Question for written answer E-009913/2011 to the Commission

Rule 117

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Subject: The European Hospital of Kabul

The French Medical Institute for Children (FMIC), launched in 2005 in Kabul on the initiative of French medical NGO La Chaîne de l'Espoir, is participating in the international community's reconstruction efforts and efforts to improve access to care for Afghan people. Based on a public-private partnership between the French and Afghan governments, the Aga Khan Development Network and La Chaîne de l'Espoir, the FMIC is currently developing its healthcare offer, with the establishment of a gynaecology and obstetrics service that should start by 2012, and the integration in the future of an academic and tertiary centre for medical sciences, eventually turning the FMIC into a fully-fledged academic hospital centre for both adults and children. The FMIC distinguishes itself not only by the high level of quality of healthcare provided to patients (ISO 9001 certificate) and the variety of services offered, but also by the fact that it enables a fruitful transfer of knowledge and know-how to the benefit of the 457 Afghan members of staff, thereby sustaining the policy of 'Afghanisation' necessary for a true and sustained development of the country.

- 1. Given the importance of the objectives pursued and the already well-established European representativeness of the staff working there, would the Commission agree to turn the FMIC into an EU project, which would enhance the visibility of EU action on the international scene in general, and in Afghanistan especially?
- 2. Given the fact that the Commission is a well-recognised key stakeholder in the medical field (major founder of the main two national programmes, Basic Package Health Services and Essential Package Hospital Services), does it intend to include tertiary healthcare in its next Country Strategy Paper, as the focus has been so far only on primary and secondary healthcare, and as there is a need to link all levels of healthcare?
- 3. Would the Commission agree to establish a shared financing based on Member States' contribution to care units (on the basis of the existing French model for instance), and on the Commission's contribution to transversal units (e.g. laboratory, administration, training, etc.)?

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