally stretch from medical personnel over paramedics to administrative/other staff members. Besides the large amount of voluntary Community Health Workers (CHWs) who are all doing their absolute best. A joint priority in all three districts is for the staff – medical as well as administrative – to continuously upgrade their skills.

Another priority in common for the districts is family-quarters in connection with the health centers. A family quarter can be described as a smaller residential area close to the clinics where midwives can live with

**Aktiviteterne
på Baby Well-
klinikkerne er
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**The activities at
the Baby Well
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liekvarter kan beskrives som et mindre boligområde tæt på sundhedsklinikkerne, hvor jordemødre kan bo med deres familie og således stå til rådighed ”on-call” 24 timer i døgnet, hvis der optræder barslende kvinder på klinikkerne. For øjeblikket er tre familiekvarterer under konstruktion. Når disse er opført, vil DAC råde over 10 kvarterer fordelt på tre distrikter.

Gozarah og GDH

Kvaliteten af services på Gozarah Distrikshospital (GDH) samt de øvrige sundhedsklinikker søges konstant opgraderet i bestræbelserne på at opnå det bedst mulige personale og de bedste resultater. Det er derfor med stor glæde, at vi kan meddele nylige ansættelser af to specialister indenfor henholdsvis gynækologi/obstetriki og kirurgi.

Vedrørende operationsenheden, så har DAC i det forløbne år stået overfor en stor udfordring hvad angår opretholdelsen af døgnvagten. Grundet afsked med to ud af tre narkoselæger, så DAC sig nødsaget til at nedlægge døgnvagten, for i stedet at prioritere uddannelsen af to nye narkoselæger. Efter to måneder var det imidlertid atter muligt at starte den kirurgiske døgnvagt på GDH.

Fra venstre
mod højre:
From left
to right:

Waisuddin
Kasserer / Cashier

Wakil Ahadi
Finanschef /
Finance Manager

Baqer
IT-funktionær /
IT Officer

Gulam Saki
Vagt / Guard
Khalid

Chauffør / Driver
Salehi

Uddannelseskoor-
dinator, oversætter
/ Training Coor-
dinator, Translator

Hamedi

Lægekoordinator /
Medical
Coordinator

Dr. Sohail

CBHC leder /
CBHC Manager

Sumitra

Projektadmi-
nistratør / Project
Administrator

Somaiya

Økonomiassistent
/ Finance Assis-
tant

Aktiviteterne på Baby Well-klinikkerne er for alvor ved at tage form. Ernæringsstatistikker samt tilsyn med børnenes udvikling og almentilstand bliver, som nævnt i DAC's Sommertilbrev 2011, løbende foretaget af sundhedspersonalet i takt med, at mødrene viser større og større interesse for og indlevelse i disse services. Mødrenerne viden omkring ernæring og vigtigheden af am-ning øges da også jævnt. I tilknytning hertil blev et nyt initiativ søsat i marts

2011: Med uddannelsesprogrammet ”Food Demonstration and Health Education” lærer mødrene nu endnu mere omkring betydningen af hygiejne, vaccinationer, miljømæssige påvirkninger, børnepasning, sæsonbetonede sygdomme, etc. Endvidere er der specielt fokus på god ernæring, hvor mødrene lærer om kost og kostplaner. De nye tiltag på ernæringsklinikkerne har vækt opsigts i nærområdet, og således har børnehospitalet i Herat udbedt sig at måtte kopiere såvel system som database fra DAC's ernæringsklinik på GDH, hvor akti-viteterne er flest. Hospitalet vil desuden gerne sende dele af deres personale i træning på klinikken, hvilket kobles på den løbende udannelse af DAC's eget personale fra de tilsvarende klinikker i Obeh og Pashtoon Zarghoon.

Obeh og Pashtoon Zarghoon

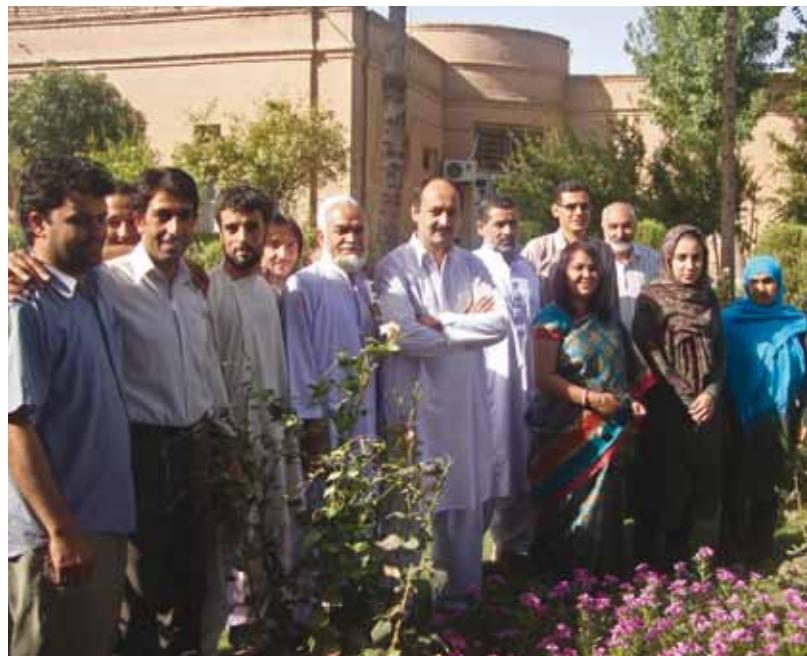
Et af de primære mål i DAC's sundhedsarbejde er at være med til at reducere børne- og mødredødelighedsraten, som det beskrives i det afghanske sund-

their families and thereby be on-call 24 hours a day if women in labour should be admitted. At the moment there are family quarters under construction at three BHCs. When they are finished DAC will have 10 of these quarters at disposal spread across the three districts.

Gozarah og GDH

At DAC we always seek to upgrade our services at Gozarah District Hospital (GDH) and all other clinics. It is therefore our pleasure to report the successful hiring of two specialists within respectively gynaecology/obstetrics and surgery.

As regards the operation unit, DAC has been facing some challenges in the past year concerning the 24-hour service. Due to the resignation of two out of three anaesthesiologists, DAC was compelled to temporarily shut down the service while educating two new anaesthesi-



ologists. After two months, however, it was possible to resume the surgical 24-hour service at GDH.

The activities at the Baby Well Clinics are really starting to take shape. Statistics of nutrition along with surveillance of the children's development and general condition are as mentioned in the Summer Letter to the Members 2011 regularly done by the health staff. At the same time, mothers of the children in our clinics are showing a growing interest and sympathetic insight as regards our services. The knowledge of nutrition and the importance of breast-feeding among the mothers are also increasing. In addition to this a new initiative was launched in March 2011: An educational program named ”Food Demonstration and Health Education” where the mothers are learning even more about the importance of hygiene, immunisation, environmental effects, childcare, seasonal diseases, etc. Furthermore, attention is given to improved nutrition and the mothers learning about a nutritionally correct diet and diet plans. These new steps at our nutrition clinics have caused a sensation in the

hedsministeriums Basic Package of Health Services (BPHS). En af de daglige rutiner i såvel Obeh som Pashtoon Zarghoon er derfor at henvise og sende patienter videre til regionshospitalet med ambulancer tilknyttet CHC+ i begge distrikter. Et hospital, hvor der er flere og bredere behandlingsmuligheder end på DAC's klinikker.

Der er imidlertid i både Obeh og Pashtoon Zarghoon kommet veludstyrede operationsstuer og dygtige kirurger til, som gør det muligt at håndtere bl.a. blindtarmsbetændelse, brok, kejsersnit og problematiske fødsler på stedet.

Ligesom det gør sig gældende i Gozarah, bliver aktiviteterne i forbindelse med Baby Well- og ernæringsklinikkerne i såvel Obeh som Pashtoon Zarghoon fulgt af en stigende interesse fra mødrene. Også her foregår der ernæringsundervisning samt maddemonstrationer, som kommer allerede fejl-ernærede børn og børn i fare for fejlnæringer til gode.

Outreach-indsatsen

Til trods for, at dele af DAC's outreach-indsats i perioder af 2010-2011 desværre har været hindret af sikkerhedssituationen, er

"At nå det uopnåelige"
– DAC Outreach.

"Reaching the Unreachable"
– DAC Outreach.

de aktiviteter, der har været mulige, stadig af stor værdi for befolkningen i de afsidesliggende områder.

DAC's mobile sundhedshold, som vaccinerer og yder basal hjælp til landsbybefolkningen, er nu reduceret til ét hold i hvert distrikt – i alt tre hold.

Sammen med DAC's 22 landsbyudviklingshold, der underviser landsbybefolkningen i blandt andet hygiejne, ernæring og spædbørnspleje, er de mobile sundhedshold under udfasning, idet programmerne afsluttes ved udgangen af 2011. Til trods herfor, har der i det forgangne år været stort fokus på at uddanne landsbyudviklingsholdene som led i udfasningsplanen. Dette af hensyn til den bæredygtighed, som DAC løbende stræber mod at opnå med samtlige dele af sundhedsprojektet.

Som det kan læses i beretningen om en succeshistorie fra Gozarah vedrørende management og behandling af tuberkulosepatienter andetsteds i denne rapport, spiller landsbyudviklingsholdene sammen med DAC's landsbysundhedsarbejdere en vigtig rolle i forbindelse med indkredsning af tuberkulosetilfælde. DAC's landsbysundhedsarbejdere, der uddover at henvise tuberkulosepatienter også henviser bl.a. patienter

community. Children's Hospital in Herat has requested access to copying both the system and the database at GDH's nutrition clinic where we have the most activities going on. The hospital would furthermore like to send parts of its staff to do training at our clinic which will be connected to the training of DAC's own staff from Obeh and Pashtoon Zarghoon who are also coming to GDH.

Obeh and Pashtoon Zarghoon (PZ)

One of the primary aims in DAC's health work is participating in reducing the high IMR and MMR (Infant and Maternal Mortality Rate) in Afghanistan as described in the health strategy of the Ministry of Public Health, Basic Package of Health Services (BPHS). One of the daily routines in Obeh as well as Pashtoon Zarghoon is therefore referring patients and directly sending patients by our CHC+ ambulances to the regional hospital where they have more treatment options available. However, both in Obeh and PZ well equipped operation theatres has been built and skilled surgeons have arrived by which it is now possible to handle appendicitis, hernia, c-sections and difficult births.

As in Gozarah, the activities at the Baby Well Clinics and nutrition units in Obeh and PZ have been followed by an increasing interest from the mothers. In these two

districts nutritional education and food demonstrations are also taking place which malnourished children and children at the risk of being malnourished benefit from.



Outreach

In spite of the security risks that have threatened and to some extent prevented DAC's outreach efforts from happening it has still been possible in 2010-11 for many activities of great importance to the remote areas of Herat to be carried out.

DAC's Mobile Teams, who vaccinate and provide basic health care to the rural population, are now reduced to one team per district – all in all three teams. Along with the 22 Village Health Development Teams (VHDTs), who teaches the rural population e.g. hygiene, nutrition and infant care, the Mobile Teams are phasing out since these outreach programs finish by the end of 2011. In spite of this fact, the past year has brought development and education of the teams into focus as part of the phase-out plan. All for the sake of the sustainability that DAC always strive to achieve with all parts of the health project.

As you may have read in the success story of tuberculosis (TB) treatment and management elsewhere in this report, the VHDTs and Community Health Workers (CHWs) play a very important role in pinning down TB-

med gynækologiske vanskeligheder, fortsætter derfor til trods for ovennævnte udfasning deres arbejde ufortrødent. Trænings- samt opdateringskurser for landsbysundhedsarbejderne finder p.t. sted på GDH og disse udrustes fortsat med det nødvendige udstyr. Udvælgelse og supervisering foretages af Community Based Health Care Teams (CBHC-teams), som i denne rapporteringsperiode i alt har udvalgt 19 par (M/K) til at udgøre nye landsbysundhedsarbejdere.

cases. The CHWs who, besides referring people with TB to our clinics also refer women with gynaecological problems, continue their work undauntedly despite the above-mentioned phasing out. Training and update courses still take place at GDH just as the teams are still being endowed with proper equipment for their work. Selection and supervision of the teams is handled by Community Based Health Care Teams (CBHC Teams) who, in this phase (IV) of DAC's Health Project, have selected 19 couples (M/F) to make up the new CHWs.

DAC i medierne

Projektkoordinator Mingo Heiduk Tetsche har i det forgangne år givet interviews til TV2 News to gange. Første gang var i november 2010, hvor dagsordenen for debatten var kvindernes situation i Afghanistan. Blandt de andre debattører var Simone Aaberg Kærn, som i 2002 fløj over Afghanistan i et lille privatfly for at komme til Kabul. Agendaen for hendes tog var at opsoe en ung kvinde i Afghanistan, som hun vidste havde en drøm om at blive jagerpilot. Endvidere deltog også den tidligere danske大使 in Afghanistan, Anders Carsten Damsgaard, i oplægget på TV2 News.

Mingos andet interview, der omhandlede den humanitære situation i Afghanistan, fandt sted den 6. januar 2011. Interviewet kan stadig ses på TV2's hjemmeside i forbindelse med TV2 Nyhedernes korrespondent Rasmus Tantholdts reportage fra en lejr udenfor Camp Bastian i Helmand-provinsen i det sydlige Afghanistan.

I forbindelse med DAC's modtagelse af et røntgenapparat i efteråret 2010, doneret af Philips' danske afdeling og formidlet af Global Medical Aid til Gozarah Distrikthospital, var næstformand Dr. Ole Julius Siemssen til stede. DR1 sendte et nyhedsclip derfra, hvor sundhedsforholdene i Herat blev afbildet. DR1 lægger i orienteringen fra Herat særlig vægt på, hvorledes DAC's indsats er med til at gøre en forskel for lokale afganere. Både Dr. Ole Julius Siemssen og hospitalsdirektør Dr. Javid Matin gav interviews.

I Folketidende blev der i marts 2011 bragt en artikel vedrørende en donation af stole og borde fra VUC i Nykøbing, Næstved og Maribo. I artiklen beskrives, hvordan denne donation pakkes i en container hos MultiCenter Syd på Nykøbing Falster og fragtes til Herat, hvor DAC tager imod containeren og bringer møblerne frem til de skoler, hvor de gør mest gavn.

Kristeligt Dagblads journalist, Jannie Iwankow Søgaard, bragte i maj 2011 en artikel omhandlende NATO's tilbagetrækning fra Afghanistan samt spørgsmålet om, hvorvidt den afganske hær er i stand til at beskytte befolkningen. Hun refererer i den forbindelse til DAC's sundhedsarbejde og citerer formand Viggo Fischer, som udviser bekymring i forhold til en for hurtig tilbagetrækning, idet han dels henviser til, at det kan resultere i vanskeligere forhold for hjelpeorganisationerne, men hvad værre

DAC in the Media

Project Coordinator Mingo Heiduk Tetsche has in the past year been giving interviews to the Danish news channel, TV2 News, twice. The first time was in November 2010 where the agenda of the debate was women's situation in Afghanistan. Among the other debaters was Simone Aaberg Kærn who in 2002 overflew Afghanistan in a small, private plane to get to Kabul. The primary reason for her expedition was a young Afghan woman whom she knew had a dream of becoming a fighter pilot. In addition, the Danish ambassador in Afghanistan at the time, Anders Carsten Damsgaard, participated in the feature.

Mingo's second interview, dealing with the humanitarian situation of Afghanistan, took place January 6, 2011. The interview was broadcasted on TV2 News and is still available at the channel's homepage in connection with the correspondent Rasmus Tantholdt's report from outside Camp Bastian in the Helmand Province of Southern Afghanistan.

Regarding DAC's receipt of an x-ray machine to Gozarah District Hospital (GDH) in the autumn of 2010, donated by Philips' Danish branch with Global Medical Aid as an intermediary, vice chairman of DAC Dr. Ole Julius Siemssen was present. Another Danish news channel, DR1, was reporting from the event including a general presentation of public health in Herat. It was emphasised how the work DAC does is making a real difference to the Afghans which of course we appreciate. Both Dr. Siemssen and Dr. Javid Matin, Director of GDH, gave interviews.

The Danish newspaper, Folketidende, printed an article about a donation of chairs and school tables from VUC in Nykøbing, Næstved and Maribo March 2011. The article describes how the donation was packed in a container at MultiCenter Syd, Nykøbing Falster, to be freighted to Herat where DAC received the goods and distributed them to the local schools in most need of furniture.

A journalist named Jannie Iwankow Søgaard from another Danish newspaper, Kristeligt Dagblad, ran an article in May 2011 dealing with NATO's pullback from Afghanistan including the question of the Afghan army being or not being able to protect the population. She refers to DAC's health work and quotes chairman Viggo Fischer expressing concern as regards the possibility of the pullback happening too fast. Viggo Fischer explains how a fast pullback may cause some difficulties in the working conditions of the humanitarian organizations and even worse,

er, måske også føre til borgerkrig mellem Syd- og Nordafghanistan.

Forsvarets Mediecenter producerede i oktober 2010 dokumentarfilmen "Danmark i Afghanistan" i samarbejde med Udenrigsministeriet og Forsvarsministeriet. Filmen portrætterer den danske indsats i Afghanistan, hvor også DAC's sundhedsarbejde beskrives i ord og billeder. Christian Reinhold, Forsvarets Mediecenter, har efterfølgende produceret to filmklip omhandlende Gozarah Distrikthospital samt DAC's outreach-indsats. Filmene blev til som led i DAC's produktion af materiale til udstillingen "Den Fjerne Krig – Dansk soldat i Afghanistan", som lige nu er aktuel på Tøjhusmuseet.

Som nævnt i formandsberetningen har DAC netop relanceret hjemmesiden www.afghan.dk i et nyt og moderne look. Arbejdsprocessen med hjemmesiden har været langvarig, hvorfor vi er stolte over endelig at kunne præsentere et produkt, vi naturligvis håber, at alle DAC's medlemmer og andre interessererde vil få stor glæde af.

Det forgangne år har ligeledes stået i de sociale mediers tegn, idet DAC har fået sin egen side på Facebook. Sidenavnet er ganske simpelt Den Danske Afghanistan Komité (DAC). Vi håber i det kommende år at kunne byde velkommen til endnu flere Facebook-brugere på vores side. Samtidig håber vi for alvor at kunne gøre brug af denne sides muligheder for med jævne mellemrum at informere om DAC's aktiviteter samt muligheden for at skabe en interaktiv kommunikation herom.

may lead to a civil war between Southern and Northern Afghanistan.

The Media Center of the Danish Defence in October 2010 produced a documentary called "Denmark in Afghanistan" in collaboration with the Danish Ministry of Foreign Affairs and the Ministry of Defence. The documentary portrays the Danish efforts in Afghanistan through which DAC's health work is also described in words and pictures. Christian Reinhold from the media center subsequently produced two smaller documentaries of GDH and the outreach DAC does. The films were made simultaneously with DAC's other preparations to the exhibition "Den Fjerne Krig – dansk soldat i Afghanistan" (The distant war – Danish soldier in Afghanistan") at the Danish Defence Museum, Tøjhusmuseet. The exhibition will be on until autumn 2013.

As mentioned in Words from the Chairman, DAC has recently relaunched the website www.afghan.dk in a new and modern look. The process has been long and we are therefore proud and happy to present the final result. We hope that all DAC members and other interested parties will benefit from the upgrade.

The past year has also been characterised by social medias as DAC has had itself a Facebook page. The name of the page is simply "Den Danske Afghanistan Komité (DAC)" and we hope to welcome many of you to the page in the year to come. We would like to use Facebook as an interactive way of communicating with our members and e.g. present new initiatives and activities through the page.



Mingo Heiduk
Tetsche i
TV2 News.

Mingo Heiduk
Tetsche in
TV2 News.



Dr. Javid Matin
på DR1.

Dr. Javid Matin
on DR1.

DAC's kvindekollegium

Som mange af jer allerede ved, så har DAC siden 2005 drevet et kvindekollegium i Herat. Og som I måske har læst i Formandens beretning, så er kollegiet fortsat en stor succes og dets drift er lykkeligvis blevet sikret året ud takket være finansiering lokalt såvel som tilladelsen fra Udenrigsministeriet (Danida) til at anvende ubrugte midler i budgettet på kollegiet. Beretningen nedenfor er et brev, vi modtog fra administratoren af kvindekollegiet. Vi antager, at en af årsagerne til kollegiets medvind er grundet i, at det administreres af en særdeles stærk, men samtidig omsorgsfuld afghansk kvinde.

Fra skrivebordet hos Mrs. Sajeda, DAC's kollegieadministrator

*Skrevet af Mrs. Sajeda
Redigeret af Julie Jeeg*

Jeg er født og opvokset i Afghanistan; et land, hvor det af mange grunde er en stor udfordring for kvinder at tage en uddannelse. Uddannelse er imidlertid en drøm for mange kvinder allerede fra barnsben. Uhedligvis har det hidtil været sådan, at kun 10% af Afghanistans kvinder har haft mulighed for at tage en uddannelse, og ud af disse få kvinder har kun 25% fået familiens anerkendelse i forhold til efterfølgende at tage et arbejde.

Jeg er en af disse få, meget heldige kvinder, hvis barndomsdrøm blev til virkelighed. Rejsen henimod at opnå dette var dog ikke uden forhindringer.

Jeg dimitterede fra den afghanske økvivalent til high school i 1978 og besluttede at søge ind på Herat City School som lærer, hvilket var min helt store drøm. Det føltes da også helt specielt at undervise piger i Herat.

Under den russiske invasion af Afghanistan (1979-89, red.) så min familie og jeg os nødsagede til at forlade landet og migrere til Iran. Mens jeg var i Iran, besluttede jeg på ny at gøre en indsats for Afghanistans kvinder – denne gang de kvinder, der ligesom jeg var blevet tvunget til at forlade deres hjemland på grund af den ustabile situation rent politisk og krigsmæssigt. Jeg samlede efter bedste evne disse kvinder og gav mig til at undervise dem for at gøre det muligt for dem at fortsætte deres studier i Afghanistan, når vi engang kunne vende tilbage.

Efter 4 år blev det muligt for mig at rejse hjem til Herat. Taliban havde i mellemtiden overtaget magten og det betød, at Afghanistans piger og kvinder var tvunget til at stoppe enhver uddannelse på samtlige skoler og videregående uddannelsessteder. Dette ansporedes mig endnu engang til at samle mine med-

DAC's Female Dormitory

As many of you know, DAC has since 2005 been running a female dormitory in Herat. And as you may have read in Words from the Chairman, the dormitory is still a great success and has luckily been ensured its continued running throughout 2011 on the basis of funding both locally and from the Ministry of Foreign Affairs (Danida). The narrative below is a letter we received from the administrator of the dormitory. Clearly, the dormitory is in luck with this very strong, but also kind and thoughtful Afghan woman to handle the daily administration.

From the desk of Mrs. Sajeda – DAC's Dormitory Administrator

*Written by Dormitory Administrator Mrs. Sajeda
Edited by Julie Jeeg*



I was born and brought up in Afghanistan, a country where, due to various reasons, getting an education has always been a challenge. However, education is a dream for many girls from their childhood on, but unfortunately only 10% of the Afghan women have ever had the chance of an education and out of these few women do only 25% get their family's approval to start working afterwards.

I am one of these few, very lucky women whose childhood dream came true. The journey was, however, not easy.

I graduated high school in 1978 and decided to join Herat City School as a school teacher which was my all-time dream. And it was definitely a special feeling to be a teacher, educating girls of Herat.

During the Russian invasion of Afghanistan in 1979-89, my family and I were forced to leave the country and migrate to Iran. While being in Iran, I decided once again to do something for the Afghan women who had had to leave their country due to the bad political/war situation. I assembled them and started teaching them with the intention of enabling them to continue their studies back in Afghanistan.

After 4 years I came back to Herat during the Taliban regime and by that time all girls and women were forced to stop their education at all schools and colleges which encouraged me once again to help the poor girls who were deprived their education. I used to go to their homes and tutor them. Immediately after the Taliban era, happy days came and schools were once again open for girls. I started teaching at Gowharshad School, Herat, where I was the School Headmistress for many years.

**Uddannelse er
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**Education is
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from their
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søstre, som var frataget enhver uddannelsesmulighed, om mig. Denne gang valgte jeg at tage hjem til kvinderne og undervise dem privat indtil de lykkelige dage kom, hvor Taliban-regimet var ovre og skolerne atter åbnede dørene for piger og kvinder. Jeg begyndte på denne tid at undervise på Gowharshad School i Herat, hvor jeg var skoleleder i mange år.

I 2009 så jeg en jobannonce, hvor der blev søgt efter en administrator til DAC's kvindekollegium. Jeg ansøgte og fik stillingen. Da jeg påbegyndte mit arbejde på kollegiet boede der 90 unge kvinder, hvor det i dag er 116 fra universitetet og Institut for Sundhedsvidenskab. Kollegiet er det eneste af sin slags i provinsen og der findes kun 2-3 tilsvarende bosteder for kvinder i hele Afghanistan. 25% af kvinderne på kollegiet ville ikke have kunnet tage en videregående uddannelse, havde de ikke haft denne mulighed for at bo et sikkert sted i nærheden af universitetet.

Jeg vil gerne opfordre alle, der læser dette, til at hjælpe Afghanistans kvinder ved at støtte DAC's kvindekollegium økonomisk. Donationer vil bidrage til at sikre kollegiets fortsatte drift og eksistens, og dermed sætte alle disse unge kvinder med behov for uddannelse i stand til at forfølge deres mål i livet. Jeg er personligt af den overbevisning, at hvis en kvinde uddannes, så uddannes hele hendes familie!

Slutteligt vil jeg gerne takke Danmark og det danske folk for den humanitære hjælp, I giver Afghanistan. Tak!



DAC's kvindekollegium.

DAC's Female Dormitory.

In 2009, I saw the job advertisement of an administrator for the DAC female dormitory, I applied for it and got the position. When I joined the dormitory there were about 90 girls whereas today there are 116 from the University and Institute of Health Sciences. It is the only female dormitory in the province and in fact there are only 2-3 similar dormitories in the whole country. 25% of the girls in our dormitory would not have been able to continue their education, if the opportunity of a safe home near the University had not existed.

I would like to request all readers of this article to help Afghan women by supporting DAC's female dormitory financially. Donations will secure the dormitory's future existence and thereby enable all those girls in need of education to pursue their goals. I personally believe that if a girl is educated, her whole family is educated too!

Finally, I would like to thank Denmark and the Danish people for the humanitarian help, you bring. Thank you!



En succeshistorie fra Gozarah

*Skrevet af Dr. Javid Matin, direktør,
Gozarah Distrikthospital (GDH)
Redigeret af Karen Høgh og Julie Jeeg*

Tuberkulose i udviklingslande

I udviklingslande er tuberkulose (TB) en af de smitsomme sygdomme med den største risiko for overførsel mennesker imellem. Denne risiko skønnes endnu højere i Afghanistan på grund af sociale faktorer som borgerkrig, fattigdom, begrænset sygdomsbevidsthed i lokalbefolkningen, lav uddannelses- og vidensgrad samt utilstrækkelig adgang til sundhedstilbud. Hvad smitsomme sygdomme angår, bidrager alle disse faktorer til en forværring af situationen i Afghanistan.

Nationale data viser, at forekomsten af TB i Afghanistan er 79/100.000/år. Med den frekvens placerer Afghanistan sig næsthøjest ud af de centralasiatiske lande. I Afghanistan arbejder de nationale såvel som regionale og provins-sundhedskontorer derfor med management- og behandlingsplaner for TB-patienter.

Tuberkulose i Gozarah-distriktet

I Gozarah har vi et solidt system for administration og behandling af TB-patienter i sundhedsklinikkerne såvel som på lokalt plan. Vi følger det såkaldt DOTS-system (Direct Observation Treatment, Short-course), som WHO har introduceret. Indenfor dette system skal patienten tage en daglig dosis medicin under direkte observation af sundhedspersonale i de første 2 måneder af behandlingen.

I øjeblikket har vi 87 patienter i denne behandling alene i Gozarah. 15 af tilfældene er extra-pulmonale (dvs. udenfor lungerne, f.eks. i knoglerne), mens 72 er pulmonal TB. 24 af disse patienter er i gang med de første 2 måneders intensiv behandling. Ud af disse patienter besøger 10 personer dagligt vores sundhedsklinikker, mens andre er knyttet til vores lokalnetværk i opfølgningsfasen af deres behandling. Alt i alt implementerer og følger vi fuldt ud bestemmelserne i DOTS-systemet.

Igennem de forløbne 12 måneder har vi haft stor succes med administrationen af TB i Gozarah-distriktet. Ifølge DOTS-systemet er målsætningen 70% sygdomsopsporing, 85% fuld helbredelse og 100% DOTS-opfølgning.

I lande som Afghanistan er administrationen af dette system særdeles udfordrende og målsætninger er ofte svære at leve op til, men med ihærdighed og dedikation fra vores personales side kan vi overkomme disse udfordringer og opnå bemærkelsesværdige resultater i Gozarah.

A Success Story from Gozarah

*Written by Dr. Javid Matin,
Gozarah District Hospital Director
Edited by Karen Høgh and Julie Jeeg*

Tuberculosis in Developing Countries



In developing countries tuberculosis (TB) is one of the communicable diseases with the highest risk of contagion. The risk is even higher in Afghanistan because of other social determinants like civil war, poverty, limited level of community awareness, low literacy rate, and insufficient access to health services. All these factors contribute to worsening the situation.

National data shows that the incidence of TB in Afghanistan is 79/100,000/year. With that frequency Afghanistan is ranking the 2nd highest out of the Central Asian Countries.

In Afghanistan both the national, regional and provincial offices in the health system are working on management and treatment of TB.

What is going on in Gozarah District regarding Tuberculosis?

In Gozarah District we have a strong system for management and treatment of TB-patients in health facilities and on community level. We are following the DOTS System (Direct Observation Treatment, Short-course) introduced by WHO. In this system, the patient takes a daily dose of medicine under direct observation by health workers for the first 2 months of treatment.

At the moment we have 87 patients undergoing treatment in Gozarah District. 15 cases are extra-pulmonary and 72 cases are pulmonary TB. A total of 24 patients are in their first two months of treatment (intensive phase). Out of these cases, 10 patients pay daily visits to our health facilities, and others are linked to our community network for follow-up of their treatment.

All in all we are implementing and fully complying with the DOTS System requirements.

During the last 12 months we had a great success in TB-management in Gozarah District.

According to DOTS System, the targets are 70% of case detection, 85% of cure rate and 100% of DOTS follow-up.

In countries like Afghanistan, management of this system is very challenging and the settled targets are not achieved easily. But with staff effort and dedication we can overcome the challenges and achieve remarkable success in Gozarah District.

“

Nationale data viser, at forekomsten af tuberkulose i Afghanistan er 79/100.000/år.

”

National data shows that the incidence of tuberculosis in Afghanistan is 79/100,000/year.

Tabellen nedenfor viser succesraten i distriktet, hvad TB angår:

The table below shows our success in the district as regards TB-case management:

Indicator	Target	Achievement
Case Detection of pulmonary TB	75 case	72 case (96%)
Cure rate	85%	96%
DOTS follow-up	100%	100%
Conversion rate	95%	100%
Medicine availability	100%	100%
Preventive treatment for children under 5 years	76 children (100%)	76 children (100%)

TB-afsnittet på GDH er blevet udvalgt som model og TB-træningscenter for andre sundhedsinstitutioner i provinsen af Provincial Tuberculosis Management Office.

Vores Patient Kit System (journalsystem til administration af patienterne), som er blevet anvendt på GDH gennem længere tid, er nu kopieret af andre BPHS-implementatorer. Det er ligeledes taget i anvendelse på øvrige sundhedsinstitutioner og anerkendes som en standardmetode til at holde styr på journaler.

Et andet initiativ på GDH er at anskueliggøre forholdet mellem TB og kvinder i den fødedygtige alder. DAC har påbegyndt denne research ved at interviewe kvinder i nævnte gruppe for at fastslå prævalensen samt starte en sygdomsopsporing. Disse aktiviteter er implementeret i hospitalets daglige arbejde med støtte fra National Tuberculosis Team samt øvrige interesserter.

Tuberculosis Department of Gozarah District Hospital (GDH) has been selected as a model and training center of tuberculosis for other health facilities by Provincial Tuberculosis Management Office.

Our Patient Kit System that has been used at GDH for a long time is now copied by other BPHS Implementors. It is likewise applied to other health facilities and recognized as a standard way of keeping records.

One of the other initiatives at GDH is looking into the relationship between TB and women of child-bearing age. DAC is undertaking this research project by interviewing women of child-bearing age to establish the prevalence rate and begin the case detection. It is implemented with the support of the National Tuberculosis Team and other stakeholders.

Årsager til succes på tuberkuloseområdet

- ✓ Stærk administration og et dedikeret hospitalspersonale, i særdeleshed TB-sygeplejerskerne.
- ✓ Tilgængelighed til et stærkt Community Based Health Care System (CBHCS) i Gozarah inklusiv samtlige CHWs, VHDTs og CHSs. Et stort antal nye TB-tilfælde blev opdaget af disse sundhedsmedarbejdere, der tillige arbejder for at udbrede sygdomsbevidsthed i lokalsamfundene.
- ✓ På lokalt plan: Opfølgning ved hjælp af kontaktpersoner i familierne. De fleste familier med ét eller flere medlemmer, der lider af TB, har haft besøg af vores TB-sygeplejersker på jagt efter nye tilfælde.
- ✓ Betaling som incitament hos vores lokale frivillige mod til gengæld at opspore nye TB-tilfælde og samme slags betalinger mod at de frivillige sørger for en del af opfølgningen hos patienter under behandling.
- ✓ Kommunikation med lokale råd og andre lokale ledere i håbet om at opnå deres støtte til TB-indsatsen.

What are the Causes of the Success in Tuberculosis Management in Gozarah?

- ✓ Strong management and commitment of hospital staff, especially the TB-nurses.
- ✓ Availability of a strong Community Based Health Care system in Gozarah including all Community Health Workers, Village Health Development Teams, and Community Health Supervisors: A great number of new TB-cases were detected by these people, who are also working for community awareness.
- ✓ At community level: Follow-up by contact persons in the families. Most of the families with one or more members suffering from TB have been visited by our TB-nurses, looking for new cases.
- ✓ Incentive payments to community volunteers for finding TB-cases and the same sort of payment for follow-up on patients under treatment.
- ✓ Communication with community councils and other community leaders about supporting the program in the field.
- ✓ Providing community awareness and health education in the health facilities and at community level



Journalsystem for tuberkulose-patienter.

Tuberculosis Patient Kit System.



- ✓ Udbredelse af en større bevidsthed om sygdomme gennem undervisning i sundhed på klinikker og lokalplan ved hjælp af samtlige ansatte og frivillige sundhedsmedarbejdere.
- ✓ Teknisk og økonomisk støtte fra DAC. Uden denne støtte ville intet af det ovenstående have kunnet lade sig gøre.

I fremtiden vil vi fokusere på at holde den nuværende standard for TB-indsatsen. Samtidig vil vi naturligvis gerne opnå større fremgang og endnu flere succes-historier.

through all employees and voluntary health workers.

- ✓ Technical and financial support from DAC. Without this support none of the mentioned activities would have been possible.

In the future, we will be focusing our efforts on keeping the same standard of TB- services. We want to bring even more progress and success to the field.

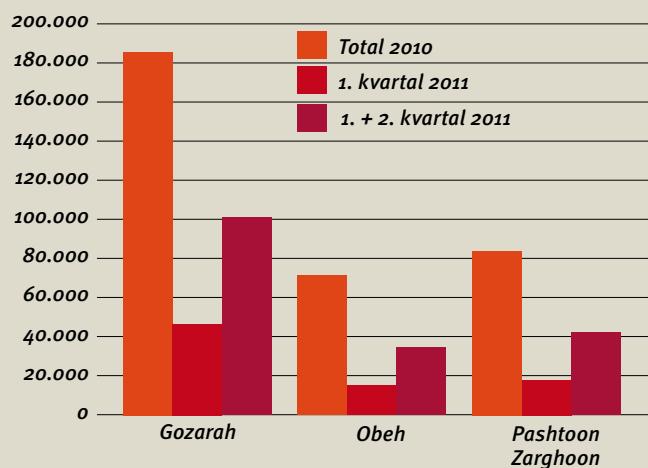
Jordemoder taler med kvinde, der lider af tuberkulose.

Midwife interviewing a lady suffering from tuberculosis.

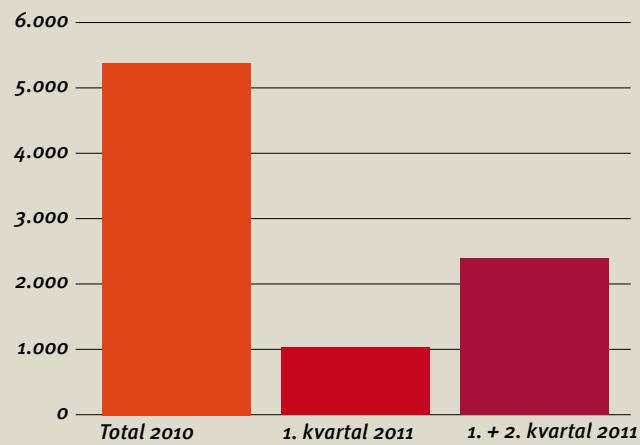


Resultater 2010-2011 / Results 2010-2011

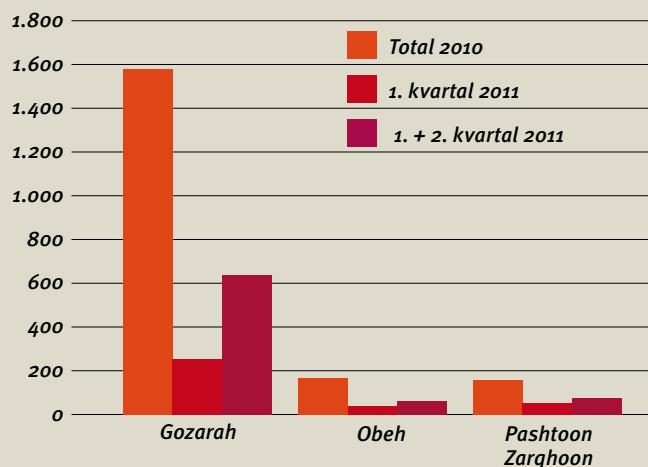
Ambulante patienter på sundhedsklinikkerne Outpatients in Health Centers



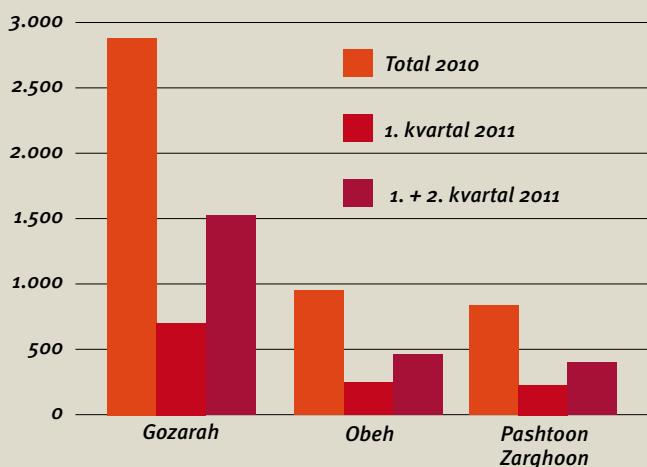
Indlagte patienter på Gozarah Distrikthospital Inpatients in Gozarah District Hospital



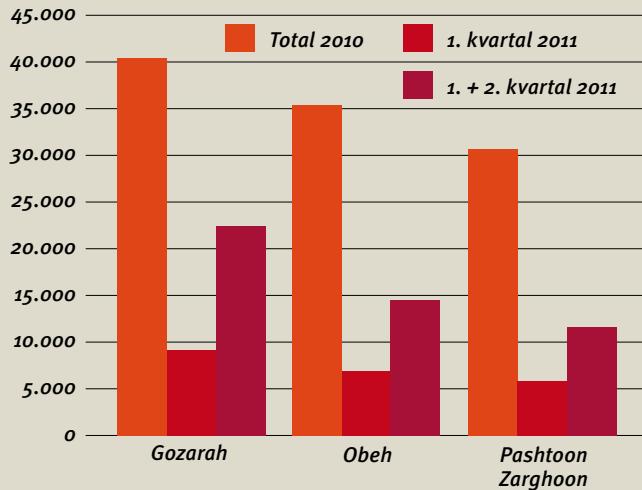
Kirurgiske indgreb Surgeries



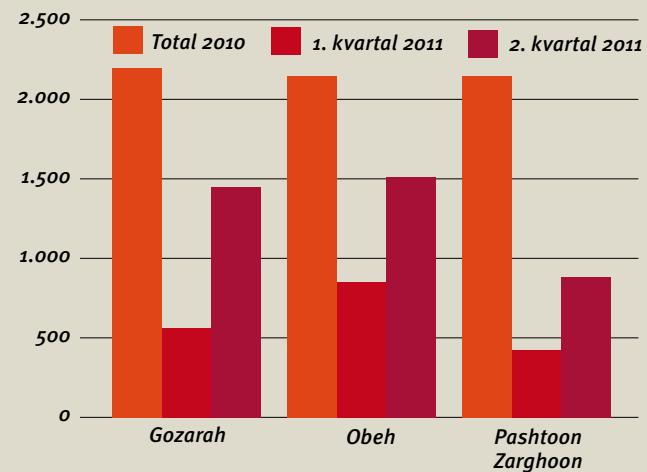
Fødsler på sundhedsklinikker Births in Health Centers



Vaccinationer på sundhedsklinikker Vaccinations in Health Centers



Konsultationer på Baby Well-klinikker Consultations at Baby Well Clinics



Samarbejdspartnere og donationer

Den positive udvikling i DAC's arbejde i Herat skyldes ikke mindst DAC's samarbejdspartnere samt de mange donationer og bidrag fra private danskere, virksomheder og foreninger.

Samarbejdspartnere

DAC samarbejder i Herat med World Health Organization (**WHO**), World Food Programme (**WFP**), The United Nations Children's Fund (**UNICEF**), Handicap International (**HI**) og det italienske Provincial Reconstruction Team (**PRT**).

WHO støtter DAC med medicin til behandling af tuberkulose og vaccinationer.

WFP støtter DAC i forbindelse med to programmer:

1. Program for supplerende mad til gravide og ammende kvinder

Dette program blev godkendt af WFP i midten af december 2010 med opstart i januar 2011. Programmet løb fra januar til maj, hvor vi modtog og uddelte mad og vitaminer til 3600 underernærede gravide og ammende kvinder. Derefter fulgte en måned uden maduddeling. Genopstarten af programmet skete i juli 2011, hvor madportionerne blev forøgede samtidig med, at portionerne nu er tilsat salt. Mad og vitaminuddelingen finder sted i alle tre distrikter, som DAC arbejder i.

2. Program for underernærede børn

Dette program støtter underernærede børn på DAC's tre ernæringscentre. WFP sørger for supplerende mad for underernærede børn under forkortelsen RUSF (Ready to Use Supplementary Food). Den overvejende ernæringskilde er jordnødder.

UNICEF støtter DAC ved at stille kølemaskiner/-skabe til rådighed.

HI samarbejder med DAC ved at tilbyde uddannelsesforløb for fysioterapeuter samt ved at stille nødvendigt udstyr til rådighed for fysioterapiafdelingerne.

Samarbejdet med det italienske PRT, har i det forgangne år ledt til, at ernæringsklinikker i alle tre distrikter nu er blevet startet op og taget i brug. PRT har endvidere i indeværende år godkendt opførelsen af tre familiekvarterer; et i hvert DAC-distrikt. Familiekvarteret, som består af et lille område i et af distrikts BHC'er, hvor jordemødre kan bo, er allerede under opførsel i Pustkoh.

DAC har også i det forløbne år været involveret i et muligt samarbejde med Danner, som er i opstartsfasen for et projekt i Afghanistan. DAC ser frem til resultatet af Danners fact-finding mission.

Partners and donations

For the positive development of the activities of DAC in Herat we are indebted not the least to the partners of DAC and to the many donations and contributions from private Danish citizens, companies and associations.

Partners

We wish to emphasize the valuable cooperation with World Health Organization (**WHO**), World Food Program (**WFP**), The United Nations Children's Fund (**UNICEF**), Handicap International (**HI**) and the Italian Provincial Reconstruction Team (**PRT**).

WHO supports DAC with medicine for treatment of tuberculosis and with vaccinations.

WFP supports DAC in connection with two programs:

1. Program for supplementary food for Pregnant and Lactating women

This program was approved by the WFP in the middle of December 2010 for initiating in January 2011. It became effective from January up to May during which period we received and distributed food and vitamins for 3,600 undernourished pregnant and lactating women. One month had to go without distribution of food. A resumption of the program was fortunately possible in July, where we were also able to increase the portions and add salt to them. Distribution of food and medicine takes place in all three districts where DAC is operating.

2. Malnourished Child Program

This program supports malnourished children at DAC's three nutrition centers. Here, WFP provides supplementary food for malnourished children, abbreviated as RUSF (Ready to Use Supplementary Food). The predominant source of nourishment comes from plumpy nuts (ground nuts).

UNICEF supports DAC by putting refrigerators and other cooling systems at DAC's disposal.

HI cooperates with DAC by offering education for physiotherapists and providing the necessary equipment for the wards.

Cooperation with the Italian PRT during the past year has given the rise of three nutrition clinics in DAC's districts. Furthermore, PRT has approved the construction of three family quarters (in addition to the existing seven), one in each district. A family quarter takes up a small part of the BHC, where midwives can live with their family. One family quarter is already under construction in Pustkoh.

Donationer

Igen i år har DAC's arbejde i Herat nydt godt af mange særdeles anvendelige donationer og bidrag. Store mængder tøj og sko indsamlet af engagerede privatpersoner, heriblandt Else & Eigil Jensen, er kommet mange trængende børn og voksne til gavn.

I forhold til sundhedsbehandlingen har DAC modtaget større mængder hospitalsudstyr fra Odense Universitetshospital og Svendborg Sygehus foranlediget af Elin Petersen. Vi har endvidere modtaget en anseelig medicindonation fra Dansk Medicin Hjælp, som sammen med ovennævnte hospitalsudstyr opbevares i MultiCenter Syd i Nykøbing Falster før den forestående afsendelse.

Carl Eltorp fra Bendix Transport i Hvidovre har sammen med MultiCenter Syd og de mange engagerede medhjælpere fra Nykøbing Falster igen i år ydet en stor indsats i forhold til at sørge for opbevaring, pakning og shipping.

En container med skolemøbler, skolebøger, tøj, sko og diverse er netop ankommet til Herat, hvor DAC afventer, at toldarbejdet falder på plads, således at udstyret kan komme trængende skoler i Herat til gavn. Endeligt modtog GDH i efteråret, som det bliver beskrevet nedenfor af næstformand i DAC's bestyrelse, Ole Julius Siemssen, et røntgenapparat fra Philips' danske afdeling.

DAC skylder alle, der har gjort en indsats for os, en varm tak. Hjælpen fra jer gør en stor forskel, og jeres donationer er af uvurderlig betydning for DAC's sundheds- og socialprojekter, som primært er til for de mindst privilegerede i Afghanistan.

Udover ovenstående donationer, har Mellemfolkeligt Samvirkes pulje "Genbrug til Syd", der dækker containere og forsendelsesomkostninger til Herat, også gavnet DAC i det forløbne år.

De tildelte midler i 2010 (modtaget primo 2011) fra puljen til humanitære, velgørende og andre almennytige konkrete formål (TFAK) under Kulturministeriets Koncerncenter (pr. 2011: Kunststyrelsen) er ligeledes kommet bl.a. DAC's sy-projekt til gode ved køb af 50 symaskiner, ligesom nogle af midlerne er blevet brugt til at opføre separate baderum til kvinder og børn.

Donation af røntgenapparat

Af næstformand Dr. Ole Julius Siemssen

I forbindelse med donationen af et røntgenapparat fra Philips' danske afdeling, deltog jeg under et besøg i Herat fra den. 20.- 27. november 2010 i overdragelsen. Apparatet, der blev formidlet af den danske NGO Global Medical Aid, var kun let brugt, men overflodig gjort i forbindelse med overgangen til digitalisering på et jysk sygehus. Forsendelsen af røntgenapparatet foregik med forsvarrets velvillige hjælp, mens installationen fandt sted med Philips' assistance fra Kabul. Det nye røntgenapparat erstattede et ældre og langt mindre funktionelt apparat på Gozarah Distriktshos-

Donations

During the past year DAC has been supported by a number of private donations and contributions. Impressive quantities of clothing and shoes have been collected by private persons, among them Else & Eigil Jensen. The clothes and shoes have benefitted a great number of children and adults in need.

Regarding the health project, DAC has received a great quantity of hospital equipment from Odense University Hospital and Svendborg Hospital. These donations were brought into effect and coordinated by Elin Petersen. Furthermore, DAC has received an impressive donation of medicine from Danish Medicine Relief that is stored at MultiCenter Syd in Nykøbing Falster together with the above-mentioned hospital equipment. The storage will last until the upcoming shipping.

Carl Eltorp from Bendix Transport in Hvidovre has, together with MultiCenter Syd and a great number of involved helpers from Nykøbing Falster, done an amazing job making storage, packing and shipping possible.

A container filled with school equipment (desks and chairs), textbooks, clothes, shoes etc. has just arrived in Herat, where DAC is waiting for the customs to finish their job. When completed, DAC will be able to distribute the equipment to needy schools in Herat. Finally, as described below by DAC's vice chairman, Ole Julius Siemssen, did GDH receive an x-ray machine from Philips' Danish branch last autumn.

DAC owes heart-felt thanks to all that have made an effort and supported DAC and not least the Afghan people. Your help is making a considerable difference for many of Afghanistan's least privileged individuals. In other words, the kind donations you bring are of a great importance to DAC's social and health projects.

Besides the above-mentioned contributions, DAC has also been given a yearly grant from ActionAid Denmark's "Recycling for the South" funds, which covers the shipping expenses to Herat.

The grant from the Ministry of Culture's National Lottery Funds, which DAC's sewing project has benefitted from, has made it possible for 50 sewing machines to be bought. In addition, some of the money has been spent on constructing bathing rooms for women and children.

Donation of an X-ray Machine

By Dr. Ole Julius Siemssen

I took part in the handover of an x-ray machine from the Danish branch of Philips when visiting Herat on November 20 - 27, 2010. The machine that was conveyed by Global Medical Aid - a Danish NGO – was just slightly used. Due to the digitization at a Hospital in Jutland it had become redundant.

While the transportation of the x-ray machine was

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pital. Donationen medførte derfor en umiddelbar styrkelse af hospitalets evne til korrekt og hurtig diagnosticing.

Mit besøg i Herat fandt sted samtidig med en konference om sundhedsforholdene i Herat-provinsen samt indvielsen af et center for narkotikamisbrugere. DAC fremlagde ved konferencen vores strategi for vaccination og sygdomsopsporing i fjerntliggende egne samt vores tiltag med Baby Well-klinikker for moder-/barn-velfærd. Tilstede var, foruden de i Herat-provinsen aktive internationale organisationer, NGO'er og lokale sundhedsmyndigheder samt vicesundhedsministeren fra Kabul, Dr. Nedera Hayat Burhani, og hendes øverste stab.

Vicesundhedsministeren var inviteret til overdragelsen af røntgenapparatet i DAC, hvilket gav anledning til en kort orientering om DAC's sundhedsprojekt og fremvisning af Gozarah Distrikthospital med den nyligt opførte børneafdeling. Hun udtrykte sin beundring for projektet og det danske sundheds-system, som hun havde stiftet bekendtskab med under et ophold i Danmark for 15 år siden.

kindly assisted by the Danish Army in Afghanistan, the installation and electrical fittings were assisted by Philips' office in Kabul. The new x-ray machine replaced an older and far less efficient machine at Gozarah District Hospital. The donation caused an immediate strengthening of correct and fast diagnosing.

A conference on health issues in the Province of Herat and an inauguration of a center for drug addicts took place simultaneously with my visit to Herat. At the conference, DAC presented its two strategies for immunization & searching out diseases as well as DAC's initiatives regarding mother/child welfare at our Baby Well Clinics. Besides international organizations, NGO's and local health authorities, the Vice-Minister of Health; Dr. Nedera Hayat Burhani and her most important staff were present.

The Vice-Minister of Health; Dr. Nedera Hayat Burhani, was invited for the handover of the x-ray machine at DAC. She had a short introduction to DAC's Health Project and a tour of Gozarah District Hospital with the newly built children's ward. She expressed her admiration for the project and the Danish healthcare system, which she became acquainted with during a visit to Denmark 15 years ago.

Næstformand
Dr. Ole Julius
Siemssen og
tolk Haji Sarver
Salehi ved
modtagelsen af
røntgenapparatet.

Vice chairman
Dr. Ole Julius
Siemssen
and translator
Haji Sarver
Salehi at
the receipt of the
x-ray machine.



En meddeelse fra Direktoratet for Folkesundhed i Herat, Sundhedsministeriet, Den Islamiske Republik Afghanistan

*Skrevet af sundhedsdirektør Dr. Rashed
Redigeret af Julie Jeeg*

DAC er en af støtteorganisationerne i det nationale sundhedsprogram, som det udspiller sig i Herat-provinsen, og har siden 1993 været en solid partner for sundhedssektionen i det regionale sundhedsministerium.

DAC's aktiviteter i Herat begyndte, da organisationen overtog en klinik i Gozarah-distrik-
tet i 1998, og som følge af forandringerne, der skete i Afghanistan omkring 2001, blev det endvidere muligt for DAC at udvide sine aktiviteter til distrikterne Obeh og Pashtoon Zarghoon. DAC står nu for driften af et distriktshospital, 2 Comprehensive Health Centers, 8 Basic Health Centers, 8 Sub-Health Centers og 3 mobile teams.

DAC's tilstedeværelse og organisationens støtte til sundhedsprogrammerne har ført til et fald i antallet af IMR og MMR (spædbarns- og mødredødelighed) især i de fjernliggende egne af provinsen. Sådanne positive tiltag viser, at det danske folk er villige til at hjælpe mennesker i nød – en gestus, som det afghanske folk sent vil glemme.

Hvad angår kapacitetsopbygning af medarbejderne på sundhedsklinikkerne; sundhedspersonale såvel som den administrative stab, så har DAC opnået særlig stor bevægenhed, da organisationen har bragt sundhedstilbuddene i provinsen op på et langt højere niveau. I samarbejde med de lokale sundhedsmyndigheder har DAC siden begyndelsen tilstræbt at implementere de nationale målsætninger og strategier for sundhed, der allerede findes i Afghanistan, i organisationens arbejde. Gennem årene har DAC af samme grund evnet at knytte et stærkt bånd til provinsens små lokal-samfund såvel som de mere fjernliggende, usikre områder.

Som læseren måske ved, så har Afghanistan gennemlevet tre

Message from the Directorate of Public Health Herat Province Ministry of Public Health, The Islamic Republic of Afghanistan

*Written by Dr. Rashed, Herat Public Health Director
Edited by Julie Jeeg*



DAC is one of the supportive organizations of health programs in Herat Province and has, since 1993, been a strong partner in the Section of Health in the Ministry of Public Health.

DAC's activities in Herat began when the organization took over a clinic in Gozarah District in 1998, and following the changes in Afghanistan around 2001, a possibility opened up to start working in the districts of Obeh and Pashtoon Zarghoon. DAC is now running a district hospital, 8 Basic Health Centers, 2 Comprehensive Health Centers, 8 Sub-Health Centers and 3 Mobile Teams.

The existence of DAC and its support to health programs have caused a decrease of IMR and MMR (Infant Mortality Rate and Maternal Mortality Rate), especially in the remote areas of the province. Such positive activities show how the Danish people is willing to help people in need – a gesture, the people of Afghanistan will always remember you for.

As regards capacity building of its professional and administrative employees of the health centers and central office in Herat, DAC has achieved special attention as it has taken the health services of the province to a higher level. In cooperation with the local authorities of public health, DAC always tries to implement the policies and strategies of public health in Afghanistan into its work. And over the years, DAC has built strong relations with the local communities as well as remote, unsecure areas.

As you may know, Afghanistan has been going through three decades of war and turmoil and at the moment, most people live in poverty where they need assistance from organizations and donors. Especially when it comes to public health, there is a continuous need of aid as the IMR and MMR are still

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årtier med krig og tumult, og som forholdene er nu, lever de fleste afghanere i fattigdom, hvor de behøver hjælp fra organisationer og bidragsydere. Især hvad angår sundhed er der et markant behov for hjælp udefra, da IMR og MMR fortsat ligger tårnhojt, hvorved tilstedeværelsen af organisationer som DAC - som repræsentant for det danske folk - til stadighed er aldeles nødvendig.

Vi håber, at de danske myndigheder og det danske folk vil fortsætte deres støtte til DAC, hvorfed organisationen vil være i stand til at forblive hos os i Afghanistan og fortsætte sundhedstilbuddene. Dette samarbejde mellem Danmark og Afghanistan vil med sikkerhed styrke det i forvejen gode forhold mellem vore lande og myndigheder.

Med de bedste forhåbninger.

Med venlig hilsen

Dr. Rashed, Herats sundhedsdirektør

very high and the presence of and help from organizations like DAC as a representative of the Danish people is still severely needed.

We hope that the government and people of Denmark will continue their support to DAC by which the organization will be able to stay with us in Afghanistan and continue its health services. This cooperation between Denmark and Afghanistan will surely strengthen the good relationship between the countries and their governments.

In best hopes,

Yours sincerely,

Dr. Rashed, Herat Public Health Director

En vurdering af fremtidsudsigterne for DAC i Afghanistan

Af Dr. Ole Frank Nielsen

DAC har været i dialog med Udenrigsministeriet (UM) i indeværende år om DAC's mulige involvering i støtte til sundhedsvæsenet i Afghanistan fra begyndelsen af 2014, når den aktuelle fase med tilsagn om fire etårige bevillinger ophører.

Udenrigsministeriet ønskede en vurdering af kapaciteten i det afghanske sundhedsvæsen i 2014, altså et kig ind i fremtiden med den viden, vi har for nuværende om, hvordan systemet fungerer. Mange vil være bekendt med, at internationale og nationale NGO'er står for driften af distriktsundhedsvæsenet i 31 af de 34 afghanske provinser. De tre provinser, hvor sundhedsministeriet selv står for driften, ligger alle omkring Kabul. I områder, hvor det er vanskeligt for NGO'er at fungere, er der indgået samarbejdsaftaler med den private sektor om at levere sundhedsydelse. Det er min vurdering, at sundhedsydelerne under sådanne forhold stort set udelukkende består i kurativ virksomhed. I sådanne områder er det lidet sandsynligt, at børn bliver vaccineret og at gravide kvinder får adgang til svangerskabsundersøgelser.

En opdragsbeskrivelse for vurderingen er blevet formulert i samarbejde med UM, hvor vægten er på kapacitetsopbygning og bæredygtighed. Fokus i vurderingen er:

1. En vurdering af den nationale sundhedspolitik med serviceydelsesmodellen med vægt på NGO'er,

An Assessment of the Future Prospects for DAC in Afghanistan

By Dr. Ole Frank Nielsen

In 2011, DAC has been in dialogue with the Ministry of Foreign Affairs of Denmark (MFA) about the possible involvement of DAC in support to health in Afghanistan from early 2014, when the present year-by-year grants come to an end.

The MFA requested an assessment of the capacity of the Afghan health system in 2014. That is to say a look into the future with the knowledge which we have at present as to how the system functions. It is probably well known that national and international NGOs/agencies are responsible for running and implementing the district health system in 31 of the 34 Afghan provinces. The three provinces, where the Ministry of Public Health (MoPH) is responsible for the activities, are all in the Kabul vicinity. In regions where it is difficult for the NGOs to function, various arrangements have been undertaken so that the private sector can take care of health services. In my estimation those health services are almost all of a curative nature and it is not likely that children are vaccinated or that pregnant women receive antenatal examinations.

Terms of reference for the above-mentioned DAC-assessment has been developed in cooperation with the MFA with emphasis on strengthening capacity and sustainability. The focus points are:

1. An assessment of the national health policy as to service delivery with emphasis on the NGOs,

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“

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sessment of the
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2. En vurdering af det mest sandsynlige scenarie for 2014,
3. En vurdering af den fremtidige kapacitet i sundhedsvæsenet med identifikation af kapacitethuller,
4. En vurdering af, hvordan NGO'er kan bidrage til at fylde sådanne huller,
5. En vurdering af, hvordan DAC kan bidrage. Dette vil blive præsenteret som flere scenarier.

DAC udfører således en opgave for Udenrigsministeriet efter gældende regler. Det er lykkedes DAC at identificere en særlig kompetent afgansk læge, Dr. Haseebullah Niayesh, som tidligere har haft ansvaret for monitorering og evaluering i Sundhedsministeriet (Ministry of Public Health) i Kabul. Han har et gedigent kendskab til sundhedsvæsenet og til Sundhedsministeriet. Fra DAC har Ole Frank Nielsen deltaget som ressourceperson.

Dr. Haseeb startede på opgaven d. 15. august 2011 med gennemgang af relevante dokumenter samt interviews med nøgleinformanter i Kabul. Ole Frank Nielsen stodte til i Herat d. 3. september og deltog i interviews og diskussioner med Dr. Haseeb indtil tilbagerejsen d. 9. september. På tilbagerejsen var det lykkedes at arrangere et møde med Den Danske Ambassade i Kabul, som var meget nyttigt.

Dr. Haseeb skal gøre sin første rapport færdig til d. 1. oktober. Denne rapport vil så blive kommenteret på af DAC og UM, og en endelig rapport forventes at foreliggende senest en uge efter, at Dr. Haseeb har modtaget ovennævnte kommentarer. Det er herefter meningen, at denne rapport vil blive brugt som grundlag for DAC's fortsatte dialog med UM.

Uden at kunne forudskikke, hvad den endelige rapport vil indeholde, kan det afsløres, at Dr. Haseeb var overordnet begejstret for DAC's arbejde. Han mente, at det var unikt i Afghanistan - og han ved, hvad han taler om. DAC yder bl.a. 24 timers service - det gør de andre NGO'er ikke. De lukker derimod kl. 14. Dr. Haseeb var også imponeret over systemer og procedurer, kapacitetsopbygning samt innovative tiltag hos DAC. Det skal også med, at reaktionen på den foreløbige tilbagemelding fra Den Danske Ambassade i Kabul tillige var meget positiv.

Det, som bliver den store udfordring for DAC's fremtidige engagement er, i hvilken udstrækning det vil være muligt fra 2014 at få finansiering fra UM. Dette vil formentlig yderligere afhænge af, om det afganske sundhedsvæsen fortsat fungerer på en måde, hvor det internationale samfund bidrager med omkring 90% ekstern finansiering af distriktsundhedsvæsenet i Afghanistan samt af visse folkesundhedsprogrammer. Sidst, men ikke mindst, vil det naturligvis afhænge af den måde, hvorpå UM på det tidspunkt vælger at anvende sine bistandsmidler.

2. An assessment of the likely scenario in the year 2014
3. An assessment of future capacity in the health sector, identifying capacity gaps
4. An assessment of how NGOs can contribute to closing such capacity gaps
5. An assessment of how DAC can contribute, through a presentation of various scenarios.

Thus DAC is undertaking an assignment for the MFA according to the current regulations. DAC has succeeded in finding a very competent Afghan doctor, Dr. Haseebullah Niayesh, who previously has been responsible for monitoring and evaluation in MoPH in Kabul. Needless to say, he has a thorough knowledge of the health system and the MoPH. Dr. Ole Frank Nielsen has participated as DAC's resource person. Dr. Haseeb started his assignment August 15, 2011, by reviewing relevant documents and conducting key informant interviews in Kabul. Dr. Ole Frank Nielsen joined Dr. Haseeb in Herat on September 3 and participated in interviews and discussions with Dr. Haseeb before returning via Kabul on September 9. DAC had agreed to have a debriefing meeting with the Royal Danish Embassy on September 10, which was very useful.

Dr. Haseeb is finalizing his initial report on October 1. This report will be available for comments in the MFA and with DAC, and a final report shall be ready about one week after Dr. Haseeb receiving comments. It is the intention that the report shall form the basis of a continued DAC dialogue with the MFA.

Without trying to preempt what the final report might contain, it is worth mentioning that Dr. Haseeb was quite satisfied with the work of DAC. In his opinion it is unique in Afghanistan, and his opinion has a very solid foundation. DAC offers 24 hours service, no other NGO does that - they close down at 2PM. Dr. Haseeb was also impressed by the systems, procedures, capacity-building and innovative initiatives of DAC. It might be added that the preliminary comments from the Royal Danish Embassy were very positive.

The major challenge for the future activities of DAC is to which extent funding shall be available from the MFA. This will also depend on the future arrangements of the MoPH, where it is likely that around 90% of funding for district health and key public health programs will come from international aid. Last but not least the potential support will depend on how the MFA at that time will decide to allocate the development funds of the ministry.

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DAC's sundhedsprojekt i tal
DAC's Health Project in Numbers

I alt / Total:

19 klinikker inklusiv Gozarah Distrikts-hospital / Health Centers including Gozarah District Hospital (GDH)

181 sundhedsposter / Health Posts (HP)

22 landsbyudviklingshold / Village Health Development Teams (VHDT)

362 (181 par) landsbysundhedsarbejdere / Community Health Workers (CHW)

4 hold supervisorer for landsbyudviklingsholdene / Village Health Development Supervisor Teams (VHDTs)

11 supervisorer for landsbysundhedsarbejdere / Community Health Worker Supervisors (CHWs)

3 mobile sundhedshold /
 3 Mobile Teams (MT)

Gozarah

Gozarah Distrikts hospital / Gozarah District Hospital (GDH)
 5 basale sundhedsklinikker / Basic Health Centers (BHC)
 3 underklinikker / Sub-Health Centers (SHC)
Opsøgende sundhedsarbejde / Outreach:
 79 sundhedsposter / Health Posts (=158 sundhedsarbejdere / Community Health Workers)
 8 landsbyudviklingshold / Village Health Development Teams (VHDT)
 2 hold supervisorer for landsbyudviklingsholdene / Village Health Development Supervisor Teams (VHDTs)
 5 supervisorer for landsbysundhedsarbejdere / Community Health Worker Supervisors (CHWs)
 1 mobilt sundhedshold / Mobile Team (MT)

Obeh

Obeh sundhedsklinik+ / Obeh Comprehensive Health Center+ (CHC+)
 1 basal sundhedsklinik / Basic Health Center (BHC)
 2 underklinikker / Sub-Health Centers (SHC)
Opsøgende sundhedsarbejde / Outreach:
 48 sundhedsposter / Health Posts (=96 sundhedsarbejdere / Community Health Workers)
 4 landsbyudviklingshold / Village Health Development Teams (VHDT)
 1 hold supervisorer for landsbyudviklingsholdene / Village Health Development Supervisor Teams (VHDTs)
 2 supervisorer for landsbysundhedsarbejdere / Community Health Worker Supervisors (CHWs)
 1 mobilt sundhedshold / Mobile Team (MT)

Pashtoon Zarghoon

Pashtoon Zarghoon sundhedsklinik+ / Pashtoon Zarghoon Comprehensive Health Center+ (CHC+)
 2 basale sundhedsklinikker / Basic Health Centers (BHC)
 3 underklinikker / Sub-Health Centers (SHC)
Opsøgende sundhedsarbejde / Outreach:
 54 sundhedsposter / Health Posts (=108 sundhedsarbejdere / Community Health Workers)
 10 landsbyudviklingshold / Village Health Development Teams (VHDT)
 1 hold supervisorer for landsbyudviklingsholdene / Village Health Development Supervisor Teams (VHDTs)
 4 supervisorer for landsbysundhedsarbejdere / Community Health Worker Supervisors (CHWs)
 1 mobilt sundhedshold / Mobile Team (MT)





Kort om DAC

DAC er en upolitisk medlemsforening, stiftet i 1984, som har til formål at "yde aktiv humanitær hjælp til ofrene for krigshandlingerne i Afghanistan og til landets genopbygning". Siden 1998 har DAC arbejdet med primær sundhed i distrikterne Gozarah, Obeh og Pashtoon Zarghoon i Herat-provinsen.

Provinsen ligger i den nordvestlige del af Afghanistan og grænser op til Iran i vest og Turkmenistan i nord. Provinsen er præget af et bjergigt landskab, men nær den iranske grænse flader landskabet ud og bliver til ørken.

Provinsen har omkring 1,8 mio. indbyggere, hvoraf hovedparten er tadjikker, som taler dari (persisk). Herat By er provinsens hovedstad og har omkring 400.000 indbyggere. Byen er et vigtig administrativt og transportmæssigt knudepunkt, og DAC har sit Afghanistan-kontor i den gamle del af Herat By.

DAC in Short

DAC is a non-political, Danish NGO founded in 1984 with the objective to "provide humanitarian aid to the war victims of Afghanistan and support the building-up of the country". Since 1998, DAC is running a primary health project in the districts of Gozarah, Obeh and Pashtoon Zarghoon in the Herat Province.

The province is located in north-west Afghanistan and borders on Iran in the west and Turkmenistan in the north. It is characterized by a mountainous landscape, but near the Iranian border the landscape flattens and changes into desert.

The province has about 1,8 mio. inhabitants of whom many are Tajiks who speak Dari (Persian).

The city of Herat is the province capital and has about 400,000 inhabitants. The city is an important center for administration and transport, and DAC has its Afghanistan office in the ancient part of the city.