



AN OVERVIEW OF ACTIVITIES 2021

MÉDECINS SANS FRONTIÈRES IN PAKISTAN

HUMANITARIAN SUPPORT TO EARTHQUAKE-AFFECTED PEOPLE IN HARNAI, BALOCHISTAN

EXPANSION OF CUTANEOUS LEISHMANIASIS TREATMENT THROUGH SATELLITE CLINICS IN BANNU AND PESHAWAR

INTERVENTION ON DRUG-RESISTANT TUBERCULOSIS (DR-TB) IN GUJRANWALA

ADVOCACY ON ACCESS TO COVID-19 VACCINE FOR UNDOCUMENTED PEOPLE

HEALTH PROMOTION SESSIONS FOR COVID-19 VACCINATION AWARENESS

MEDICAL DONATIONS AND HEALTH PROMOTION ACTIVITIES

THE MÉDECINS SANS FRONTIÈRES CHARTER

Médecins Sans Frontières (MSF) is a private international association. The association is made up mainly of doctors and health sector workers and is also open to all other professions which might help in achieving its aims.

All of its members agree to honour the following principles:

Médecins Sans Frontières provides assistance to populations in distress, to victims of natural or man-made disasters and to victims of armed conflict. They do so irrespective of race, religion, creed or political conviction.

Médecins Sans Frontières observes neutrality and impartiality in the name of universal medical ethics and the right to humanitarian assistance and claims full and unhindered freedom in the exercise of its functions.

Members undertake to respect their professional code of ethics and maintain complete independence from all political, economic or religious powers.

As volunteers, members understand the risks and dangers of the missions they carry out and make no claim for themselves or their assigns for any form of compensation other than that which the association might be able to afford them.



MSF community mental health worker Waleed Ameen holds play sessions with children at Al-Khuseif camp for internally displaced people in Marib, Yemen. MSF community mental health workers organize psychosocial activities with children of internally displaced families to promote their natural upbringing, improve their social skills and sense of cooperativeness in a complex environment.

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WHAT IS MSF

Médecins Sans Frontières (MSF) provides medical assistance to people affected by conflict, epidemics, disasters, or exclusion from healthcare. Our teams are made up of tens of thousands of health professionals, logistic and administrative staff – bound together by our charter. Our actions are guided by medical ethics and the principles of impartiality, independence and neutrality. We are a non-profit, self-governed, member-based organisation. MSF was founded in 1971 in Paris by a group of journalists and doctors. Today, we are a worldwide movement of nearly 65,000 people working in more than 70 countries across the world.

HOW WE WORK

MSF provides medical care to millions of people caught up in crises around the world.


We provide medical care to people based on need alone, irrespective of race, ethnicity, religion, gender or political affiliation. With over seven million individual donors and private foundations worldwide, more than 90 % of MSF's income comes from private sources. MSF provides medical care free of charge. Our teams conduct independent evaluations to determine medical needs and assess what assistance to provide. Different criteria determine what we do, such as the magnitude of a given crisis, the levels of illness and mortality in the population, the severity of exclusion from healthcare, and the added value we can bring to the affected people. Rapid and effective response to emergencies is at the core of our work. MSF keeps pre-packaged kits so that teams can offer rapid lifesaving assistance - from surgical kits to inflatable hospitals to cholera equipment. Our cash reserves for emergencies mean we can provide assistance quickly, when and where the need is greatest.

From large-scale catastrophes to local emergencies, MSF's network of aid workers and supplies around the world enables us to quickly respond to disasters. With 50 years' experience, we are experts in rolling out emergency responses with highly skilled medical staff and non-medical staff.

50 YEARS OF HUMANITY

In 1999, MSF was awarded the Nobel Peace Prize in recognition of the organisation's pioneering humanitarian work on several continents and to honour our medical staff, who have worked in more than 70 countries and treated tens of millions of people. During the past 50 years, MSF has responded to thousands of emergency situations and healthcare needs.

Since our creation over 50 years ago, we have provided medical assistance to people affected by conflict, epidemics, disasters, or exclusion from healthcare around the world. The service to humanity was made possible through the kind support of our 6.5 million private donors worldwide.



ROTATION I, 25/05/2021 - MSF Rescue Teams training with the fast rescue boats (RHIBs) in the Alboran sea before arriving in the SAR zone of the central Mediterranean. Sea drills are extremely important in order to be prepared and to have a good clear and confident team ready for rescues, so that improvisations are not needed when an actual rescue happens.

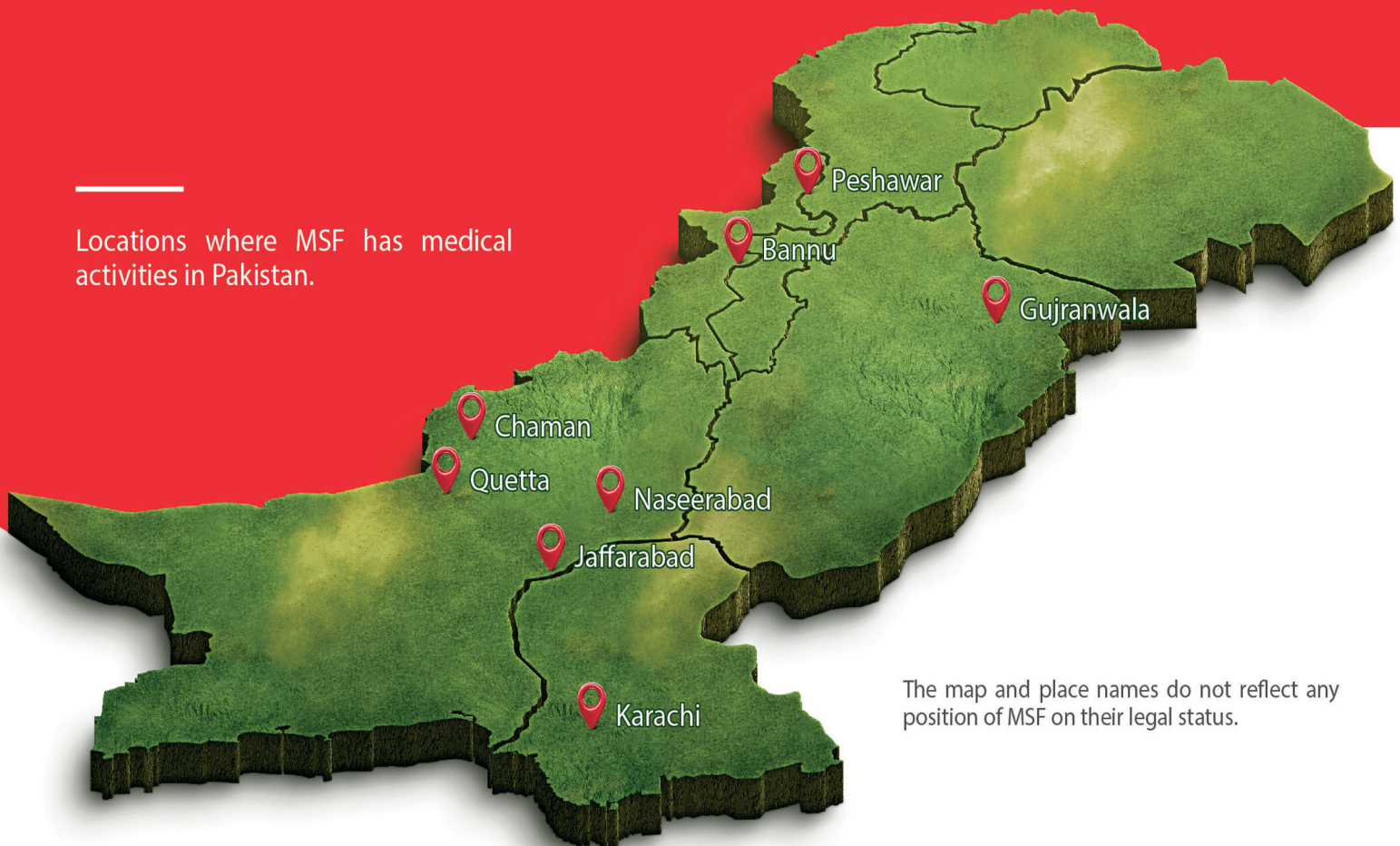
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MSF IN PAKISTAN

MSF began working in Pakistan in 1986 and today we have 1,791 national staff and 53 international staff working for us. In 2021, improving access to healthcare for women and children remained a key priority for MSF in Pakistan. MSF continued to respond to emergencies, for example the COVID-19 vaccination intervention in Sindh, and ran programmes on neglected diseases such as cutaneous leishmaniasis. In the last quarter of the year, MSF also inaugurated a medical site to diagnose and treat people with drug-resistant tuberculosis (DR-TB).

In Pakistan, MSF had a large-scale response to the 2005 earthquake, the floods of 2010 and 2016, the measles and dengue fever outbreaks in 2010 and 2013, including to the floods in Dadu in 2020 and now the COVID-19 vaccination intervention in 2021. Our activities have benefitted vulnerable communities struck by emergencies. MSF in Pakistan continues to work closely with the authorities to be prepared at all times to respond to emergencies in the event of natural disasters, conflict or the outbreak of diseases.

Locations where MSF has medical activities in Pakistan.



The map and place names do not reflect any position of MSF on their legal status.

2021

ACTIVITY HIGHLIGHTS

88,604

health promotion sessions

26,791

antenatal consultations

21,001

births assisted including 1,136 surgical interventions

10,476

severely malnourished children admitted to feeding centres

6,085

mental health individual and group counselling sessions

562

patients treated for hepatitis C

101,120

children and women vaccinated (routine immunizations)

61,650

outpatient consultations

20,184

COVID-19 vaccinations

13,377

trauma cases treated in an emergency room

6,857

patients on cutaneous leishmaniasis (CL) treatment

2,442

newborn and paediatric admissions



EMERGENCY RESPONSES

EARTHQUAKE RESPONSE IN BALOCHISTAN

An earthquake struck Harnai, Balochistan, Pakistan, 97 km east of Quetta, on 7 October 2021. According to the National Disaster Management Authority (NDMA), 20 people died and 219 were injured. The earthquake was of 5.9 (scale of Richter) and destroyed more than 320 houses. Over 5,000 partially damaged houses were reported to be non-inhabitable. MSF went to Harnai to undertake an assessment.

In December 2021, we provided support to the earthquake-affected people in Harnai by donating 500 relief kits. These items included kitchen kits, hygiene kits and basic household items, including blankets. These items helped provide relief to families in the cold weather.

MSF SUPPORT TO DISPLACED PEOPLE IN KHYBER PAKHTUNKHUWA

We are committed to respond, and support authorities in emergencies, natural disasters, disaster management and disease outbreaks.

In September 2021, MSF made a donation of life essential kits to the returning families of internally displaced populations to Tirah, Khyber district. The donation was made to the Provincial Disaster Management Authority (PDMA), Khyber Pakhtunkhwa, and included 300 hygiene kits, 100 shelter kits and 150 kitchen kits.

COVID-19 VACCINATION INTERVENTION

Over the past year there have been many demands on the healthcare system in Pakistan. The COVID-19 pandemic has been of particular concern, and the main challenge has been its impact on the provision of other regular healthcare services.

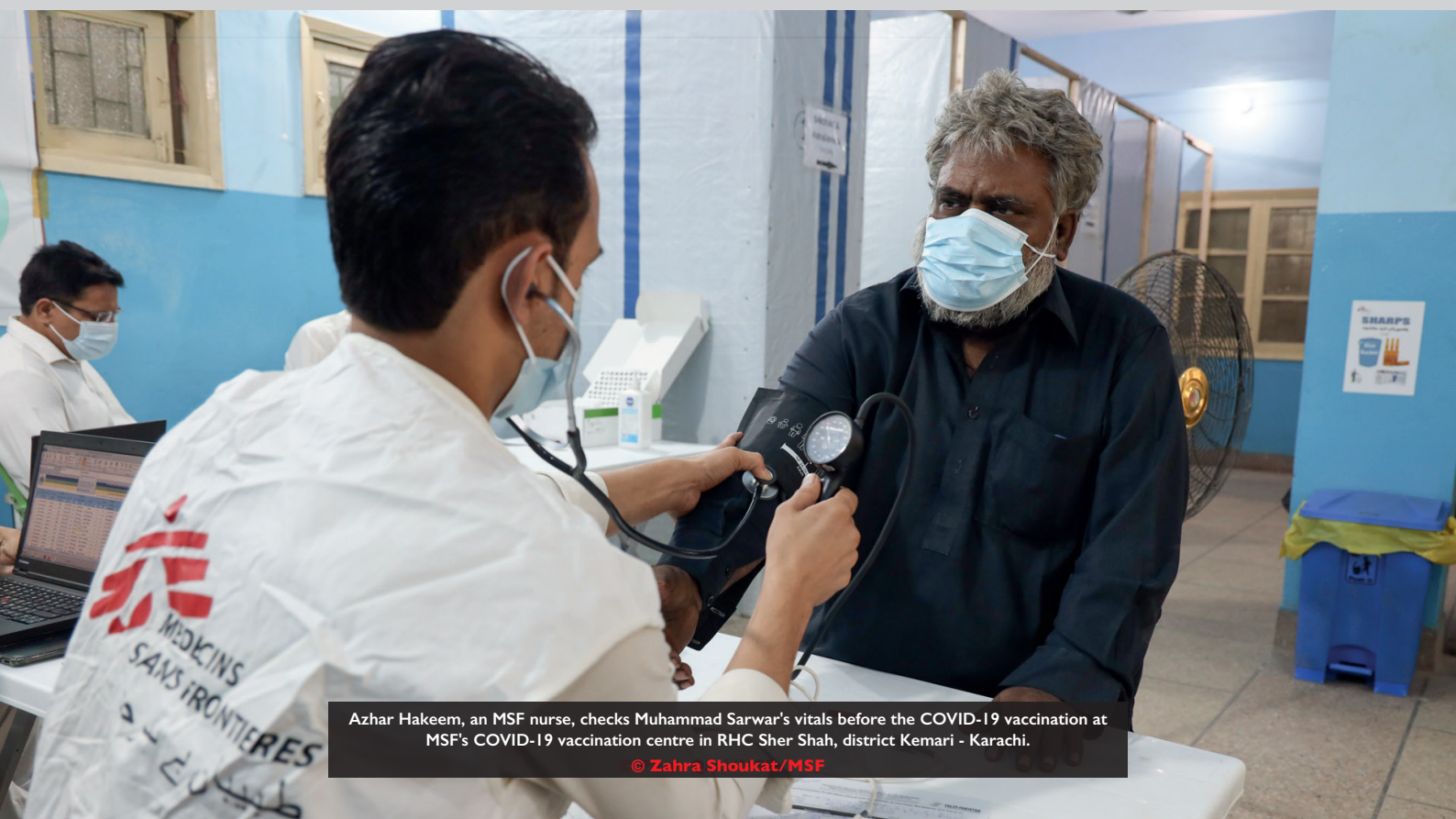
In Sindh, since September 2021, we are supporting the Sindh health department in running a fixed vaccination site in the Rural Health Center (RHC) Sher Shah that includes cold chain maintenance and management, and two mobile vaccination units covering Machar Colony and Sher Shah, Karachi. The general objective of the intervention is to reduce the COVID-19 morbidity and mortality among the populations of Kemari district. Along with vaccination services, MSF has been providing health education to support preventive measures of COVID-19 at community level through health promotion teams.

IN 2021, THERE WERE:	20,184	1,101
	COVID-19 vaccinations	health promotion (group and individuals) sessions for COVID-19 vaccination awareness

MUHAMMAD SARWAR AT OUR COVID-19 VACCINATION CENTRE

MSF nurse Azhar Hakeem meets Muhammad Sarwar, who has arrived at the COVID-19 vaccination centre to be vaccinated. It is Azhar's job to take his vital signs to determine if he needs to see a doctor or can be vaccinated right away.

"I ask patients about their medical history including blood pressure, diabetes, and any history of seizures etc. If their vital signs are not good, we refer them to a doctor at our COVID-19 centre, who carries out a consultation. The doctor then decides if the patient can be vaccinated right away, or if they must come back when they are in better health. It is important that everyone gets vaccinated, to protect themselves and others from contracting the virus."



Azhar Hakeem, an MSF nurse, checks Muhammad Sarwar's vitals before the COVID-19 vaccination at MSF's COVID-19 vaccination centre in RHC Sher Shah, district Kemari - Karachi.

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Also in response to the COVID-19 outbreak, in 2021, MSF supported the Ministry of Health (MoH) in COVID-19 sample transportation from Jaffarabad and Naseerabad districts. In addition, we also provided human resources to the hospital to ensure the smooth running of the COVID-19 ward and intensive Care Unit (ICU). we made donations of medications, medical equipment and PPE, Infection & Prevention control equipment and COVID-19 awareness material and these donations were handed over to the Medical Superintendent, Fatima Jinnah General Hospital in Quetta, Balochistan. These donations allowed the biggest COVID-19 facility in Balochistan to ensure the smooth process after MSF's COVID-19 support provided to department of health, Balochistan.

MOTHER AND CHILD HEALTHCARE IN BALOCHISTAN

In Pakistan, improving healthcare for mothers, newborns and young children remains one of MSF's key priorities. We provide around the clock emergency obstetric care and gynaecological care at our healthcare facilities, which include MSF Kuchlak healthcare facility, the District Headquarters (DHQ) hospital in Chaman, and District headquarters hospital, Dera Murad Jamali (DMJ) in Balochistan.

MSF's health facilities in Balochistan also consist of prenatal and postnatal care units. These services are available to the local community including Afghan refugees residing in Pakistan. Newborns with complications are admitted to neonate units in Quetta, Chaman and DMJ. MSF in Balochistan also supports malnourished children and mothers' health. We have outpatient therapeutic feeding units in all three locations. Our projects in DMJ and Chaman also have an inpatient therapeutic feeding facility, which contributes to an improvement in healthcare for mothers and their children in this remote area. As part of our ongoing activities, MSF also provides outpatient services and trauma cases for vulnerable people in Balochistan, offering medical services at three health centres in Quetta.

KUHLAK, QUETTA

MSF began its programme in Kuchlak, a town 20km north of Quetta city, in 2006 to cater to the needs of the local and Afghan population. MSF has been running a mother and child health centre, offering outpatient treatment for women and children, and an outpatient therapeutic feeding centre for malnourished children under the age of five. Basic emergency obstetric care is provided through the birthing unit, which is open 24-hours a day, and there is a system to refer complicated emergency obstetric cases to Quetta. Other services include health education and psychosocial counselling. The Ministry of Health's Expanded Programme of Immunisation (EPI) is also integrated into the services offered at MSF Kuchlak health centre, Quetta.

IN 2021, THERE WERE:

36,535 outpatient consultations	29,631 children vaccinated against measles and other childhood diseases	6,085 individual and group counselling sessions	4,385 births assisted	4,360 antenatal consultations
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NASEERABAD AND JAFFARABAD

Since 2008, MSF has been working in the eastern districts of Jaffarabad and Naseerabad supporting nutrition programmes for children under five. In the DHQ hospital in Dera Murad Jamali, our teams support inpatient therapeutic feeding for malnourished children with complications, a general paediatric ward, and a neonatal unit. MSF also provides basic emergency obstetric care through a birthing unit, which is open 24-hours a day. There is a system to refer complicated emergency obstetric cases to Larkana in Sindh.

MSF's health promotion and counselling teams work hand-in-hand with the medical teams, conducting regular awareness and counselling sessions to educate people about health and aware them from following practices that are medically unsafe. MSF has a network of eight mobile clinic locations and four outreach sites across the two districts.

Our outpatient therapeutic feeding centre provides essential medical care to nearly 10,000 children annually. The project also provides nutritional support services for pregnant and lactating women.

IN 2021, THERE WERE:

9,099	8,171	3,096	1,021
antenatal consultations	severely malnourished children admitted to the therapeutic feeding programme	births assisted	newborns and children admitted at neonatal unit

WATER TREATMENT PLANT AT DHQ DERA MURAD JAMALI



A water treatment plant was constructed by MSF in 2018 at DHQ hospital in Dera Murad Jamali for those visiting the MSF facility, which has the capacity of 55,000 litres and provides fresh and safe drinking water to between 700 and 800 people daily at the DHQ hospital.

© Pirah Qazi/MSF

CHAMAN

The availability of free, high-quality medical care is limited for women and children in Pakistan, particularly in rural areas. In Chaman, MSF supports medical services for women and children, including reproductive, neonatal and paediatric healthcare at DHQ hospital, 130km north of Quetta, on the border with Afghanistan. In collaboration with the department of health, our medical staff offers free, quality medical care to local population, Afghan refugees residing in Pakistan and patients who cross the border to seek medical help.

Since 2007, MSF has been supporting a 24-hour delivery room, including surgical management of complicated deliveries, a paediatric inpatient ward, a neonatal unit, and an emergency room for trauma cases. Malnourished children under the age of five are also enrolled in a feeding programme (inpatient and outpatient therapeutic feeding). Through health education sessions, our teams share knowledge on preventing measures to protect against diseases and seeking timely healthcare when needed, especially during pregnancy. Blood transfusions, water and sanitation for the health structures, and a basic laboratory are also part of our services in the hospital. MSF also supervises the women's outpatient department, which is managed by department of health staff following MSF protocols.

SADIA'S STORY

Sadia Gul Agha has travelled 2.5 hours from Afghanistan for her antenatal check-up at our facility in the DHQ hospital Chaman. Sadia was born in Pakistan and later married in Afghanistan. She has had complications during her previous pregnancies and deliveries and three of her babies died. She also suffered two miscarriages. She has four children alive.

It is Sadia's second follow-up in three months of pregnancy. She has been suffering from abdominal pain, which a laboratory test indicated was due to an infection. Sadia is prescribed for medication and to visit the hospital again in a month. Sadia is also assessed for malnutrition by measuring her mid-upper arm circumference. MSF teams also support a nutrition programme for pregnant and lactating women, and Sadia will be given nutritional support until her baby is born or reaches six months of age, depending on her condition. "Where we live in Afghanistan there is no doctor or any good health facilities I can go to for a checkup, so I have to come to Pakistan. I stay at my mother's house overnight and then travel back. I trust this facility so I prefer to come here," says Sadia.

IN 2021, THERE WERE

13,337 trauma cases managed in the emergency room	13,332 antenatal consultations	4,737 births assisted, including 302 surgical interventions	1,490 severely malnourished children admitted to the therapeutic feeding programme	798 newborns and children admitted at neonatal unit
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Saman, a community midwife, checking the Mid-Upper Arm Circumference (MUAC) of Sadia, who has travelled all the way from Afghanistan for her antenatal check-up at MSF's facility in the district headquarters hospital in Chaman.

© Zahra Shoukat/MSF





“ This newborn baby is ready to be discharged from the newborn intensive care unit (NICU) after being kept under close observation at the district headquarters hospital (DHQ) Dera Murad Jamali (DMJ), in Balochistan, Pakistan, (August 2021), DMJ, where MSF has been running a mother and child health project since 2008”.

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CUTANEOUS LEISHMANIASIS

Cutaneous leishmaniasis (also known as oriental sore, tropical sore, chiclero ulcer, chiclero's ulcer or Aleppo boil) is a skin infection caused by a parasite transmitted by the bite of a phlebotomine sand fly. It is a public health burden and considered to be a neglected tropical disease in Pakistan. It is endemic in the regions of Balochistan and Khyber Pakhtunkhwa.

Although not life-threatening, CL can cause severe physical disfigurement that leads to stigmatisation and discrimination. The first-line treatment for CL is meglumine antimoniate, but this drug is not yet locally produced in Pakistan and therefore the health authorities have to rely largely on international actors such as the World Health Organization and MSF for its importation. When the drug is available in the informal open markets, it is so expensive that the poorer people, who are mostly affected by the disease, cannot afford it. MSF is one of the main providers of CL treatment services in Pakistan. MSF is lobbying with health authorities about possible initiatives for drugs availability and after discussions on different forums, the health authorities are showing more interest and offering support to overcome the CL burden on health system.

MSF's cutaneous leishmaniasis projects fill a noticeable gap in the health system by providing care to patients in specialised treatment facilities, ensuring a steady supply of safe and effective medication, offering psychological counselling, and increasing awareness about treatment and prevention. In 2021, MSF Pakistan has established its first satellite clinic in the outskirts of Peshawar at Rural Health Centre (RHC) Badhabher and second at Basic Health Unit (BHU) Talaband, to ensure medical care for people suffering from cutaneous leishmaniasis. The new clinics have been set up in collaboration with the department of health, Khyber Pakhtunkhwa. It will help increase diagnosis and treatment of the skin disease in Peshawar and surrounding districts.

Today in Pakistan, MSF has five CL centres and two satellite clinics; 3 in Quetta: Kuchlak in Balochistan and two CL centres and two CL satellite clinics in Bannu and Peshawar in Khyber Pakhtunkhwa.

MSF is also conducting a clinical trial on alternative methods of treatment for cutaneous leishmaniasis. We advocate for cutaneous leishmaniasis treatment to be accessible, and affordable..

In 2021, MSF screened 9,458 patients, and started 6,857 patients on treatment for CL in Balochistan and Khyber Pakhtunkhwa



Shabbir, 10, has lesions caused by cutaneous leishmaniasis on his forehead and hand. He is under treatment at MSF's centre in Benazir Bhutto Hospital, Quetta, Balochistan.

© Zahra Shoukat/MSF

CUTANEOUS LEISHMANIASIS CENTRES IN BALOCHISTAN

MSF runs three diagnosis and treatment centres for cutaneous leishmaniasis (CL) in Balochistan; at Kuchlak Health Centre, Mohtarma Shaheed Benazir Bhutto General Hospital (MSBBGH) in Marriabad town, and Bolan Medical Complex (BMC-H) both in Quetta. MSF is one of the biggest health care providers for CL in Balochistan province; here the CL patients have free access to specialised CL treatment. All the MSF services are completely free of cost.

AHSAN ULLAH AT MSF'S KUCHLAK CUTANEOUS LEISHMANIASIS CENTRE

Ahsan Ullah, 19 years old, is at MSF's Kuchlak healthcare facility for his routine CL treatment. He has lesions on his hand and foot but because he did not know what it was he did not come for treatment immediately and his foot became so swollen that he couldn't even walk. It is his 26th day of treatment and he only needs a couple of more doses.

"I went to a private hospital, where the doctor recommended an expensive treatment that I couldn't afford. One of my relatives then told me about MSF's centre and that it was free and a good place. So I came here on his advice." The lesion has been treated but it has left a mark. Ahsan, however, is not worried. "The scar is not a problem. The important thing is that the lesion has been treated. I was in severe pain but now I can walk easily."

IN 2021, THERE WERE

4,501
patients on
treatment for CL

4,287
patients treated
for CL

4,109
health promotion
(group and individuals)
sessions conducted for CL



Ahsan Ullah, 19-year-old has cutaneous leishmaniasis lesions on his hand and foot. He is at MSF's CL centre for his routine treatment of the lesions in Kuchlak healthcare facility, Quetta.

© Zahra Shoukat/MSF

CUTANEOUS LEISHMANIASIS CENTRES IN KHYBER PAKHTUNKHWA

MSF provides diagnosis and treatment of cutaneous leishmaniasis (CL) at the Naseer Ullah Khan Baber hospital in Peshawar. It is one of the few treatment centres in Khyber Pakhtunkhwa providing free of cost quality diagnostics and treatment to patients with cutaneous leishmaniasis who come from different parts of Khyber Pakhtunkhwa, including the districts that were previously part of FATA.

DECENTRALISATION OF CL ACTIVITIES IN PESHAWAR AND BANNU AND ESTABLISHMENT OF SATELLITE CLINICS

In September and November 2021, MSF established two new satellite clinics (a separate physical facility available for patients away from big hospitals but connected administratively) at Rural Health Centre (RHC) Badhabher and BHU Talaband, to expand medical care of cutaneous leishmaniasis (CL) in Peshawar district.

The satellite clinics was set up in collaboration with the health department to reach out to infected and vulnerable people and increase diagnosis and treatment of CL. Patients visiting Badhabher and Talaband clinics and if diagnosed are referred to MSF's CL centre in the Government Naseerullah Khan Baber Memorial Hospital (GNKBMH).

IN 2021, THERE WERE:

2,699
patients
screened for
CL

1,745
patients started
on treatment

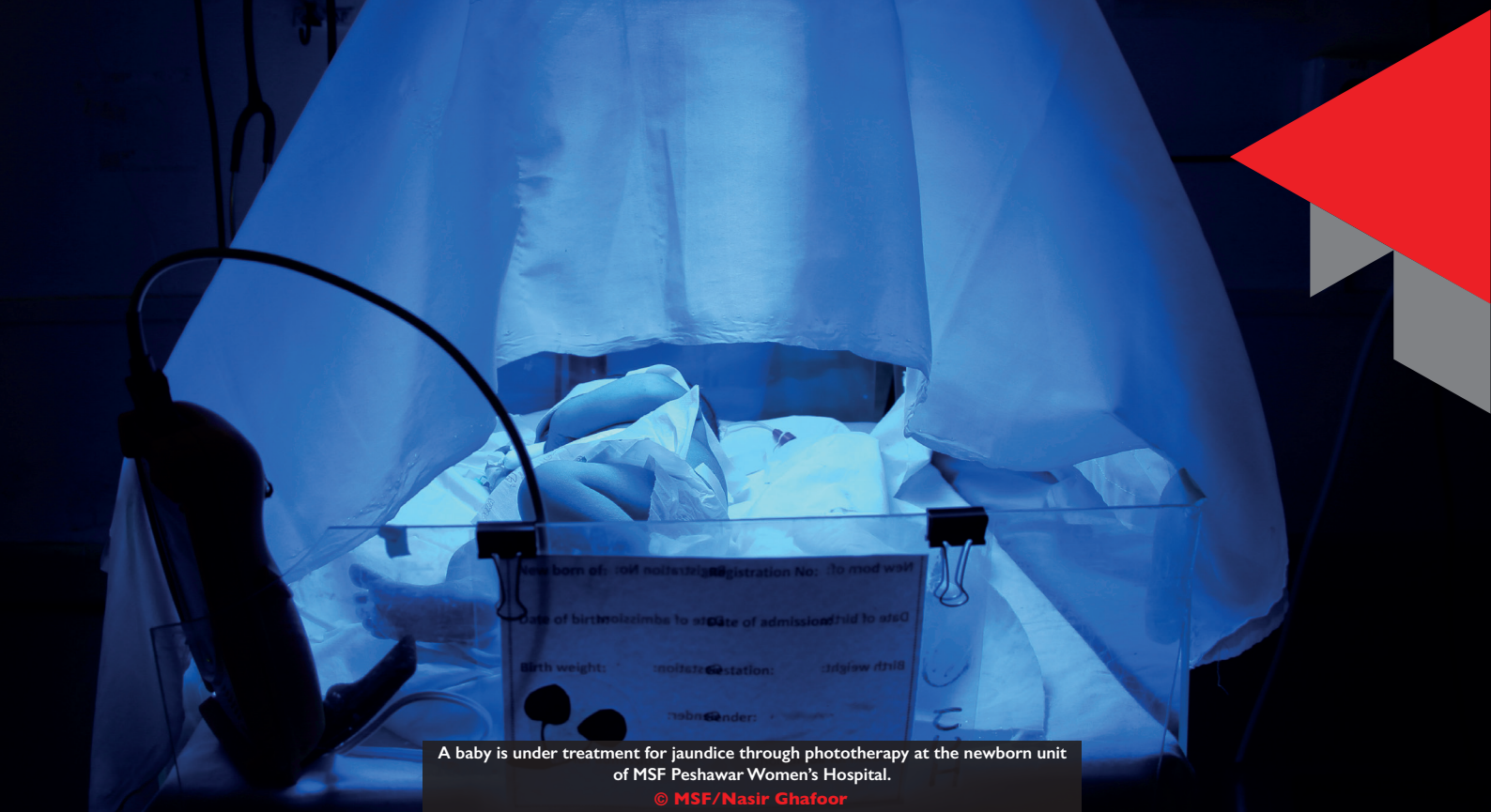
BANNU

MSF's cutaneous leishmaniasis (CL) centre at Bannu DHQ hospital in collaboration with the department of health is offering services to patients from the southern districts of Khyber Pakhtunkhwa, including some of the merged districts of Khyber Pakhtunkhwa, region who have limited access of treatment due high security reasons. This centre was MSF's fifth cutaneous leishmaniasis treatment facility in Pakistan and the second in Khyber Pakhtunkhwa when opened back in 2020.

IN 2021, THERE WERE:

800
people tested
for CL

611
patients started
on CL treatment



A baby is under treatment for jaundice through phototherapy at the newborn unit of MSF Peshawar Women's Hospital.
© MSF/Nasir Ghafoor

MOTHER AND CHILD HEALTHCARE IN KHYBER PAKHTUNKHWA

PESHAWAR

In 2021, MSF marked 10 years of providing medical care for pregnant women and newborns at Peshawar Women's Hospital. The hospital offers free of charge comprehensive emergency obstetric and neonatal care for patients from socio-economically disadvantaged situations, including refugees and internally displaced people. The obstetric facility has 24 beds, with a labour room, delivery room, and operating theatre. The hospital offers 24-hour emergency level care for women suffering from complicated pregnancies and difficult deliveries.

The hospital works with BHUs in Peshawar district and accepts women referred from the BHUs and other medical structures in Khyber Pakhtunkhwa. The hospital has a 15-bed high dependency unit for the care of new-borns with severe medical conditions.

Since 2011, 49,108 women have been admitted to the inpatient department and more than 44,450 births have been assisted, including 5,023 caesarean sections. 5,504 neonates have been admitted to the newborn unit of the hospital. The outreach and health promotion teams form an integral part of the hospital and they have conducted countless health education sessions to increase the awareness of the patients and community.

IN 2021, THERE WERE:

19,228

outpatient consultations

8,969

women admitted to the inpatient department

7,651

births assisted, including 836 caesarean sections

623

neonates admitted to the neonatal ward

DRUG-RESISTANT TUBERCULOSIS (DR-TB) TREATMNET IN GUJRANWALA, PUNJAB

Tuberculosis is one of the world's deadly infectious diseases. As per the World Health Organization (WHO), Pakistan ranks fifth among tuberculosis high-burden countries and fourth for drug-resistant tuberculosis worldwide. Tuberculosis is caused by bacteria that spread through air droplets and usually affects the lungs. Tuberculosis can become resistant to medications if patients don't follow their treatment properly and thus the disease evolves into drug-resistant tuberculosis (DRTB). The treatment for DRTB can take months and it makes the patients vulnerable in the community due to the associated social stigma. When patients are resistant to the two most powerful first-line antibiotics (rifampicin and isoniazid), they are considered to have multidrug-resistant TB (MDR-TB).

In November 2021, MSF Pakistan opened its first DR-TB project in the country, at the district headquarters teaching hospital in Gujranwala, in collaboration with the Provincial Tuberculosis Control program Punjab (PTP) and the primary and secondary healthcare department of Punjab. Our new project provides free diagnosis and treatment to patients with DR-TB and offers a specialized model of care with diagnosis and treatment under one roof. The Programmatic Management of Drug-Resistant Tuberculosis (PMDT) site has 10 Gene-Xpert machines (a new and faster testing method for tuberculosis) making it the only medical site with the capacity to diagnose a large number of patients in the district. The machine can find out if a person is infected with TB, and also if the TB bacterium of the person has resistance to one of the common TB drugs, rifampicin.

The MSF project has an outreach component targeting community awareness and community-based treatment. MSF is also building a network in Gujranwala and surrounding districts, with Basic Management Units (BMUs) for early detection of potential DR-TB patients to be treated at the Gujranwala PMDT site.



Inauguration of MSF Pakistan's first MDR-TB project in the country, at the district headquarters teaching hospital in Gujranwala, in collaboration with the Provincial Tuberculosis Control program Punjab (PTP) and the primary and secondary healthcare department of Punjab
© Zahra Shoukat/MSF

HEPATITIS C

MSF is focused on providing medical assistance to communities where there is a high prevalence of disease, including hepatitis C. Hepatitis C in Pakistan is a major public health concern. It is estimated that at current rates of progress, the prevalence and incidence of hepatitis C and hepatitis C-related mortality will continue to increase until 2030.

Hepatitis C is a viral infection that primarily affects the liver. An individual can be infected with hepatitis C for many years without experiencing any physical symptoms, but if left untreated it can lead to cirrhosis and liver cancer, resulting in the need for a transplant (and in the absence of this, death). Hepatitis C is transmitted by the exchange of blood and intimate bodily fluids. This may occur through unsafe practices in the household or community, such as for example barbers re-using razorblades for several clients; unsafe injection practices in healthcare and in drug use; unsafe sex; and the transfusion of unscreened blood and blood products. It has been estimated through global mortality data that hepatitis viruses (A, B, C, D and E) comprise the seventh leading cause of death worldwide, killing as many people as the human immunodeficiency virus (HIV) and tuberculosis (TB).

There is no vaccine for hepatitis C. As a result, it is possible to contract the virus more than once. The only way for an individual to clear hepatitis C permanently from their system is to undergo curative treatment, and subsequently to exercise effective preventive measures.

MODEL OF CARE FOR HEPATITIS C IN KARACHI, SINDH

Machar Colony is a densely populated slum on the edge of Karachi harbour, where roughly 120,000 people live in polluted, unsanitary conditions. Most lack access to clean water and proper waste disposal. Since 2015, MSF has been running a programme for hepatitis C, a major health concern in Pakistan which has the second-highest burden of the disease in the world.

MSF has developed a simplified model of care for hepatitis C, providing screening, diagnosis, treatment, health education and patient support services at the primary healthcare level under one roof. MSF aims to reach every individual above 12 years of age in Machar Colony, and advocates for better and free of cost diagnostic and treatment options for hepatitis C patients in Sindh. The teams offer patient support counselling services, and also run health promotion activities to raise awareness about the disease.

MSF is implementing a household screening strategy, whereby teams screen all members of a patient's family, since hepatitis C is highly infectious. The project also targets high-risk occupational groups and conducts screening camps in the community in Machar Colony to actively identify the infected patients.

IN 2021, THERE WERE:



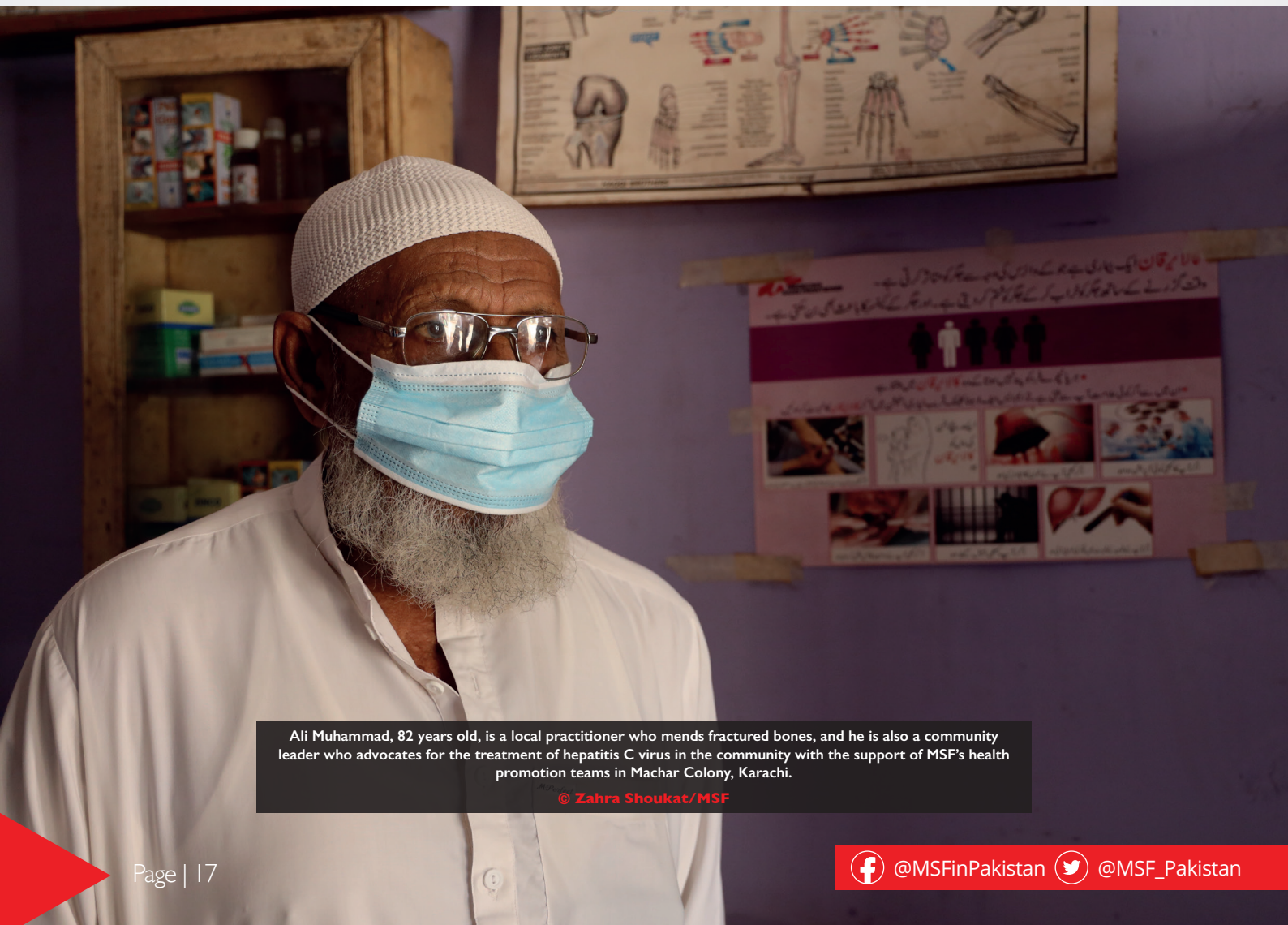
ALI MUHAMMAD, A COMMUNITY LEADER

Ali Muhammad, an 82-year-old traditional healer, treats bone fractures and minor injuries (open wounds) for people who come to his clinic in Maari Chowk, Machar Colony, Karachi.

Ali Muhammad met MSF's hepatitis C health promotion teams two years ago during their community engagement and awareness activities in Machar Colony. The team spoke to him about hepatitis C and explained how it was spreading in Machar Colony. Health promotion teams are an integral part of MSF's hepatitis C programme, and they raise awareness about hepatitis C, its treatment and prevention. They organise community meetings, outdoor gatherings and individual sessions, and they also encourage people to get tested for hepatitis C.

"Information about the virus is important for everyone to be aware of. I came to know about hepatitis C in detail after meeting the MSF health promotion team and I started raising awareness from my home and business and told people about this virus and how to guard against it", explains Ali Muhammad. He has also shared the information with the 17 members of his family.

Haji Muneer, a health promoter says, "we explained to him about the cleaning and disinfection of his instruments and equipment before and after use and how to dispose of the used bandages/cotton. He has applied these safety measures in his daily work." "I love to work for the betterment of people, and such diseases need proper attention. Health promotion has helped in spreading awareness amongst the community. I encourage people to get tested for hepatitis C in Machar Colony especially at the MSF clinic as it is free of charge," says Ali Muhammad.



Ali Muhammad, 82 years old, is a local practitioner who mends fractured bones, and he is also a community leader who advocates for the treatment of hepatitis C virus in the community with the support of MSF's health promotion teams in Machar Colony, Karachi.

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ADVOCACY

ACCESS TO HEPATITIS C CARE FOR PATIENTS IN SINDH

With an overall objective to advocate for access to the whole cascade of hepatitis C care including test, treatment and follow-ups for patients in Sindh, bilateral discussions with health authorities remain centred around the adoption of the Sindh Hepatitis C action plan (2020-2022) by the government, which was designed in collaboration with all major stakeholders. Being identified as a “catalyst for change” project, advocacy for improved access to hepatitis C care is an important objective for MSF. In 2021, MSF mainly focused on enhanced engagement with health authorities, including legislators, through bilateral meetings.

ADVOCACY ON CORRECT USE OF LABOUR-INDUCING DRUGS IN KHYBER PAKHTUNKHUWA

In the MSF maternal health units in Pakistan, we see women suffering from complications caused by the misuse of labour-inducing drugs prior to their admission to MSF facilities. Drugs such as oxytocin and misoprostol are easily available and used by unskilled birth attendants or other unauthorised care providers to speed up and induce contractions.

Continuing our efforts to advocate for the correct use of labour-inducing drugs in Khyber Pakhtunkhwa, MSF met with health authorities and legislators and discussed about the implementation of recommendations of consultative sessions to reduce mother and child mortality. The focus remained on a review of existing laws and regulations, capacity building of department of health (DoH) staff and raising public awareness.

As a result of advocacy efforts, a focal person has now been nominated within the DoH for coordination with MSF. DoH Khyber Pakhtunkhwa agreed to create a steering committee to address the issue of misuse of labour-inducing drugs.

COVID VACCINE ACCESS FOR UNDOCUMENTED POPULATION IN PAKISTAN:

Lack of access to the COVID-19 vaccination for undocumented people remained a focus area for MSF in 2021. In September 2021, the health authorities of Kemari district issued permission for MSF to vaccinate the undocumented population in Machar Colony and Sher Shah in Karachi.

MEDICAL DONATIONS

In 2021, MSF made multiple donations of medical items and equipment to support the health authorities in Khyber Pakhtunkhwa, Balochistan and Punjab.

Donation of Personal Protective Equipment (PPE) kits, including face masks, gloves, gowns and hand sanitisers were made to the National Disaster Management Authority, the DHQ Gujranwala in Punjab, and to local health authorities or hospitals in Karachi, Peshawar and Dadu districts.

MSF also donated insecticides to help prevent dengue to the Vector-Borne diseases department of the Khyber Pakhtunkhwa Health Directorate when there was an upsurge in cases in the province.

FACTS AND FIGURES

BUDGET IN 2021

IN EUROS 14,072,407.36

IN PAK RUPEES 2,453,599,155.38

WHERE DID THE MONEY COME FROM IN 2021?



■ Private Donation

HR STATISTICS 2021

	Number of staff	Percentage
Pakistani National Staff	1,738	95.5%
International field staff	53	4.5%

PROJECT

BUDGET (RS.)

Karachi	162,556,164
Quetta District	244,605,776.33
Naseerabad & Jaffarabad	368,727,697.87
Chaman	391,544,728.47
Gujranwala	47,149,956
Peshawar and Bannu	548,900,705
Emergency Response	33,848,160
Medical Donations	250,430,633
COVID 19 response budget	39,042,613

LIST OF ACRONYMS/ ABBREVIATIONS

PMDT	PROGRAMMATIC MANAGEMENT OF DRUG-RESISTANT TB
DHQ	DISTRICT HEADQUARTERS
DR-TB	DRUG RESISTANT TUBERCULOSIS
MDR-TB	MULTI-DRUG RESISTANT TUBERCULOSIS
HEP C	HEPATITIS C
CL	CUTANEOUS LEISHMANIASIS
MOH	MINISTRY OF HEALTH
MOI	MINISTRY OF INTEROR
TB	TUBERCULOSIS
GNKBMH	GOVERNMENT NASEERULLAH KHAN BABER MEMORIAL HOSPITAL
MSBBGH	MOHTARMA SHAHEED BENAZIR BHUTTO GENERAL HOSPITAL
BMC-H	BOLAN MEDICAL COMPLEX HOSPITAL
DOH	DEPARTMENT OF HEALTH
KPK	KHYBER PAKHTUNKHUWA
PPE	PERSONAL PROTECTIVE EQUIPMENT
BMU	BASIC MANAGEMENT UNIT
BHU	BASIC HEALTHCARE UNIT

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MSF health promotion team heading towards to conduct breastfeeding awareness session during World Breastfeeding week with pregnant and lactating mothers at village Kareem Bux Khoso, Jaffaraabad district Dera Murad Jamali.

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