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Jaipur Foot Camp Brings Renewed Hope to Landmine Victims in Kabul

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Help Handicapped International

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It is experiences like this that invite Help Handicapped International (HHI) to organize camps in various parts of the world for the free amputees of Jaipur, an Indian prostheses. These camps have proved to be durable, versatile and cost-efficient.

**Background**

HHI has focused its work in the strife-torn areas of Kashmir, Burundi, Sudan and recently, Afghanistan. The number of landmine amputees in these areas is overwhelming, and concerted relief efforts are limited due to shortages of funding, impassable geographical terrain and inadequate security considerations.

In light of the nearly 300,000 amputees—mostly landmine and war victims—an advance HHI team went to Kabul in August 2003 to explore the possibility of conducting a Jaipur Foot Camp there. Discussions were held and officials promised whatever assistance was possible for the war-affected city. It was decided that a one-month camp would be conducted at the orthopedic center inside Waizt Akbar Khan Hospital in Kabul. Although the technicians at this center were inexperienced in Jaipur foot technology, they could provide valuable assistance to the team from India, as well as act as interpreters.

The team working at the camp in Kabul was composed of a project coordinator, a counselor and experienced technicians. Machines, tools and raw materials were flown into Kabul from India in October 2003.

In order to notify survivors in the area about the camp, the following steps were taken:

- Banners were hung at strategic places in Kabul, especially at the entrances into Kabul from the provinces.
- Pamphlets were placed at various locations within the city, on many cabs and buses in Kabul as well as distributed through young people who normally sell newspapers at traffic junctions in Kabul.

**Announcements were made on the local radio and television.**

- Journalism from three local newspapers—Ameen, Hind and Kabul Times—were invited to and carried the activities of the camp prominently in their newspapers.
- An FM channel—Radio Sadae Azadi—also covered the event.
- Kabul television featured the activity in their weekly "Health" program.
- HHI staff went to some health centers around Kabul and requested they send their handicapped patients for free fitting of the prosthesis.

This multi-media coverage helped to mobilize beneficiaries and over 400 limbs were fitted at the camp within a one-month time period.

The camp was a unique experience both for HHI as well as the amputees. Indo-Afghan relations have always been warm, so the HHI team was well-received, and they built a rapport with the local officials, beneficiaries and the technicians.

**Conclusion**

The experiences related by some of the amputees were heart-wrenching. The joy of being able to walk again within a few hours of entering the Jaipur Foot Camp was a sight worth seeing. Dr. Najeeb, a practicing medical doctor in Paghman (about 40 km from Kabul) came to the camp on a Friday when his clinic was closed. Being a landmine-impacted himself, he understood the plight of the hundreds of thousands of his countrymen waiting for prostheses. He said, "I am really grateful to this team from India carrying out such humanitarian work."

The concerned ministries of the government of Afghanistan were also very cooperative and requested that HHI organize more camps, especially in the provinces where humanitarian activity has been very limited. After the severe Afghanistan winter, HHI plans to conduct additional camps in Gharmi, Khost, Jalalabad, Mazar-e-Sharif and Kunduz provinces.

Photos: Dr. Mehta, Trustee

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As mentioned in the introduction, during the analysis of the reports, valuable information was also encountered that is related to technical and operational deployment of equipment. For instance, the report, The Severe Duty Vegetation Shield Technical Testing of Capability by the U.S. Night Vision and Electronic Sensors Directorate (NVESD), online at http://www.nvessd.mil/demining/pubs/ clearance/tec_test_report.asp mentions the fact that fence wire tangled up in the rotating machinery and inflicted considerable damage/disturbances during the testing. This finding could also have implications for the operational use of this type of equipment, not only in forensic minefields but also in dense vegetation where plants-like plants can have the same effect. Hours may be needed for the machinery to become operational again. Important feedback from the reader could be an indication that similar information would be worthy of being included in DIETEC.

**Final Remarks**

Care should be taken when using the term "lessons learned." In general, the process followed for compiling a "lesson learned" is quite complex and consists of an information-gathering and processing chain spread over a considerable time period. For instance, the Swedish FOID and Demining Centre (SWEDEC) lessons learned project includes several phases such as the collection of an "experience report" using a standard form, which is then analyzed and commented on in an "extended experience report." This stage is followed by validation of the information (i.e., Did it happen several times? Is it useful for another organisation? etc.), which leads to the implementation phase and the compilation of the "lessons learned report." A similar process is being applied by the Department of Energy (DOE) Corporate Lessons Learned Collection database, for example. However, this is not the approach followed at present by the JMU MASC lessons learned database and is, in our opinion, at this moment in time not necessary, mainly due to the given structure of the database.

Both the JMU MASC database and DIETEC are currently being evaluated by an international team of "experts." No final results are available yet, but preliminary results of the assessment indicate that an important percentage of the DIETEC experiences have been classified as relevant to the TK process.

The ITEP would like to get your feedback and opinion when you are visiting the databases via http://main.jmu.edu/deployed or http://www.itep.nl.

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