



ADFELPS 6 / CEFR B2  
and above

## Military English

Lesson: Life of a UN Peacekeeping Medic – PART C:  
Deployment to INTERFET, Timor Leste

**TEACHER'S COPY**

**Overview:** This is the third of four lessons that will teach vocabulary related to being a 'Medic' and Army nurse during United Nations (UN) Peacekeeping missions.

**In this lesson, you will:**

- ✓ use listening skills.
- ✓ learn the meaning of new vocabulary and expressions.
- ✓ use new vocabulary and expressions in context.

### Prepare for Listening

1) These are some of the tasks Peacekeeping medics do. Discuss what they are with a partner. What else do UN Peacekeeping medics do?

Before you distribute the worksheets, ask students (ss) to work in groups of 3-4 and discuss what a medic does in a UN peacekeeping operation (PKO). Give them 2min. For feedback (FB), ask a few of the groups to give their answers (ans), and write them on the board. Now give out the worksheets. Ask ss to work with the same groups. Tell them the pictures below show what medics typically do during PKOs. Give them 3-4min to talk about what they see in the pictures. Monitor and helps ss (e.g. with vocabulary). For feedback, refer back to the words you wrote on the board and check with the class if any of the points were mentioned by the ss.  
Ans: a. providing medical care to the local population; b. this shows that medics need weapons handling training; c. medics often work in field hospitals; d. a PKO medic is giving food to children (i.e. they also provide humanitarian assistance to the local population).

a.



c.



b.



d.



## Listening – Part 1

2) Listen to the interview with Army nurse WO1 Beth Andrews. Which two points does she mainly talk about?

If ss have been taught Parts A and B, they should be familiar with WO1 Andrews. In this case, tell them they will listen to the next part of the interview. If they haven't been taught parts A and B, tell them this is an interview with an Australian Army medic about her deployments as a Peacekeeping medic. Ask ICQs: 1. Do you need to understand every word in the recording, or just get the general idea? (just the general idea); 2. Do you have to select one or two answers from the blue box? (two). Ask them to read the four choices before playing the recording. For FB, ask ss to check in pairs. Then ask the whole class for the ans.

- |   |  |
|---|--|
| <input type="radio"/> Her deployment in Cambodia. | <input type="radio"/> A memorable event during her deployment. |
| <input type="radio"/> Her daily responsibilities. | <input type="radio"/> Her medical training.                    |

## Learning Military Vocabulary

3) The words listed in bold below are important vocabulary and expressions that you should learn to use. Match the vocabulary on the left with their definitions on the right. Look at the example.

Have ss look at the example. Explain: 1. they have to match the words on the left with the definition on the right; 2. the tables are separate e.g. the answers for table one are only in table one, not table two. Give ss 10min. Monitor and if you see that a s has a wrong ans, instead of telling them the correct ans, just say "this is not correct; can you find the correct ans for this?". Make sure you come back to that s to check after a few min. For FB, ask ss to check with a partner, then ask the whole class for each ans.

Table one

my next deployment was a <b>D+14</b> (= Deployment + 14 Days) (n)	<b>c</b>	a. a person responsible for managing the daily operations of a hospital ward (ward = section)
set up a <b>field hospital</b> (n)	<b>d</b>	b. information (in numbers) that show the number of people who have been injured or killed e.g. in a war or natural disaster
to provide <b>humanitarian care</b> (n)	<b>g</b>	c. medics deploy to an area of operations to set up a field hospital 14 days after the first group of troops has deployed
a <b>Ward Master</b> manages patients (n)	<b>a</b>	d. a temporary medical facility set up near a battlefield, disaster site, or other emergency area to provide medical care for the injured
to provide <b>casualty statistics</b> (n)	<b>b</b>	e. a process of returning a person to their home country
I assisted with <b>repatriation</b> (n)	<b>e</b>	f. medical care (or procedures) given to a person to help an illness, injury, or other medical condition, e.g. medications or surgery
she was at the field hospital for <b>treatment</b> (n)	<b>f</b>	g. assistance and services provided to people in need, especially during emergencies like a natural disaster or conflicts




**INTERFET (International Force Timor)** - A multinational non-United Nations peacekeeping task force.

It was organised and led by Australia to resolve a security crisis in Timor Leste between 1999-2000 until UN peacekeepers arrived.

**OPTIONAL TASK** – write the following questions (Qs) on the board; 1. What does Interfet mean?; 2. What was the purpose of INTERFET? Now ask ss to read and ans the Qs; the first to find the ans shouts 'STOP!' Wait for the others to finish reading, then ask that s to give his/her ans. Ans: 1. Interfet stands for International Force East Timor; 2. its purpose was to support the country during a crisis.

Table two

<p>we needed to do some <b>major surgery</b> (n)</p>	<p>i</p>	<p>h. the spot where aircraft touch down (on the ground)</p> 
<p>unfortunately she got a <b>severe infection</b> (n)</p>	<p>j</p>	<p>i. a big and complicated operation in a hospital</p>
<p>she <b>passed away</b> (v)</p>	<p>k</p>	<p>j. when bacteria or viruses attack the body and make the person sick</p>
<p>the chopper approached the <b>landing area</b> (n)</p>	<p>h</p>	<p>k. = died</p>
<p>the Special Operation guys were on a <b>recce</b> (n) (recce can also be a v)</p>	<p>l</p>	<p>l. a short mission to get information about the enemy or an area</p>

Ask these CCQs to consolidate vocabulary comprehension:

**D+14** – does D+14 mean medics deploy before or after the first group of troops? (after); 2. How many days after the first troops do the medics deploy? (14 days).

**field hospital** – 1. Is a field hospital set up during an emergency like a natural disaster or conflict? (y); 2. Does a field hospital usually have the same equipment as a regular city hospital? (n, they usually have less equipment); 3. Is a field hospital used to treat civilians, military personnel, or both? (both).

**humanitarian care** – 1. Can humanitarian care include giving things like food, shelter and medical help? (y); 2. Is humanitarian care about protecting and supporting civilians? (y).

**Ward Master** – 1. Is a ward master a type of boss? (y); 2. Can you find Ward Masters in other places or usually only in hospitals? (it's a role related to hospitals)

**casualty statistics** – 1. Are casualty statistics the numbers that show how many people were hurt or died, yes or no? (y); 2. Are casualty statistics used to better understand the impact of a conflict or disaster, yes or no? (y).

**repatriation** – 1. Can repatriation involve soldiers, civilians or both? (both); 2. Can it occur after a soldier gets injured? (y).

**treatment** – 1. Can treatment take place in the battle field or only in hospitals? (battle field, usually by a medic).

**major surgery** – 1. Can a major surgery take place in a field hospital? (y); 2. Can a medic perform a major surgery? (n, this is done by qualified doctors).

**severe infection** – 1. Does an infection usually make the patient feel sick and be in pain? (y); 2. Is treatment needed to get rid of an infection? (y); 3. Is a severe infection like a very serious infection? (y).

**passed away** – 1. Is to pass away the same as to die? (y); 2. Is to pass away a more gentle way to say to die? (y); 3. Is to pass away more formal than to die? (y).

**landing area** – 1. Is a landing area usually flat and open? (y); 2. Is a landing area only for helicopters? (n, any aircraft can use a landing area e.g. airplanes, helicopters, drones); 3. Are landing areas only at airports? (n).

**recce** – 1. Does recce have the same meaning as reconnaissance? (y); 2. Do soldiers go on a recce to see what's ahead before an operation? (y); 3. Is recce usually done secretly and carefully? (y).

#### 4) Now let's practice saying the words. Listen and repeat.

Pay attention to which part (syllable) of the word has the stress e.g. hospital. Use this stage of the lesson to drill pronunciation with class/individuals. Play the recording and ask the class to repeat. Then play again and ask random ss to repeat individually. Correct pronunciation, especially syllable stress. Tell ss the **bolded** words in task three have the stressed syllable underlined (the words not underlined are one-syllable words).

## Listening – Part 2

5) Listen to the interview again and answer the questions below.

Allow ss to read the Qs. Ask: In Q1, what is Cambodia and Bougainville? (places). Play the recording. For FB, ask ss to check with a partner. Monitor and if you notice many are having difficulties, play a second time (allow them to check with their partners before playing a second time, as this will help them understand any unclear points they may have). Then ask them to check with a partner again. Finally, ask individual ss to give their ans. if they are incorrect, ask the whole class.



a. After Cambodia and Bougainville, where was WO1 Beth Andrews next deployment to?

Timor Leste (or East Timor)

b. Which two jobs did she have at the field hospital?

Operations Sergeant and Ward Master

c. What was the cause of the elderly lady's death?

severe infection

d. How did they take the elderly lady's body back to her village?

chopper (helicopter)

e. How did the Special Operations soldiers find the elderly lady?

they were on a recce

6) Here is the transcript of the interview. Listen to it and fill in the gaps with the missing words you hear.

Play the recording. Then ask ss to check ans with a partner. Finally, ask random ss to give the ans to the whole class.

**A:** Good afternoon listeners. Welcome back to Radio Station 4U2 and our ongoing interviews with military veterans. I'm Ben Renolds and in today's interview we will continue talking with Warrant Officer Beth Andrews, who is currently serving with the Australian Army as a nurse. We are going to talk with her about her experience in UN peacekeeping operations, her various deployments, and life as a nurse in the modern military.

**A:** Hello Warrant Officer Beth Andrews, thank you for returning to our station again to tell our listeners about your experience as an Australian Army nurse.

**B:** Thank you Ben. It is always my pleasure to share some of my experiences with your listeners.

**A:** Last week you told us about your deployments to Cambodia and Bougainville. After this, did you deploy overseas again?

**B:** Well, my next major deployment was to Timor Leste in 1999 in what we call <sup>1</sup> D+14 or Deployment plus 14 days. So, D+14 means 14 days after the first group of troops has deployed to the area of operations, the medics deploy to set up a <sup>2</sup> field hospital. The field hospital is set up to provide humanitarian care and obviously care for our own personnel who had deployed. This was one of Australia's biggest deployments as a host nation for a very long time.

**A:** What was your role during the Timor Leste mission?

**B:** I was the Operation Sergeant for the opscell at the field hospital even though I'm a medic, and I was also what we call a <sup>3.</sup> **Ward Master**. Being a Ward Master means I managed all the patients in and out of ward, as well as maintain records and statistics. Every day I went to INTERFET Headquarters to provide <sup>4.</sup> **casualty** statistics. I also assisted with repatriation of injured military personnel back to Australia and transport of local people back to where they needed to go in Timor Leste.

**A:** Can you share any memories from your time in Timor Leste that really stand out in your mind?

**B:** One thing stands out in my mind... well, on one occasion, we received an old lady who had been badly injured. Some Australian Army Special Operations soldiers brought her to our field hospital for <sup>5.</sup> **treatment** and we needed to do some major surgery on this old lady. She was in her late 60s, early 70s and it was just unfortunate that she got a severe infection. She was only with us for about six days and she <sup>6.</sup> **passed away**. Only the soldiers who brought her in knew the village in the mountains where she came from. But, we were determined to return her to her village for a burial ceremony, especially because she was very senior in her village. So we had to seek approval for a chopper to take her back to her village and find the original team who had picked her up. There were no roads to the village because it was high up in the mountains. There was only access by foot. It was interesting to be a part of that trip to escort the old lady's body back to her village. When the helicopter approached the village <sup>7.</sup> **landing area**, it was completely deserted, but when the chopper landed, people came out from behind the bushes in all directions. One of the soldiers on board was an interpreter, who helped us talk with the village elders about how we had tried to save the old lady. The villagers were all so grateful, and very emotional. They couldn't stop touching us and thanking us. Even the Special Operations soldiers with us were tearing up. This was just one instance where we were able to help local villagers. Of course, there would have been many others out there who needed help. This was only brought to our attention due to the Special Operations guys being on a <sup>8.</sup> **recce** that day and they were flagged down. Many other villagers in these isolated areas would have passed away simply by not having access to basic medical services.

**A:** Thank you! That was a very emotional story. It's been great having you here today. That was Warrant Officer Beth Andrews speaking for Radio Station 4U2. Until next time.

Note: this transcript is an edited version for educational purposes and based on a live interview from a podcast "Life on The Line" with Australian Army Medic, Warrant Officer Elizabeth Matthews – see:

<https://www.youtube.com/watch?v=iR2ObTJKEh0>

## Practice

7) Work in pairs or small groups. Create a short role play based on the interview.

- Decide who is the interviewer and interviewee.
- Use as many of the words from exercise three as possible.
- Use the questions below to help you plan what you're going to say.

Why are medics important in a Peacekeeping operation?

Is knowing how to use a weapon a useful skill as a Peacekeeping medic?

What are the challenges faced by military medics in a UN peacekeeping mission?

Divide students into pairs or small groups. Assign roles (interviewer and interviewee) and ask them to create a short role play based on the interview. Encourage creativity and accuracy in representing the information and ask them to use as much of the vocabulary from this lesson as they can. Tell ss the Qs in the blue box are just a guide – they don't have to ask them and don't have to be limited by them. Encourage students to share their thoughts on the responsibilities of medics based on the interview with Beth Andrews and on their own experience. Give ss 5min to work together (i.e. interviewer and interviewee) to plan what Qs they're going to ask. Monitor and provide help if needed. When they're ready, give them 5min to do the role play with their partner or small group. For FB to the whole class, ask one or two groups to share one Q each.

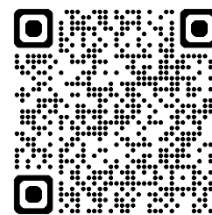
Follow-up Activities (Homework or Extension):

1. Writing Task: Assign a writing task where students reflect on the challenges faced by military medics and express their opinions on the importance of their role in peacekeeping operations.
2. Research Assignment: Ask students to research and make a 2-min oral presentation about a real UN peacekeeping mission, focusing on the role of medical personnel. (e.g. where is the mission, how many medical personnel, etc)
3. Vocabulary Expansion: Provide a list of additional vocabulary related to military operations and medical procedures for students to explore and use in sentences.

This lesson plan is designed to engage students in listening, comprehension, and speaking activities, fostering both language development and critical thinking.

- Watch the video about healthcare and 'Telemedicine' services during a UN operation in Central Africa known as MINUSCA (United Nations Multidimensional Integrated Stabilization Mission in The Central African Republic). Type on YouTube "[Behind the scenes of UN Operations – Enhancing remote healthcare with Telemedicine](#)", or scan the QR code.

This can be done in the classroom or set for homework. If in the classroom, ask ss to read the Qs first. Play the video for all to see. A lot of the video is spoken in French, so turn on subtitles (tell ss to turn on subtitles if this is set for homework). Ask ss to check ans with a partner. Then ask the whole class for the ans.



Answer these questions as you watch:

- a. What is telemedicine? Telemedicine is a computer technology that helps to deliver quality medical care when there are challenges to achieve the 10-1-2 target of Casualty Evacuation (CASEVAC) (note: 10-1-2 target refers to immediate first aid being crucial in the first 10 minutes in a medical emergency – after that, the patient should be transported to a medical facility within 1 hour, with life-saving interventions performed within 2 hours, i.e. "10-1-2") \*\*\*Note: this part of the video has a mix of French and English. The main answers are in English, but English subtitles can provide additional information for the answer.
- b. How does telemedicine support UN medics and Casualty Evacuations (CASEVAC) in the field (see video at 2:20 and 3:30)? Telemedicine helps to decrease the number of evacuations and improves the ability of doctors to manage patients in the field from a remote location.
- c. What are some of the challenges for using telemedicine in remote areas of central Africa (see video from 3:47)? Establishing communications in the field is a major challenge. Most notably, finding a power source and internet connection are a challenge for operating telemedicine when deep in the field in remote areas of Central Africa.

- For more practice with the words you've learned from this lesson, scan the QR code.



© Commonwealth of Australia 2024

This work is copyright. Apart from any use as permitted under the Copyright Act 1968 (Cth), no part may be reproduced by any process without prior written permission from the Department of Defence.

[Transcript]

### **PART C – Life of a UN Peacekeeping Medic – Deployment to INTERFET, Timor Leste**

A: **Interviewer:** Ben Renolds, Announcer for Radio Station 4U2.

B: **Interviewee:** Warrant Officer Beth Andrews (Fictitious – based on real interview with WO1 Elizabeth Matthews)

[begin interview transcript]

A: Good afternoon listeners. Welcome back to Radio Station 4U2 and our ongoing interviews with military veterans. I'm Ben Renolds and in today's interview we will continue talking with Warrant Officer Beth Andrews, who is currently serving with the Australian Army as a nurse. We are going to talk with her about her experience in UN peacekeeping operations, her various deployments, and life as a nurse in the modern military.

A: Hello Warrant Officer Beth Andrews, thank you for returning to our station again to tell our listeners about your experience as an Australian Army nurse.

B: Thank you Ben. It is always my pleasure to share some of my experiences with your listeners.

A: Last week you told us about your deployments to Cambodia and Bougainville. After this, did you deploy overseas again?

B: Well, my next major deployment was to Timor Leste in 1999 in what we call "**D+14**" or Deployment plus 14 days. So, D+14 means 14 days after the first group of troops has deployed to the area of operations, the medics deploy to set up a **field hospital**. The field hospital is set up to provide **humanitarian care** and obviously care for our own personnel who had deployed. This was one of Australia's biggest deployments as a host nation for a very long time.

A: What was your role during the Timor Leste mission?

B: I was the Operation Sergeant for the opscell at the field hospital even though I'm a medic, and I was also what we call a "**Ward Master**". Being a Ward Master means I managed all the patients in and out of ward, as well as maintain records and statistics.

Every day I went to INTERFET Headquarters to provide **casualty statistics**. I also assisted with **repatriation** of injured military personnel back to Australia and transport of local people back to where they needed to go in Timor Leste.

A: Can you share any memories from your time in Timor Leste that really stand out in your mind?

B: One thing stands out in my mind... well, on one occasion, we received an old lady who had been badly injured.

Some Australian Army Special Operations soldiers brought her to our field hospital for **treatment** and we needed to do some **major surgery** on this old lady. She was in her late 60s, early 70s and it was just unfortunate that she got a **severe infection**. She was only with us for about six days and she **passed away**.

Only the soldiers who brought her in knew the village in the mountains where she came from. But, we were determined to return her to her village for a burial ceremony, especially because she was very senior in her village. So we had to seek approval for a chopper to take her back to her village and find the original team who had picked her up. There were no roads to the village because it was high up in the mountains. There was only access by foot.

It was interesting to be a part of that trip to escort the old lady's body back to her village. When the helicopter approached the village **landing area**, it was completely deserted, but when the chopper landed, people came out from behind the bushes in all directions.

One of the soldiers on board was an interpreter, who helped us talk with the village elders about how we had tried to save the old lady. The villagers were all so grateful, and very emotional. They couldn't stop touching us and thanking us. Even the Special Operations soldiers with us were tearing up.

This was just one instance where we were able to help local villagers. Of course, there would have been many others out there who needed help. This was only brought to our attention due to the Special Operations guys being on a **recce** that day and they were flagged down. Many other villagers in these isolated areas would have passed away simply by not having access to basic medical services.

A: Thank you! That was a very emotional story. It's been great having you here today. That was Warrant Officer Beth Andrews speaking for Radio Station 4U2. Until next time.

\*\* Note: this transcript is an edited version for educational purposes and based on a live interview from a podcast "Life on The Line" with Australian Army Medic, Warrant Officer Elizabeth Mathews – see: <https://www.youtube.com/watch?v=iR2ObTJKEh0>