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Saving a Kashmiri Village After Remaking His Life

By ADAM B. ELLICK

CHIKAR, [Pakistan](#) — The lone hospital in this Kashmiri mountain town was on the eve of hosting one of the year's biggest social gatherings, a health fair for several hundred villagers, and Todd Shea was not happy.

The hospital's founder, Mr. Shea, an American who resembles a football coach more than a health worker, was outraged because one of the employees had failed to purchase enough hygiene kits — freebies the villagers had come to expect at the fair.

"This is a problem, and there is a solution," Mr. Shea, strident but good-natured, yelled to a staffer on the phone from the field. "Let's see how good you are. I know there are kits lurking in the walls. I guarantee you that if I come there, I will find them. You know me!"

Seven hours later, at midnight, the employee returned from a nearby city with a sheepish smile and 100 kits he had managed to round up. Mr. Shea hugged him, "I believe in you," he said.

If Mr. Shea, 42, had a résumé, it would by his own admission reveal far more experience as a cocaine addict than as a medical professional. But with his take-charge demeanor, he has transformed primary health care here in this mountain town in Kashmir, where government services are mostly invisible.

"Others are more qualified, but I'm the one who's here," he said.

Most recently, he has focused on the millions of people who have been uprooted by the army's campaign against the [Taliban](#), in the northwest.

But it is here that Mr. Shea spends his time and learned years ago that, as far as health care is concerned, every day is a crisis for Pakistanis.

He arrived as a volunteer rescue worker immediately after the 2005 earthquake that killed 80,000 Pakistanis. Overwhelmed by the community's long-term needs Mr. Shea never left, and in 2006 he set up a nonprofit charity hospital called [Comprehensive Disaster Relief Services](#), or C.D.R.S.

Humanitarian aid flooded the region in the immediate aftermath of the earthquake, but the tide of aid and government support ebbed within months, leaving 25,000 wounded residents without doctors, medical supplies and an actual health outpost. That is, life returned to normal.

In Pakistan, less than one percent of the national budget is devoted to the health of its citizens, and the

nation's health care crisis is especially acute in remote communities. "It's frustrating and sad that's the way it is," Mr. Shea said. "But if I screamed from the mountaintop, it wouldn't change a thing."

So he does what he can. His hospital, with 38 employees and nearly \$200,000 in financing from Americans and Unicef, highlights not only the needs of Pakistan's rural health system but also a glaring vulnerability for a government trying to brand itself an alternative to the Taliban.

"The Taliban terrorize people, but they put forth logical arguments about the state's failures," said Shandana Khan, the chief operating officer of the [Rural Support Program Network](#).

"It's very common to see primary health care facilities without doctors, or medicines," she added. "Doctors don't want to be posted there. Or they'll sign up and get paid, but sit in cities and no one monitors them."

Chikar is only 85 miles from the capital, Islamabad, but it takes six hours up a switchback road to reach the hospital. Here, the government provides only 10 percent of the community's medicine needs. C.D.R.S. picks up the rest.

Last year Mr. Shea recruited a doctor by doubling his government salary and offering him the only private room in the 20-room hospital, which he rents for \$250 a month. Mr. Shea himself sleeps on a mattress in a room he shares with staff members.

"The things you see here are only because of C.D.R.S.," said the doctor, Rizwan Shabir, 27, who had come from a practice in Muzaffarabad, a city of 300,000. "Frankly, without Todd, there would be no proper medicine, and patients would be dead."

Still, C.D.R.S. is more makeshift than miracle. On a recent morning, Dr. Shabir treated 140 patients in five hours. Without blood-testing laboratories, he diagnoses common illnesses like hepatitis and tuberculosis through clinical evaluations.

Outside of Chikar, C.D.R.S. supplements 10 other regional government health outposts by paying salaries and purchasing medicines. Over all, it treats about 100,000 patients annually, and 70 percent are women and children.

With the global economic crisis, Mr. Shea says he fears that his group's \$200,000 annual budget may be difficult to raise for 2010. So he has proposed a community insurance program that would require a contribution of 31 cents per person per month, which would net \$20,000 a month. He estimates that 65 percent of the town can afford it, and he hopes the government and private donors will pick up the rest.

Mr. Shea is an unlikely person to reform Chikar's decades of medical neglect. When he was 12, his mother died of a Valium overdose. By 18, he was addicted to crack cocaine.

In 1992, he moved from his native Maryland to Nashville to pursue a music career, he said, and spent the next decade playing in bars and restaurants around the country. At one point, he was forced to sell his own blood plasma for \$40 a week to pay the bills.

He moved to New York City in 1998, and had a gig booked at [CBGB](#), the famed music club, on Sept. 12,

2001. As he watched the World Trade Center burn and fall, he said, he promptly emptied his band van and used it over the next week to ferry meals to firefighters at Ground Zero.

He soon became addicted to rescue efforts, and volunteered in Sri Lanka after the 2004 tsunami. It was his first time overseas. After [Hurricane Katrina](#), he said, he volunteered with another rescue organization. Then the earthquake hit Pakistan, and he left for a country he knew nothing about.

Once in Chikar, he met a local M.B.A. student, Afzel Makhdoom, who had just dragged his aunt out from under the rubble of his home. As soon as he could scrape together the money, Mr. Shea hired him.

“I had never met an American before,” said Mr. Makhdoom, now 24. “My first impression was: They just want to kill Muslims; it’s an invasion, and they’ll never go back home. But now we want to keep this American here.”

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