

THE YEAR 2012

The First Medical Mission, 18th Feb-7th March

Location 1, Apapa- Lagos

The team was led by Dr. Stuart Quartermont arrived for another mission. The first few days was given to God in Port Harcourt, he is also the head of Medical Mission International in Texas, United States. Later we flew to Lagos for Apapa Local Government Medical Mission. The crowd was so much that we called for- back-up” luckily Cliff Jarrell and Keith Lowton responded. Nigeria and for most countries in Africa has a high prevalence of non-communicable diseases such as cancer, diabetes, cardiovascular diseases, obesity, disorders ,etc.

We saw it all, thousands of patients. The population of Lagos state is about 20 million which is more than some six African countries combined, with the urban middle class often suffering more than the rural poor .People with huge surgical cases of tumors came from far and near hoping the team can help everyone in one week (Hope may not be a strategy in developed countries but certainly is an effective medicine here) due to lack of facilities and finance, many of them suffer under conditions that would normally evolve into major problems, some them wait for ten years for hernia that cost one hundred US dollars, some can even wait forever. By the time it was over, 39 patients were operated upon by the team and over 1000 patients were seen clinically and treated. Jarrell joined us from Ghana where he has gone to assist Dr. Fred Massey at another medical mission in the north of that country. Our British friend Keith Lowton also joined us during the Lagos mission. Some cases were carried over till the next mission of our partner organization Earthwide Surgical Foundation of Dr. Brian Camazine. As always in Africa, life is a daily struggle, our hotel caught fire on the last day of the mission, everyone was surprise to see fire service and police responded to our 911 call and put off the fire. Our very own Obuks Ibru was a life saver, she rose to the occasion and took us in that night .We flew to Benin the next day for the last round of mission in Sapele ,PROFOH mission activities in Lagos was published in Nigeria national dailies **This day** and **Vanguard** Newspapers.

Location 2, Sapele Delta State.

The Venue was Charles Obule Medical Centre. The team performed 21 procedures on 14 patients as some had two surgeries each, clinical consultations were about 300 patients. Chief Obule is a founding member of PROFOH ,whenever we got stuck in our interventions, he is always there to bail us out. He picked us at Benin airport and lodged in the city 7 stars hotel and provided Nigeria secret service and six mobile police officers to ensure human protection. Dr. Longinus, old friend joined us from Owerri. Dr Quartermont and his wife on that trip were not used to policing every hour, even at night, as the police officer will knock at their door to be extra sure of their safety. We drove by road to Port Harcourt to enable them fly back to the US.

The Second Medical Mission, 19 June-13 July.

Location 1,Jalingo and Zing-Taraba State.

The team arrived at Lagos airport and flew to Abuja immediately, another flight to Yola before spending another three hours by road to Jalingo and back to the venue, down town Zing Government Hospital in Taraba State after a long flight by the team from the US Lagos then Abuja another flight to Yola ,Adamawa State. We paid a courtesy visit to our chief host and sponsor .H.E. Mr. Danbaba Suntia the Executive Governor of Taraba State who express his profound appreciation to the organization for being

real and genuine. He directed his personal physician Dr Ahmed Kara to ensure everything was provided to enable the team perform the mission with ease, We earlier had dinner with the Governor to celebrate Dr Conrado Ordonez birthday ,he repeated the invitation on the last day of the trip to say thank you to the team at Government house. The mission had the highest numbers of volunteers for the year, eleven from the United States, one from India, seven Nigerians .Taraba is considered to be disadvantaged State as Zing was so underdeveloped that we had our hotel accommodation in Jalingo the State capital meaning we have to drive four hours every day to Zing for our mission .Almost half of the team had malaria and typhoid ,water and living conditions was poor ,we equally had quick recoveries as God was on our side.

Location 2, Bali-Taraba State.

The mission train moved to another local Government, Bali was tagged a mission of frustration and sense of confusion without electricity as most of the surgeries were performed in darkness thank goodness there were Nokia phone touch and conventional touch lights. Yet some interesting cases in Bali included a pregnant young woman who self medicated and labored for days before her father rushed her to our venue under an emergency condition, we took her into the operating room for C-Section. The cute baby was delivered blue color struggling for life .Ambu bag is a luxury here and we cannot allow the innocent baby to die ,So Stefan Quartermont broke the safety rules of volunteer ,in accordance with our tradition to do whatever it takes to save a life, he had to performed mouth-to-mouth for about 10-15 minutes including prayers the miracle baby began to breathe on his own. During our almost three weeks in Taraba State we performed over 100 surgeries and more than 900 patients for clinical consultations/treatment. We concluded in Port Harcourt came back to Lagos before flying back to the US.

The Third Social &Medical Mission,24th Sept.18 Oct

Location 1, Port Harcourt, Owerri & Aba.

The team flew directly to Port Harcourt and drove to Owerri by road for water projects and inspected a few, made an assessment of water needs in four communities sunk one new borehole for portable clean drinking water in village near Orlu town, next destination was Abia State where the team monitor several water projects funded by our partners under the leadership of Dr. Sunny Okorie a Nigerian based in the United States. Clinically, at Dr Odoyin Clinic in Owerri about 35 people received free surgical operations were over 100 were seen clinically by the time we left that part of Nigeria.

Location 2, Lagos.

The train moved to Lagos, saw few patients and made evaluation for surgical cases ,searching for a conducive hospital to be used was not easy, we saw a few but they were not fit for our type of surgeries we inspected a facility for proposed PROFOH Hospital in Sagamu ,near Lagos hoping that our dream to own one in the interest of our patients will be realized before the end of the year ,We miss it this year but also took it philosophically with high definition of grace that let the will of God prevails

Location 3, Poukasse- Accra, Ghana

The team even saw two patients at the Lagos International airport before flying to Accra, the venue was St Moses Clinic along the Accra Kumasi Highway. It was way expected, lots of people were waiting for us, and our old friend Rev. Musah Lanngbong Chairman of the Hospital put the operating room in shape just few hours before the team arrival, more than 200 persons were seen and treated and 30 surgeries performed at St, Moses Hospital Accra a PROFOH partner Hospital in Ghana before we proceeded to Ho, Volta Region in Ghana on the invitation of the Major of the city. The team conducted needs assessment and saw some clinical patients as the operating room was not equipped enough to handle surgical cases. The remarkable thing about the Accra mission is that we did not have to worry about electricity inside the operating room. Dr Quartemont flew from Accra to London for a Conference at the end of the mission while Kama flew back to Lagos..

The Fourth Social Mission, 1st Nov-31 December

Ten Locations across Nigeria ,Benin and Accra.

PROFOH responded to Nigeria worst floods disaster in history since independence with a sense of fulfillment. At least 430 people were estimated killed according to records from National Emergency Management Agency(NEMA) hundreds of thousands displaced,tens of thousands of hectares of farmland submerged since August when the River Benue rise above its banks due to heavy rainfall and was further complicated when additional water was released from a dam in Cameroon a sister country.

Several local Governments, communities and organizations requested our assistance, we responded by deploying relief materials to Jos, Port Harcourt, Warri ,Bida ,Ibadan, Borno, Abuja, Ikorodu,, Sagamu ,Uyo Patani ,and neighboring countries of Benin and Ghana with little clinical component.PROFOH team of medical personnel saw some patients and treated them.PROFOH has more than 13 years experience in emergency response and deployment of medical and relief supplies to populationd in distress across Nigeria from Jesse fire disasters to the recent Ibadan floods, Horn of Africa relief mission in Ethiopia. As usual, the vulnerable – children, women, the elderly are mostly affected.

TRAINING

As part of our policy and practice, training of local physicians and other health care workers are critical to the success of our work. As a matter of fact, local doctors and volunteers have been receiving the latest training on the surgical Mesh for hernia, fibroid surgery, sutures, etc. Surgical mesh can be described as one of the wonder in modern medicine ,one of few object the human body accepts without a fight, it does not only revolutionized the repair of hernias but also dramatically stop the rate of recurrence and allows the repair of some surgically written- off hernias.These are the type we see in every mission, some patients will keep theirs for years ,some for decades, we have seen patients who cannot walk ,on wheel chairs due to his size of hernia, beneficiaries local doctors expresses joy for the rare privilege of the training.

As always, we used our free mission as soft power to demand accountability, within this year, in two locations we stop sharp practices that were going on before our team arrival in the said hospital. Also our Taraba State mission will be remembered by the people of Zing for different reasons, medical equipment purchased by the State Government been locked up due to bureaucracy, it was our presence that opened up a whole lot of things and Zing General Hospital received brand new medical equipment for use of the people we would like to specially thank Dr Ahmed Kara the personal physician to the governor for his assistance in that regard.

Other Notable Accomplishments.

Engaging Democratic Activists For MENA Advancement

On the international stage, we were among the few organizations that were invited to Amman, Jordan in September for Engaging Democratic Activists for MENA Advancement (EDAMA - "sustainability" in Arabic), is an 18 month initiative created to strengthen the capacity of activists in the Middle East and North Africa (MENA) who support democracy in their countries. The EDAMA project is designed to encourage the proactive engagement of democratic activists in ongoing and potential transitions and reforms throughout the region. The project will facilitate in-person and virtual learning exchanges and opportunities among activists and provide 'learn-by-doing' opportunities to apply new skills, ideas, and resources. *The project is implemented by Partners for Democratic Change in cooperation with Partners-Jordan, the Centre for Applied Non Violent Action and Strategies (CANVAS), and the Institute for War & Peace Reporting (IWPR) and is funded by the United States Department of State.*

Scaled up outreach and training for TB control and prevention

This year, in partnership with the Rivers State Ministry of Health, Stop TB partnership continued to provide knowledge-nutritional support, advocacy, etc. As part of national efforts to scale up TB prevention and early diagnosis efforts among general and high risk populations across Niger-Delta region trained educators and administrators in TB prevention, we had the best awareness and sensitization on risks and vulnerability by organizing one of the best public walks in Nigeria TB history. We hope to run TB health campaigns in some selected high schools and university campuses in the region. The campaigns are estimated to have reached one million people.