

Health Situation Report # 29

31 December 2005 – 6 January 2006

Highlights

- Three field hospitals collapsed due to heavy snowfall in Rawalakot. The outpatient departments (ODP) treating a total of 1,200 patients per day were severely affected. Within 24 hours, WHO provided winterized tents, power generators and other emergency supplies. After 3 days the departments were operational again.
- Serious flooding affected a camp accommodating 3,000 people in Battagram. Due to bad drainage, 200 tents and latrines were damaged. Approximately 1,000 people were relocated with support of WHO.
- The most reported diseases remain Acute Respiratory Infection (ARI) with 27% increased from 22% in the previous week. Other main causes are Acute Watery Diarrhoea (AWD) with 6%, and injuries and Fever of Unexplained Origin with 5% each. The number of cases of AWD is decreasing: 3,287 cases this week compared to 3,834 cases in the previous week. Of the 19 deaths reported this week, 6 were due to ARI and 2 due to injury. Ten deaths were reported from Mansehra district.
- 50,000 adolescents have started a volunteer health promotion project carrying out tent to tent visits in 150 camps in all of the earthquake affected areas. The project aims to increase the access to health care and hygiene promotion of the earthquake-affected population and has been initiated by 7 health organizations. WHO and the Ministry of Health prepared a minimum package of health services to support the project.



*One of the field hospitals in Rawalakot that collapsed due to severe snowfall.
Source: Carrie Morrison*

WHO response

Project 1: Revitalization of primary health care services

Bagh

- An additional 30,000 children have been identified for a mop-up Measles vaccination.
- A Health Emergency Cell was set up to better prepare for hypothermia, pneumonia, injuries and burn cases.

Balakot

- A referral system for patients in need of rehabilitation and physiotherapy, and patients in need of artificial limbs was set up between two Cuban field hospitals and the NGO MSF in Balakot, and the NGO Handicap International in Mansehra.
- A reduction in scabies cases was reported by a survey conducted end December 2005 as a follow up to a scabies intervention campaign carried out earlier that month. Assessment visits to 67 tents concluded that 32% of the tent population had scabies during the visit while 73% reported use of scabies medicine. In some tents scabies cases had increased.

- Two WHO medical teams were mobilized to Sangar and Hangarai in support of the Ministry of Health field hospital in Gary Habibullah.
- WHO provided 400 bottles of Benzyl Benzoate, drugs and dressing material to several medical teams in Balakot and Talahatta.

Battagram

- Two WHO medical teams were deployed to Pashtoo and Banna village in Allai tehsil.

Muzaffarabad

- WHO initiated a training programme on safe blood transfusion at Abbas Institute of Medical Sciences (AIMS). An assessment of the blood bank was carried out and four priority areas were identified: safe blood transfusion, use of syringes use and safe disposal, pharmacy management and maternal and child care services.

Project 2: Revitalization of hospital care services

Battagram

- Due to the severe weather conditions, referral of patients from remote villages and camps is no longer possible.

Rawalakot

- WHO provided a new ambulance to the District Health Officer in Rawalakot.

Project 3: Increased access to health care for affected communities

Balakot

- The installation of the prefabricated basic health units has progressed significantly in Jared, Paras, Hungarai, Ganool and Sangar.
- The rehabilitation of the tehsil headquarter hospital funded by a private donor is ongoing. The works are expected to be completed by the end of February. WHO provided a generator to assist the work.

Project 4: Emergency health coordination and information management

Shangla/Kohistan

- WHO handed over two ambulances to the Executive District Officer (EDO) Health in Shangla and Battagram district.

Muzaffarabad

- WHO carried out an assessment of 36 camps in Muzaffarabad district. One important recommendation is the relocation of Bela Nuhr Shah Camp due to severe health risks.

Project 5: Disease Surveillance and Early Warning System

- The total number of reporting units in the earthquake affected areas has increased to 188 units; 128 (68%) have sent their surveillance data on time during epidemiological week 1.

Bagh

- One suspected case of acute flaccid paralysis (a 4 year old female) was reported from the rural health centre of Arja. A sample was sent to Islamabad for laboratory confirmation. Results are pending.
- Rumour investigation was carried out by WHO into 25 cases of Measles in Salem Madialyan. No clinical cases of Measles could be confirmed.

Balakot

- Case investigation was carried out by WHO into 15 cases of suspected Malaria reported from the Army tent village Shohal. No Malaria cases could be confirmed.

Muzaffarabad

- Follow up investigation by WHO into a case of whooping cough in Abbas hospital last week, confirms that the patient had not been vaccinated.

Project 6: Environmental Health**Bagh**

- In areas with high prevalence of Hepatitis A, distribution of water purifying tablets in combination with hygiene promotion will be carried out by WHO and OXFAM.

Balakot

- WHO distributed 50 medical waste disposal boxes to health facilities in Balakot.
- WHO and Oxfam are providing clean water to spontaneous camps and villages with broken water supply through ten 250-gallon tanks.

Battagram

- To improve the sanitary condition in Maidan camp, WHO mobilized hygiene promoters and sweepers and provided material to reconstruct the drainage system.
- A total of 30 health staff was trained in Environmental Health in Emergencies by WHO, in close collaboration with Oxfam, UNICEF and the International Federation of the Red Cross (IFRC).

Mansehra

- A total of 19 new camp health workers (CHW) were trained in hygiene promotion in Dhariel camp in Shinkiari by WHO, in coordination with UNICEF and RWSSP.

Muzaffarabad

- WHO provided water testing kits to the local water plant in Muzaffarabad to determine the microbiological quality of the water.
- Health and safety training for sanitary workers has been carried out in Abbas Hospital as part of the hazardous waste management project.

Rawalakot

- WHO is providing clean drinking water to the Cuban hospital and the combined military hospital (CMH) through a water tanker.

Project 7: Mental health and psychosocial actions

- A total of 27 mental health teams with more than 100 personnel have been mobilized so far by WHO and the Ministry of Health to the major affected areas. At present, five teams are deployed in Muzaffarabad, Bagh, Rawalakot and Balakot.
- The weekly trend analysis (Figure 1) shows an increase in mood disorders while anxiety disorders are on the decrease. The trend per gender (Figure 2) shows a higher number of consultations related to mood, anxiety, and stress as well as somatoform disorders in females, while the number of consultation related to schizophrenia and delusional disorders is slightly higher in males.

Figure 1: Mental Health Consultations Weekly Trend

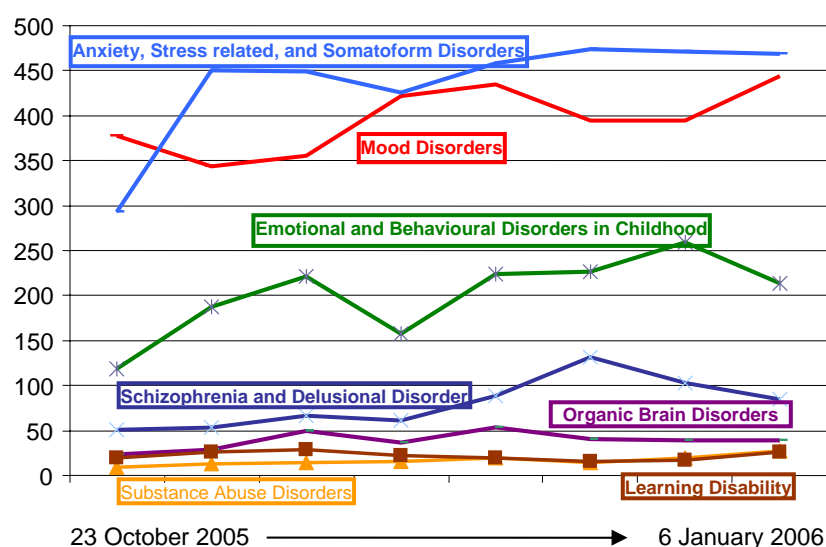
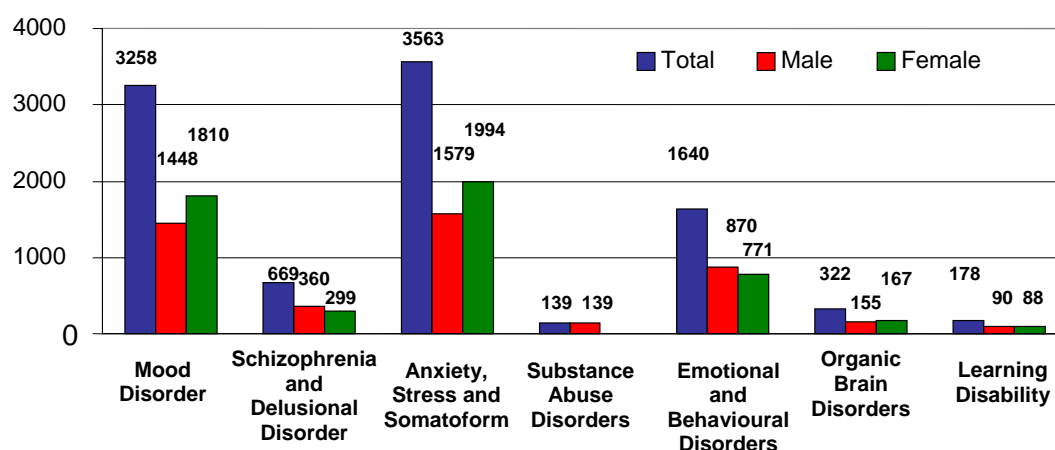


Figure 2: Mental health consultations diagnoses by sex



Balakot

- A follow up training session on management of mental illnesses at primary health care level as part of a three month training program was initiated in Balakot. The training is organized by WHO and facilitated by the NGO IMC.

Battagram

- Mental health activities carried out by the team of psychiatrists and psychologists in Battagram and Allai tehsil have been ceased due to adverse weather conditions.

Mansehra

- A total of 70 health workers were trained on psychosocial basic skills by WHO and UNICEF.

Donations to WHO

Reported donations as of 13 January 2005 against the WHO total requirement of US\$ 27,750,000. Donations to date currently meet 58% of WHO total requirements.

Donor	USD	Earmarked	Unearmarked	Purpose
Australia [AUD 2.5 million]	1,881,061		1,881,061	
Australia [AUD 0.5 million]	376,196	376,196		health kits, transport, delivery
Australia [AUD 1 million]	740,715	740,715		Child and maternal care
Canada [CAD1.75 million]	1,495,727		1,495,727	
Canada [CAD 0.5 million]	427,350		427,350	
Denmark [DKK 3 million]	487,013		487,013	
ECHO [EUR 1 million]	1,176,470	1,176,470		coordination
Ireland [EUR100,000]	121,065		121,065	
Italy (EUR 250,000)	300,481		300,481	
Japan	1,000,000	1,000,000		Vaccines, kits
Korea, Republic of	99,990		99,990	
Kuwait	500,000		500,000	
Monaco [EUR100,000]	121,065	121,065		supplies
Norway	253,670		253,670	
Norway [NOK 4 million]	598,310		598,310	
Slovak Republic [SKK 4 million]	123,812		123,812	
Sweden [SEK 15 million]	1,905,972		1,905,972	
Switzerland	100,000		100,000	
Turkey	500,000		500,000	
United Kingdom [GBP 140,000]	249,110	249,110		operational support
UK [GBP 490,000]	871,886	871,886		disease control
UK [GBP 500,000]	860,585	860,585		disease control
USAID	2,000,000		2,000,000	
Private donations [incl. GBP 100]	678		678	
Total	16,191,156			

APPENDIX 1: Summary report of Ministry of Health and WHO medical teams deployed in earthquake affected areas.

In order to provide medical services to the affected population in the earthquake hit areas, WHO and the Ministry of Health deployed a total of 77 medical teams to the earthquake affected areas of North West Frontier Province (NWFP) and Pakistan administered Kashmir.

Province	District	Cumulative number of teams by district
AJK	Muzaffarabad	21
AJK	Bagh	23
AJK	Rawalakot	12
NWFP	Mansehra	14
NWFP	Battagram	7
	Total	77

Immediately after the earthquake, the teams comprised of one general physician, one general surgeon, one surveillance officer and paramedics. After the acute emergency phase, teams comprised only of one general physician and paramedics. The medical teams are deployed for two week periods.

On average, each team provided services to 800 patients.

The below figures show the kind of diseases treated by the medical teams, followed by the gender and the age distribution, as well as the type of facility

Figure 3: Percentage of distribution of diseases treated by medical teams

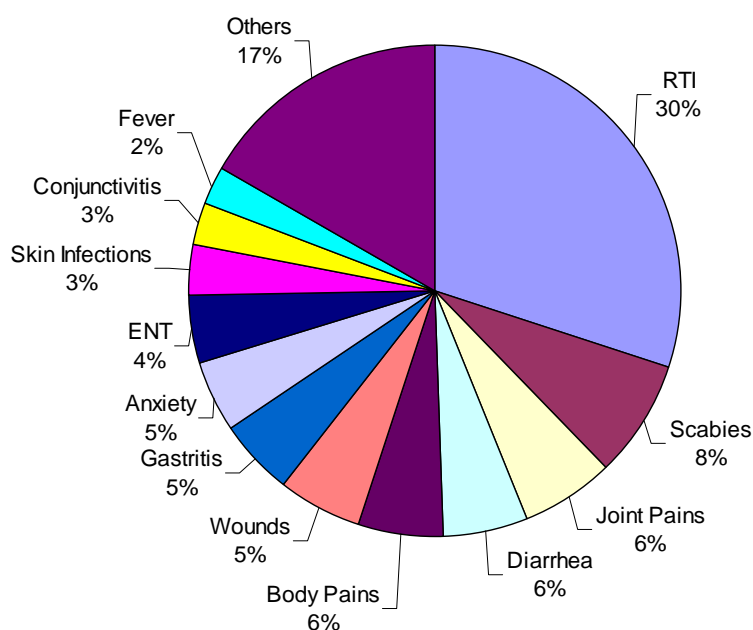


Figure 4: Gender distribution of patients treated by medical teams

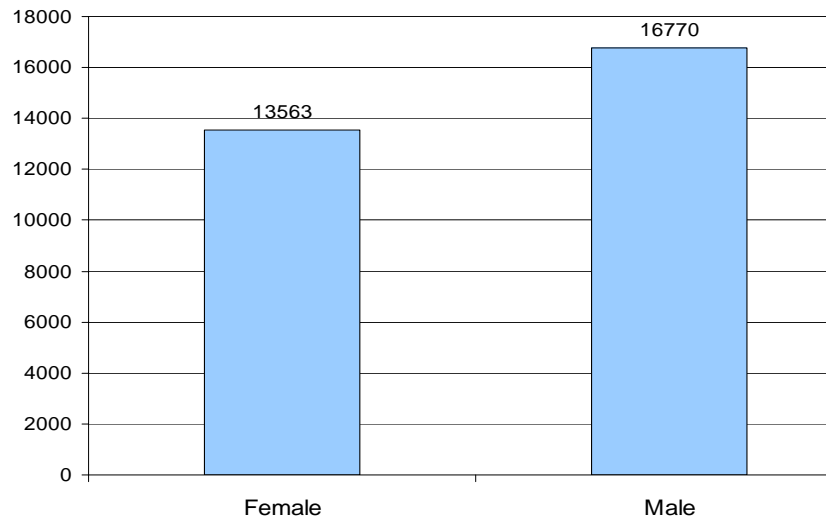


Figure 5: Distribution by age of patients treated by medical teams

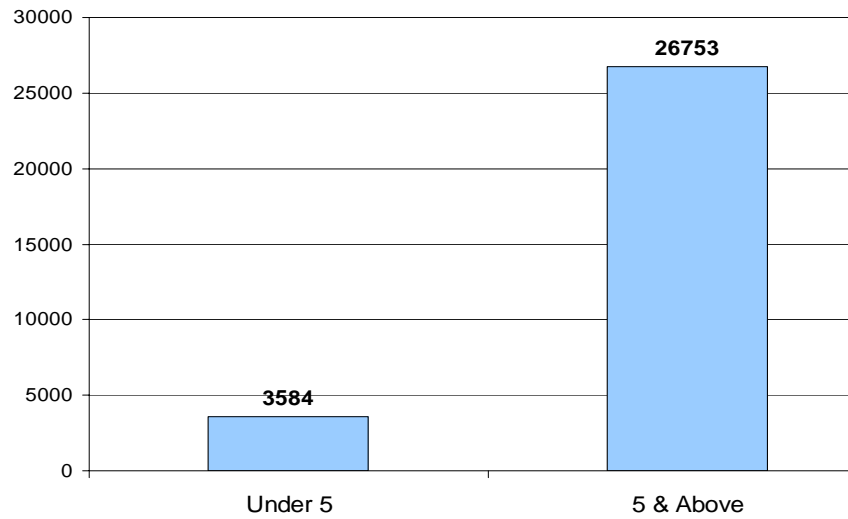
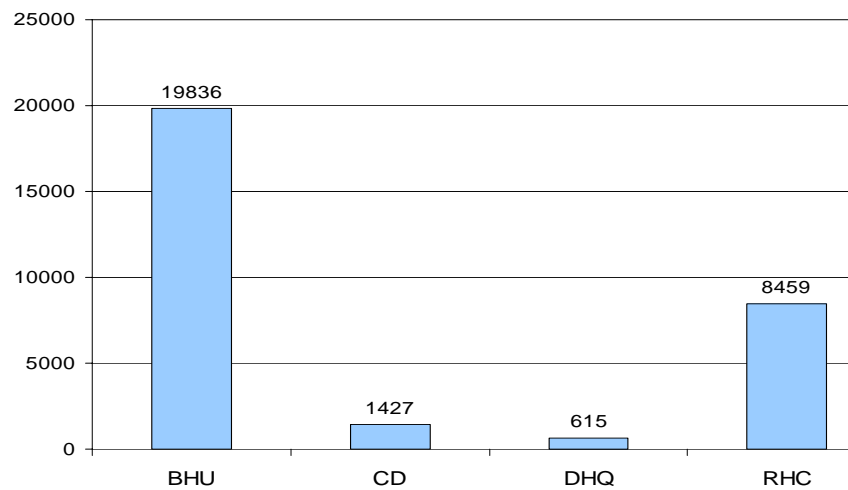


Figure 6: Patients treated by medical teams distributed by type of facility



* BHU: Basic Health Unit; CD: Civil Dispensary;
 DHQ: District Health Quarters; RHC: Rural Health Centre