A Lofty Vision

by Maria Costanzo

Jason Friesen, MPH ’12, was on a flight over the Caribbean when the pilot called passengers’ attention to a view that would transform the young translator’s career trajectory. It was August 2005, and the terrible power of Hurricane Katrina was unmistakable even from the air. Back on the ground in Miami, Friesen witnessed the devastation firsthand.

When he returned home, Friesen signed up for emergency medical technician training. Paramedic’s license in hand, he volunteered with the Red Cross in Mexico. When an earthquake struck Haiti in 2010, he served as a program manager with the international relief organization Project Hope. The work highlighted a stark need for better emergency response systems in less developed regions of the world. Still employed full-time for Project Hope, Friesen enrolled in the Mailman School, commuting monthly from Port-au-Prince to Washington Heights for classes.

After completing his degree, Friesen left Haiti to focus on Trek Medics International, a nonprofit he’d started years earlier to solve the problems he’d witnessed in Mexico and Haiti. “I walked out of that MPH program with a business plan, a marketing plan, and tools for recruiting,” he says. He also gained a medical director: Kevin Munjal, MD, MPH ’12. Says Friesen: “Trek Medics International went from a weekend hobby to a full-time job.”

In the U.S., the linchpins of emergency response are an elaborate 911 system, specially trained professionals, and ambulance transport. In the developing world, emergency response relies on an informal network of Good Samaritans who get people to the hospital any way they can—in taxis, pickup trucks, or buses. To foreign donors and government officials, the dearth of ambulances can be concerning. But as an EMT, Friesen had discovered that ambulances aren’t enough. Dedicated emergency vehicles cost a lot to maintain and rely on a network of paved roads—rarities in isolated, impoverished communities. “An ambulance,” says the 35-year-old, “does not a system make.”

Instead, Trek Medics bolsters existing systems and resources in each community it serves. Volunteers from the U.S., supported by Trek Medics, train local emergency responders in the classroom and in the field. Working with fire departments or hospitals, the nonprofit assesses local emergency transport resources, taking into account the road and traffic conditions in the area. In effect, Friesen has created a new model of emergency response tailored to the conditions in developing countries.

Trek Medics also provides low-tech emergency dispatch software known as Beacon, dubbed “Uber for disaster zones” by Time magazine. Based on widely available cellphone text-messaging technology, Beacon uses numbers, rather than words, to speed communication about patient status and responder needs within a network of participating drivers.

Trek Medics now coordinates programs in the Dominican Republic, Mexico, and Tanzania, with growth on the horizon. Google awarded the nonprofit a grant for Beacon, and USAID has given additional funds for expansion in the Dominican Republic.

Now based in Manhattan, Friesen devotes the bulk of his time to administrative duties these days. He still gets a thrill from seeing people embrace the organization’s mission. “The most rewarding part,” he says, “is when volunteers who have really gone out on a limb to work with us come back to me and say, ‘I get it. I get it and it works.’”