**ATTN EDITORS – THE FOLLOWING SHOTLIST IS TO ACCOMPANY B-ROLL FOOTAGE DISTRIBUTED BY MSF**

STORY: MSF TRAUMA HOSPITAL IN MOCHA, YEMEN

LOCATIONS: MOCHA CITY + MAWZA TOWN, TAIZ GOVERNORATE

DATES SHOT: 8-13 DECEMBER 2018

SOUND: NATURAL SOUND WITH ENGLISH, FRENCH & ARABIC SPEECH

DURATION: 20’31

INTRO

MOCHA: Since August, MSF teams have been working in Mocha (Taiz governorate), 180 km south of Hodeidah, where MSF opened a surgical field hospital to provide emergency medical care to people coming from the Hodeidah and Taiz frontlines. Since opening, near 2,000 consultations were realized at the ER, and more than 1,000 surgeries were performed. Among emergencies received between August and December, 18% were children under 15. Patients had injuries from landmines, gunshots, shrapnel and blasts. MSF field hospital in Mocha remains the only health facility performing emergency surgery in the area. Teams are receiving pregnant women with complicated deliveries who require urgent surgery, like C-sections. MSF is also supporting advanced medical posts near frontlines in Mafraq Al Mocha and Hays, with stabilization and OPD kits.

MAWZA: Mawza is located in Taiz governorate, a 45 minutes-drive to the east of Mocha city. This is a very poor and rural area, people are depending on their land to eat and to earn money. The area was taken over from Ansar Allah’s control by forces loyal to President Hadi, supported by the Saudi and Emirati-led coalition, in the beginning of 2018. Fighting damaged the fields and thus, the livelihood of the 13,000 inhabitants of Mawza. While military troops were withdrawing, thousands of landmines and improvised explosive devices (IED) were planted in the area. Between August and December, MSF teams in Mocha received around 150 people injured by landmines or IED, mainly children playing in the fields.

**SHOWS – SEE BELOW FOR MORE DETAILS & BACKGROUND INFORMATION**

**00:08 Mocha old city – general views**

**01:17 Mocha – Internally displaced persons (IDP) camp**

**01:53 Mocha – MSF trauma hospital – General views**

**03:50 MSF trauma hospital, Mocha - Mine injury patients**

**07:14 MSF trauma hospital, Mocha - Abdulwali, gunshot victim**

**08:23 MSF trauma hospital, Mocha - Medical round**

**09:15 MSF trauma hospital, Mocha - Nasser, mine victim**

**09:39 MSF trauma hospital, Mocha - Khamisa, maternity patient**

**10:27 MSF trauma hospital, Mocha - Abdallah, gunshot victim**

**14:23 Mawza town (Mawza district) – General views**

**15:34 MSF staff interviews**

* 15:38 Eymeric Laurent-Gascoin, MSF project coordinator (in French)
* 16:44 Husni Mohammad Hamoud, MSF OT nurse (in English)
* 17:29 Bernard Leménager, MSF surgeon (in French)
* 18:00 Elma Wong, MSF anaesthetist (in English)
* 19:44 Furaha Bazikanya, MSF midwife (in French)

**SHOWS**

**00:08 Mocha old city – general views**

Exterior shots of the old part of the city and of the market

**01:17 Mocha – Internally displaced persons (IDP) camp**

Exterior shots of an IDP camp in a former school, inside Mocha city. 25 families from Mawza are living here.

**01:53 Mocha – MSF trauma hospital – General views**

Outside shots of the hospital

An ambulance arrives, carrying two persons wounded in a car traffic accident

The stretcher carriers bring the wounded to the ER

Inside the ER, the patients are being tended to, one is carried to the X-ray

**03:50 MSF trauma hospital, Mocha - Mine injury patients**

Two dead bodies are being loaded onto the back of a pick-up. They arrived dead at the hospital following a landmine explosion.

Inside the Emergency Room (ER), two children who were involved in the same accident, they’re from the same family. One has shrapnel lodged in his skull. The team is monitoring his vital signs. As soon as his condition is stable, he’ll be referred to Aden, 5h drive from Mocha. There is no facility to treat a head injury in Mocha.

SOUNDBITE (in English) with Elma Wong, MSF anaesthetist saying: « Probably a head injury, it looks like he has shrapnel inside his head »

The other kid suffered minor injuries, shrapnel caused superficial wounds that will need to be cleaned in the operating theatre (OT) a few hours later.

SOUNDBITE (in English) with Elma Wong, MSF anaesthetist saying: « We had some casualties come from a landmine, quite local. We had four cases from the family: two older man who unfortunately were nearby - they were already dead, so we confirmed death on arrival - and then there is two children. So, this is one of the children from the explosion. He has luckily just got some soft tissue injury to his forearm. He’ll go into our OT and we’ll try and take the foreign body out and clean the wounds. And we have another child from the explosion who maybe is not so lucky. He had some shrapnel from the landmine that, from the looks of our X-ray, has gone into the skull, into the head. He shows signs of possibly having some head injury, he has concussion, and so his conscious state is low. So, we’ll stabilize him and we’ll transfer him to Aden. »

The second child injured in the explosion being treated in the OT later in the evening.

**07:14 MSF trauma hospital, Mocha - Abdulwali, gunshot victim**

Adbulwali, 30-year-old man with gunshot wound sustained in Hodeidah on 8 December, one month after joining the army to help support his family. The bullet went through his chest and is now lodged in his hip. He is being treated in the ER.Before taking him to the Intensive care Unit (ICU), the team insert a chest drain because he has air in his lung.

SOUNDBITE (in English) with Elma Wong, MSF anaesthethist saying: « This patient had a bullet that has come in from the top of the chest, and we can see on the X-rays that it has gone through the chest, possibly through the abdomen, and it’s just sitting in his hip »

**08:23 MSF trauma hospital, Mocha - Medical round**

Every morning, the medical team visits all the patients every morning at 8am, checking their status and deciding the next course of treatment.

SOUNDBITE (in English) with Bernard Leménager, MSF surgeon, saying: « Now, we close the skin, we heal the wound. And after, see for the nerves, if we can repair it with a plastician »

Close-up shot of a young boy. Soundbite, unidentified speaker (English): « Hakim Hassan Ahmad, seven years old, gunshot wound in right arm, open fracture »

**09:15 MSF trauma hospital, Mocha - Nasser, mine victim**

Nasser,14-year-old boy, injured in a landmine explosion 7 December. He lives one hour away from Mocha city. He was tending to his sheep when he walked on a landmine in a field. His low right leg was torn off during the blast. The other leg sustained shrapnel injuries. Farooq Mohammad Ahmed, MSF physiotherapist, helps him walk with crutches to regain strength.

**09:39 MSF trauma hospital, Mocha - Khamisa, maternity patient**

Khamisa, a pregnant woman, has just been referred to ER by the state hospital in Mocha. She went there after bleeding at home for several hours (the car to get to the hospital cost them 10 000 reals, an amount they had a hard time to gather). She’s in need of a C-section, and the state hospital in Mocha doesn’t have an OT.

Khamisa arrives at the MSF hospital. Furaha, the MSF midwife, does a scan and discovers the child has dies in the womb. She confirms that surgery is required to stop further bleeding and to remove the child.

Anticipating further hemorrhaging, the team administer a blood transfusion in ER before going into the OT. The surgical team was unable to control the bleeding and her state was very unstable; they had to perform a life-saving hysterectomy.

**10:27 MSF trauma hospital, Mocha - Abdallah, gunshot victim**

Abdallah is 40 years old. He was shot by a sniper in Hodeidah on 10 December. He arrived in ER 18 hours after having been shot. On the meantime, he’d received treatment in several medical posts closer to the frontline. He was shot in the left leg, just above the knee.

Bernard Leménager, MSF surgeon, consults the X-ray. He talks to someone off screen (in French) : « Là tu vois il y a plein de petites charpies qui doivent être des bouts de projectile. Et puis il y a tous ces bouts d’os, là »

Bernard Leménager in OT cleaning the bullet wound.

Abdallah in the recovery room after surgery. He’s then taken to the ward where he’ll wait to be transferred to the MSF hospital in Aden, a 5-hour drive away (he requires orthopedic care that the Mocha facility is unable to provide).

SOUNDBITE (in Arabic) with Abdallah saying:

« There were clashes and I got shot here, in my leg.

First I went to al Duraihemi *(note: advanced medical post close to the frontline).*

I stayed at al Duraihemi all night then I came here in the morning.

In all, it took 18 hours »

SOUNDBITE (in French) with Bernard Leménager, MSF surgeon: « C’est un patient qui est arrivé hier pour une gunshot, une plaie par balle dans la cuisse, avec un assez gros délabrement musculaire parce que c’était sûrement une balle à haute velocité, kalachnikov, qui avait en plus provoqué une fracture comminutive (*note : fracture qui comporte de nombreux fragments d’os*) avec beaucoup de fragments de l’extrémité inférieur du fémur. C’est un patient pour lequel on a fait le traitement standard des fractures ouvertes par plaie de guerre, donc débridement dans un premier temps, nettoyage des parties molles, etc. Et se posait le problème de l’immobilisation de l’os. »

**14:23 Mawza town (Mawza district) – General views**

Exterior views outside the town. Mawza town is located a 45-minute drive north of Mocha. The whole district is heavily mined and most of the mine victims admitted to the MSF facility in Mocha are from Mawza.

A billboard shows different kinds of landmines that can be found in the fields outside the city.

On the ground, the painted rocks indicate where it is safe to ride/walk – where mine clearers have already worked.

The landmines, and other explosive devices collected by the mine clearers, on display in the town.

General shots of the city, daily life activities.

**MSF staff interviews**

**15:38 Eymeric Laurent-Gascoin, MSF project coordinator (in French)**

« Dès le début 2018, le gouvernement de Hadi a décidé de lancer une contre-offensive contre les Houthis pour récupérer la zone qu’on appelle aujourd’hui la west coast, et donc mois après mois, ils sont remontés en partant d’Aden jusqu’à Hodeidah. Mocha étant une ville assez centrale par rapport à la west coast puisqu’elle est aussi bien sur la route d’Hodeidah que sur la route de Taez.

On est dans une sorte de corridor et donc Mocha nous a semblé être vraiment au croisement des chemins de ces deux lignes de front, ce qui nous permettait de ratisser très large sur deux gouvernorats pour recevoir le maximum de blessés et/ou patients.

(About Mawza district) : « Avant l’intégralité du district était agricole, aujourd’hui une toute petite part seulement est cultivée et les gens ne reviennent pas puisque leurs zones agricoles sont minées potentiellement.

Là on vient d’aller faire un tour dans la ville, on a rencontré une équipe de déminage qui travaille pour l’armée qui avait collecté en quelques jours des dizaines et des dizaines de mines. »

**16:44 Husni Mohammad Hamoud, MSF OT nurse (in English)**

« We have a hospital here but it is not qualified. There is no operating room, just an emergency room, where they prepare patients and send them directly to Aden. Aden is far away from here, six hours, five hours… So sometimes these cases are very serious, like if it’s a vascular injury, laparotomy, more bleeding, which means you expose the patient on the road and maybe they will die. Because you know, it’s far away, there’s no time to send them there.

Maybe it’s the type of bullets they are using there, I’m not sure because I’m not a soldier, but what we see is that sometimes, it’s complicated cases that come to us. »

**17:29 Bernard Leménager, MSF surgeon (in French)**

« Ici on a affaire à des armes de guerre, c’est-à-dire des armes type kalachnikov, des balles à très haute vélocité donc à forte énergie.

Si c’est une balle à très haute vélocité, qui tape dans un os par exemple, ça va faire beaucoup de dégâts à l’intérieur, avec une cavité. Quand c’est que du muscle et que de l’os ça va, s’il y a en plus une lésion vasculaire et qu’il faut réparer un gros vaisseau ça devient compliqué, quand il y a en plus des lésions nerveuses, le pronostic est vraiment beaucoup moins bon. »

**18:00 Elma Wong, MSF anaesthetist (in English)**

« The kind of cases we see, they may be as a result of violence. So, we see many patients that come from landmines. Around the area there’s previous areas of conflict that have a lot of hidden landmines. So, we do see lots of patients sadly that might come as a cluster who have all been harmed from explosive devices. Quite often also we’ll see gunshot wounds, from areas of fighting, areas of conflict, so sometimes they may come as north as Hodeidah, which is north, about two hours from here, or in other regions locally that are fighting.

Our project down in the south, in Aden, as I said, it’s been quite an established trauma hospital. So, we’ve got quite a big facility there. And I think over the years we’ve just become very capable of managing quite complex traumas there. So, it’s actually a place where we feel we’re out of our limits here in Mocha we will refer our patients to Aden to get more specialist care.

As you can see it’s a tent facility, so this really has been born out of an emergency and needs specifically in this region where there is nothing really between the frontline, from Hodeidah to the next big trauma facility which is down in Aden. So this is trying to fill quite a huge gap in a lack of a health care structure in this area that has just been broken by this conflict that is now spanning four years.»

**19:44 Furaha Bazikanya, MSF midwife (in French)**

« Dans toute l’aire de santé il n’y a aucun hôpital qui prend en charge les femmes enceintes. Il n’y a pas de centres de soins obstétricaux d’urgence. Quand il y a une urgence, elle est référée à Aden.

Il n’y a que les accoucheuses traditionnelles, les accoucheuses qui n’ont pas eu beaucoup de formation qui font la prise en charge des femmes enceintes. Je me suis dit que si on fait la formation du personnel médical, ça peut nous aider à diminuer la mortalité maternelle et les transfers inutiles.

Tous les cas que j’ai reçus ici, et les césariennes qu’on a fait ici, je me suis imaginée si il n’y avait pas MSF, elles seraient toutes mortes en cours de route, ou bien mortes à la maison. »