

Health Situation Report # 36

16-29 March 2006

Highlights

- With the final version of the “Build Back Better” Reconstruction and Rehabilitation Strategy for the Health Sector diffused by the Earthquake Reconstruction and Rehabilitation Authority (ERRA)¹, the reconstruction process is materializing. All temporary and permanent health facilities need to get a Non Objection Certificate (NOC) from ERRA, including those facilities that are almost completed. Although several key issues have not yet been determined, close collaboration between ERRA, the Ministry of Health, WHO, and all health partners is assured thanks to a WHO secondment to ERRA.²
- To minimize expected gaps in health services delivery, WHO is compiling a matrix with ‘who is doing what where’ in which health partners are sharing their plans.
- A draft version of the proposed health projects has been presented as part of the Pakistan Action Plan from Relief to Recovery to the Office for the Coordination of Humanitarian Affairs (OCHA), with inputs from many health partners.
- With the return process of the earthquake-affected population fully in process, Kund camp (approximately 500 population) in Battagram district has been completely emptied.
- The main causes for consultations this week remain Acute Respiratory Infection (25%), Acute Watery Diarrhoea (6%), Fever of Unexplained Origin (4%) and (4%) injuries. Acute Respiratory Infection represented 34% in less than 5 years old compared to 23% in more than 5 years old. Similarly, 10% of the total consultations due to Acute Watery Diarrhoea were in less than 5 years old, compared to 4% in those 5 years old or more.
- With many temporary health facilities already completed and about to be completed, the Ministry of Health is urgently trying to solve the shortage of medical staff.



Several of the twenty drums incinerators on their way to remote health facilities in Balakot, to ensure proper disposal of medical waste

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Revitalization of primary health care services

Bagh

- All Lady Health Workers focusing on Reproductive Health issues, such as Mother and Child Health Care, Family Planning and Sexually Transmitted Infections such as HIV/AIDS participated in the Training of Trainers on Reproductive Health.
- In Bagh Tehsil, 100 % of the population has access to curative Primary Health Care services. The earthquake-affected population residing in spontaneous settlements have access to at least one health facility at less than 5 km walking distance.
- Seven prefabricated Basic Health Units (BHUs) have been completed at Ghazi Abad, THQ Kahuatta hospital, Khariab Abbasian, Rangla, Juglari and Bhatkot.

¹ <http://www.erra.gov.pk/Reports/ERRA-Health%20development%20Plan-Final.pdf>

² For more information, see Health Cluster meeting minutes <http://www.whopak.org/disaster/healthcluster.htm>

Battagram

- A total of 111 children have been vaccinated so far as part of the health component of the return package provided to the earthquake-affected population returning to their villages. Up to 25 March 1,574 families have returned (an estimated number of 9,813 persons), with another 1,720 families remaining.
- Health facilities of Hatal Baktool, Thakut Civil Hospital, Maidan Camp, and Meira Camp are in urgent need for midwifery kits and reproductive health care support. Training will be conducted soon. During the return process, trained Lady Health Workers equipped with delivery, kits will be accompanying pregnant women in their last month.

Mansehra

- On the occasion of World TB Day, health promotion messages on the availability of free TB treatment have been widely disseminated throughout communities in Mansehra Tehsil. Lady Health Workers assist in awareness raising activities related to TB. Over 80 volunteers have been trained in identifying cases of TB and referring.

Muzaffarabad

- Twenty-five Lady Health Workers were trained on Primary Health Care at the In-Service Training School in Ghari Dupatta.
- In Muzaffarabad Tehsil, 92% of the population still residing in camps over 50 tents have access to Primary Health Care facilities within 3 km radius. In Hattian Tehsil, the coverage is 83%.

Rawalakot

- Training of Trainers on Reproductive Health focusing on issues such as Mother and Child Health Care, Family Planning and Sexually Transmitted Infections was conducted.

Revitalization of hospital care services

Bagh

- In the planning process of the permanent and temporary reconstruction of health facilities, already 32 Basic Health Units and Rural Health Centres in Bagh District have been prioritised by the District Health Officer with support from WHO, and NGOs.
- An estimated 70% of the population has access to secondary health care services, either through the district hospital or through a field hospital.

Balakot

- The two prefabricated Basic Health Units (BHUs) in Sanger and Jabri Kalish are now functional, providing outpatient services by a medical technician. The Ministry of Health will be providing Lady Health Workers and a vaccinator to both BHUs.
- Vaccination teams from the Ministry of Health with WHO support have been mobilized to screen and vaccinate the returning population on the road from Balakot to Kaghan valley and to Muzaffarabad.
- Construction works on the Tehsil Headquarters (THQ) Hospital Balakot is almost completed. Outpatient departments, pharmacy, and the emergency ward are already functioning.
- Paramedical staff from the army is providing services at Kaghan hospital; no medical staff has arrived yet.
- The Cuban field hospital in Bassian has been handed over to the Pakistani army. The other Cuban hospitals in Balakot are still functional.

Emergency health coordination and information management

Balakot

- The UN staff working in Balakot and residing in the UN compound, have moved to Mansehra (approximately 45 minutes driving) as the UN compound was closed.

Battagram

- For implementation of the Logistics Support System in the warehouse of the Ministry of Health and the WHO office in Battagram, training was conducted for stock managers for a more efficient and transparent supply management. WHO donated a computer to the Ministry of Health to facilitate implementation of the LSS system.

Disease Surveillance and Early Warning System (DEWS)

- Although the number of reporting units for DEWS increased from 200 to 213, the number of consultations decreased from 89,486 to 86,775 in the past two weeks.
- There were 24 reported deaths in the past week, two due to Acute Respiratory Infections (ARI), one to meningitis, and one to injury. Since the start of DEWS, 261 deaths were reported from the earthquake-affected areas, 29% due to ARI.

Bagh

- Active case finding in Maladara village where a suspected measles case was reported last week did not result in any more cases. However, a localized measles vaccination campaign will be conducted in this area, as measles cases are reported sporadically.

Balakot

- Two cases of acute jaundice were reported from CH Garhi Habibulla in two different families. WHO sent a team for case investigation. One of the patients was from Dumkacha village, where in the previous weeks four other cases were reported. WHO is assessing the water and sanitation conditions in this area. Hygiene promotion and health education related to hepatitis A and E will be conducted soon.
- One case of acute flaccid paralysis was reported from Kashtara Camp, Garhi Habibullah. Stool sample was sent to the National Institute of Health (NIH) in Islamabad.

Mansehra

- One case of suspected measles was reported from Rural Health Centre Shinkiari. The two-year-old girl from Dhodial village was not vaccinated.

Muzaffarabad

- Ten cases of suspected measles were reported by ICRC Chamm. Outbreak investigation was conducted and an additional 13 suspected cases were found. A localized vaccination campaign was initiated in the area and 970 children under 15 years old were vaccinated. Another case of suspected measles was reported from Jamat ud Dawa hospital.
- One case of acute jaundice syndrome was reported from the Basic Health Unit in Pattika. Sample has been taken and was sent to the NIH laboratory in Islamabad.

Rawalakot

- Five cases of acute jaundice syndrome were reported from different locations. Four cases could not be traced and stool samples therefore not taken. One patient from Kahuta was admitted at the Combined Military Hospital (CMH). Sample was sent to NIH.
- WHO outbreak investigation into nine cases reported from Benjora, concludes that the two main water sources at Benjora Gam and Kamal Wali Jandali are a potential source of

infection. UNICEF and the Public Health Engineering Department (PHED) of Rawalakot will provide corrective measures to the water sources. The investigation recommends an overall improvement of the water and sanitation conditions. The NGO Medair will be carrying out a hygiene promotion campaign.

- Four cases of suspected malaria were reported. Rapid tests confirmed infection with falciparum malaria. The Roll Back Malaria team is cross checking all samples.
- Two cases of tuberculosis were detected at CMH Rawalakot. Smear tests confirmed the diagnosis of pulmonary tuberculosis. Both patients are army officials from Hajeera. Active screening of the army camp will be carried out and patients will be included in the Directly Observed Treatment (DOTs), the internationally recommended TB control strategy.

Environmental Health

Bagh

- To emphasize the importance of hygiene, use of safe drinking water, and vaccination, health education activities are focusing on schools to increase awareness among children. Health education committees are established to ensure ownership at local level.

Balakot

- Training for 21 health workers from different agencies on Health Care Waste Management and Injection Safety was organized with the NGOs OXFAM, ACF, and the Salik Development Foundation in Gari Habibullah.
- To further improve solid waste management, 10 rubbish bins were delivered to the Tehsil Municipal Authorities (TMA), with another 40 in the pipeline. Burial pits were completed in Sangar Basic Health Unit and PIMA hospital. A monitoring system of solid waste activities has been established in Tehsil Headquarter (THQ) hospital, the PIMA hospital and the two Basic Health Units of Gabri Kalesh and Sangar. WHO is following up on the mobilization of heavy machinery required for the selected landfill site in Kata Kawas.
- Further training on hygiene promotion in the PHAST (Participatory Health and Sanitation Transformation) methodology was conducted for Lady Health Promoters, who already started working in one of the spontaneous camps.
- WHO donated one incubator and 126 water testing kits for microbiological testing of drinking water to the TMA. A rapid briefing on use of the kits was performed.
- WHO and IFRC are installing a water treatment plant at the THQ hospital in Balakot.

Battagram

- As the return process in Battagram is smoothly taking place, WHO is shifting its health promotion activities to the places of return. Lady Health Promoters will be distributed to different Union Councils within the Battagram District.
- Together with the Pakistani authorities, WHO will be compiling a database for water quality surveillance and monitoring in the entire Battagram district, mainly in those areas where most of the affected population has returned to, such as Allai Valley.
- Construction work for a permanent DeMontfort incinerator for solid waste management in Besham Civil Hospital is ongoing. The hospital sees between 300-400 people per day and is the only health facility in Besham, the second biggest city of Shangla District. A cleaning campaign has been initiated at the hospital, while the cleaning campaign in the District Headquarters hospital (DHQ) in Battagram was successfully completed.
- WHO and IFRC are planning for the operation of a water treatment plant at DHQ hospital.

Mansehra

- Over 30 women were trained as hygiene promoters and Camps Health Workers for Al-Khair, Al Hussainia and Pir Abdul Qayoom Shah Camps during several workshops. Over 300 hygiene kits and water purification sachets were distributed to the families in the camps, as an additional incentive to improve the poor sanitary conditions in the camps.
- WHO donated an incubator and 189 H₂S testing tubes for water quality testing to the Public Health Engineering Department to strengthen their technical facilities.

Muzaffarabad

- The PHED and WHO are planning to renovate the Makri water plant.
- Hygiene campaigns are soon to be carried out by WHO, UNHCR and UNICEF to address scabies and lice problems among the population living in camps before their return home.

Rawalakot

- A large-scale hygiene education campaign targeting schools, mosques, and households is being carried out by the Ministry of Health, WHO, UNICEF and the NGO MedAir.
- WHO donated one ton of aluminium sulphate for the water treatment plant in Rawalakot.

Mental health and psychosocial actions**Bagh**

- Training of Trainers on mental health and psychosocial support was conducted for 33 medical doctors, technicians, and Lady Health Workers and Supervisors.

Balakot

- Activities focus on the training of teachers in schools, and medical staff, lady health workers, volunteers and social workers in camps and health facilities. The NGO IMC will be involved in the training sessions for health providers.

Battagram

- Outreach activities cover Maidan and Kuza Banda tent village, focusing on the rapidly returning population to their places of origin.

Mansehra

- A three-day mental health training for Lady Health Visitors and district master trainers is ongoing, focusing on the provision of basic psychosocial support, identification of common mental disorders and those cases requiring referral. Community education on mental health and psychosocial issues forms an important aspect of the training.

Muzaffarabad

- WHO trained staff of the Turkish hospital on mental health and psychosocial support. Further training was conducted for teachers to provide support to children, and health staff in the Tehsil Headquarter hospital and Bilal Hospital in Hattian Balla.