

Weekly Surveillance Report for Landslide/ Flood affected districts in the Elgon Region, 12 April 2010

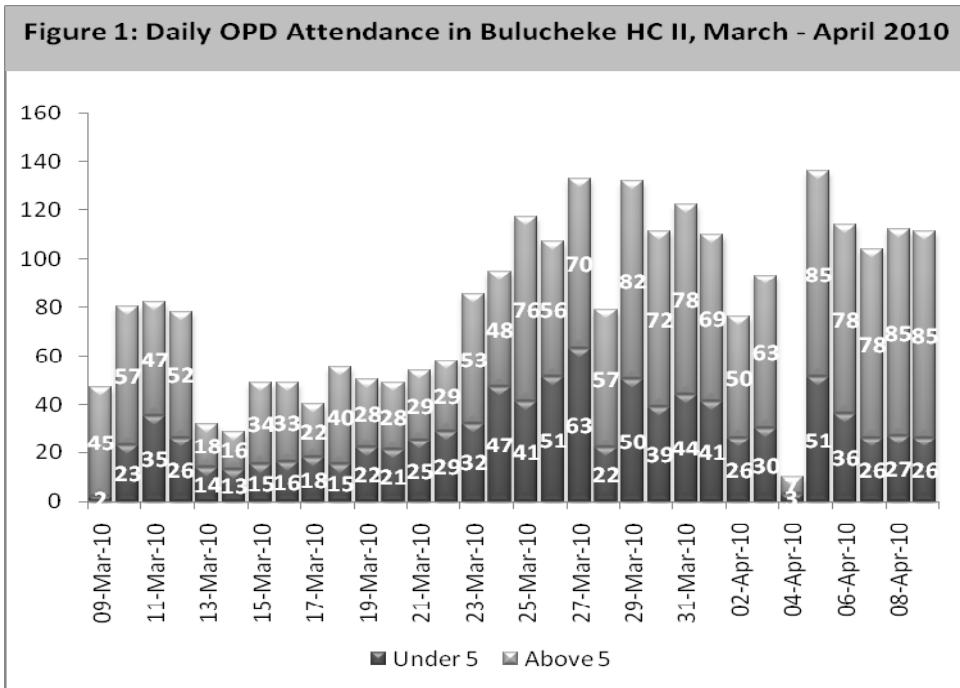
General situation

- Favorable weather conditions prevailed in the Mt. Elgon region for most days of the reporting week (5 – 11 April 2010) with only light rains at the beginning of the week.
- URCS and the district authority are conducting a re-validation exercise in Bulucheke and Bukalasi IDP camps to obtain accurate figures of displaced persons - taking into account the population that remained in their original homes uphill. This exercise arose as a result of excessive infiltration and impersonation of the camp by the neighboring/ host communities.
- A report is being awaited from a team of structural geologist who conducted assessment of the reported cracks/ soil depression in Manafa District. Meanwhile, preparation for precautionary relocation of the affected communities is going on.

Current health situation

Bududa

- Provision of general health care services is going on smoothly in Bulucheke HC II. Currently, there is adequate staffing as well as medicines and medical supplies
- The number of OPD attendance in Bulucheke HC II remained high during the reporting week (5 – 11 April 2010) as indicated in figure 1. However, it has been established that significant proportion (about 30 – 40%) of consultations in Bulucheke HC II are from the host community
- The morbidity pattern in Bulucheke HC II has changed during the reporting week, with malaria (clinical) being the most common - constituting between 30 - 40% of the disease burden; followed by RTI and diarrhea diseases. It should be noted that presumptive treatment of all fevers as malaria is being practiced since the health facility had stock-out of rapid diagnostic test (RDT) kits in the past 2 weeks



- One suspected case of cholera was identified from Bulucheke camp during the reporting period. However, laboratory analysis of stool specimen carried out in Mbale Hospital tested negative for *vibrio cholera*
- The number of dysentery cases has increased markedly during the reporting period (see details in trend analysis below)

MCH

- Twenty (20) normal deliveries have been conducted in Bukigai HC III during the reporting period
- Bulucheke HC II provides daily ANC services including PMTCT and immunization services to the displaced persons

WASH

- The number of functional latrine stances in Bulucheke Camp is 60, translating to a ratio of about 50 persons per latrine stance. There is need for construction of more latrines to bring down the ratio to about 20 persons per stance
- Environmental sanitation and hygiene conditions in the camp have greatly improved during the week through intensified supervision of community actions by the WASH sector. However, servicing of communal hand wash facilities remains inadequate (as most are empty)
- The gravity flow system is currently providing adequate water supply to the camp. A water quality testing report done by OXFAM indicates that the quality of the water is good (free from fecal coliforms) apart from being slightly turbid [the turbidity is being addressed].

SHELTER

- URCS supplied more family tents to Bulucheke IDP Camp, though congestion is still very high – predisposing the displaced persons to contagions

Butaleja District

- There is an increase in dysentery morbidity in Buteleja District during the reporting week (see details in trend analysis below)

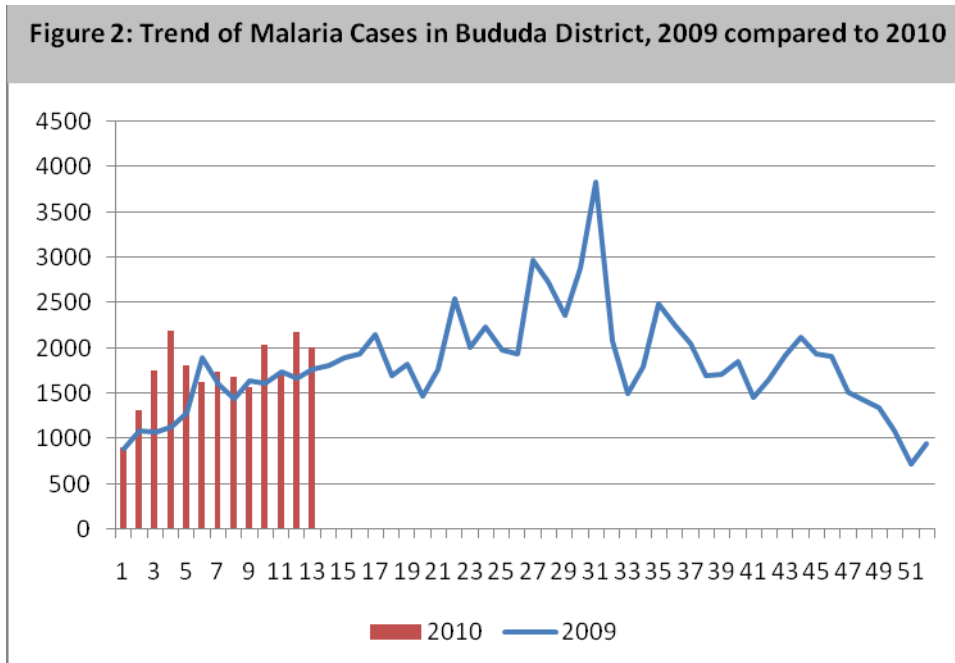
Manafa District

- No major health problems have been reported from Manafa District.
- No new case of cholera has been reported in the past 5 weeks.

Monitoring of Disease Trends in Bududa District

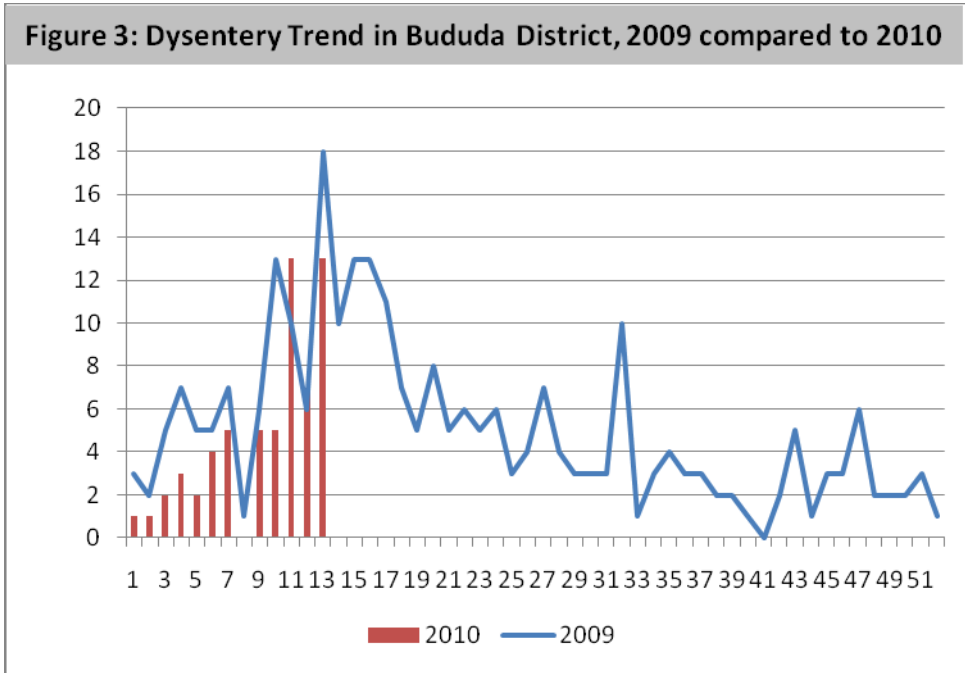
- **Malaria trend in Bududa**

The trend of malaria morbidity in 2010 has slightly surpassed the trend recorded during the same period in 2009. None the less, a more in-depth analysis e.g. construction of malaria channels and other malaria indicators needs to be done in order to elucidate the significance of this trend.



- **Dysentery trend in Bududa**

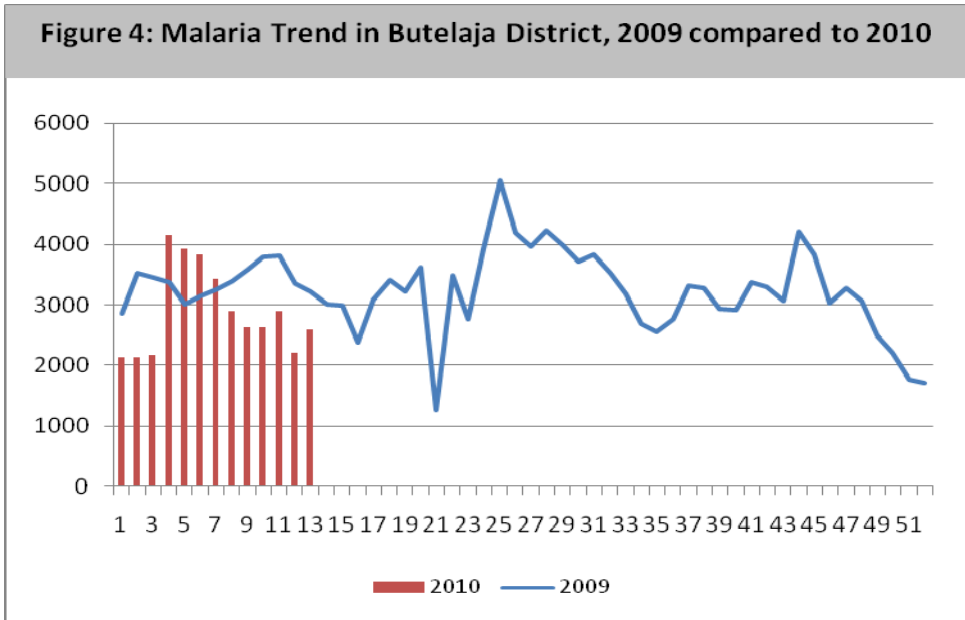
A total of 13 cases of dysentery have been reported from Bududa District (refer to figure 3 below). Significantly, 10 out of the 13 cases originated from the Bulucheke camp as opposed to 1 case that came from the camp in the previous week. Preliminary investigation shows that the cases are evenly distributed across the camp. Further investigation is being undertaken while this trend is being closely monitored.



Disease Trends in Butaleja District

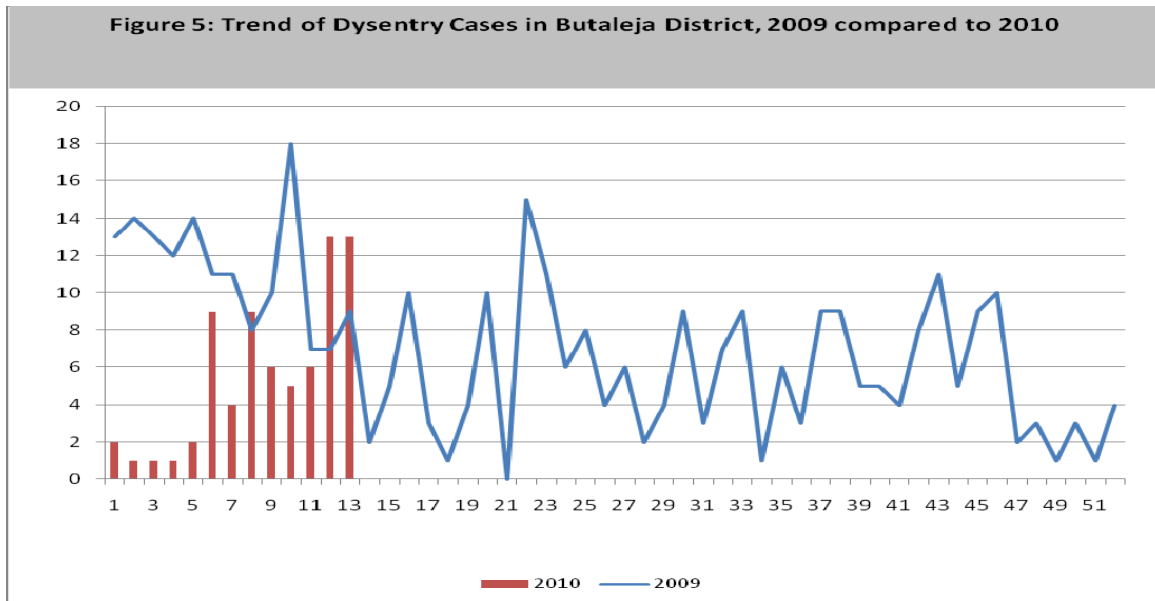
- Malaria trend in Butaleja**

Malaria transmission pattern has remained normal in Butaleja District as indicated in figure 4 below:



- **Dysentery Trend in Butaleja**

The trend of dysentery morbidity in Butaleja District has remained high as indicated in figure 5. The cases of dysentery in Butaleja are widely scattered across the district.



The increasing caseload of dysentery in Bududa (Bulucheke camp) and Butaleja Districts denotes the high transmission potential of water borne diseases. This therefore signifies the potential risk of serious outbreaks of any of the water-related diseases of epidemic potential (e.g. cholera) should the pathogens be introduced

Update on health response

- WHO supported MoH/ Bududa District to train 180 VHTs from 3 most affected sub-counties in Bududa
- Training of additional 100 VHTs from 3 sub-counties (most affected by floods) in Butaleja District has been conducted by MoH with support from WHO, bringing the total number of VHTs trained to 200.

Challenge/ gaps and way forward

- Provision of mental health/ psychosocial support services in Bulucheke HC II/ camp remains inadequate and needs to be strengthened urgently.
- Supplies of Malaria RDTs needs to be provided to Bulucheke HC II in order to avoid presumptive malaria treatment and eventual waste of anti-malarial medicines

Planned activities

- Conducting mass immunization campaigns in Bulucheke Camp and part of child days exercise
- Continue provision of general health care services and monitoring of disease trends/ outbreaks



A WHO hired Doctor attending to a patient in a tent



Pregnant mothers attending health education during ANC



Members of VHT undergoing training