

Outbreak Situation Report 28 July 2009

This report has been prepared by the health cluster based on information collected from the MoHP, partners on the ground as well as district officials.

Situation

- As of 28 July 2009, the number of treated and deaths can be summarized as follows:

District	# of affected VDCs	# of Treated	# of deaths
Jajarkot	24	15520	136
Rukum	16	7943	38
Dhading	1	103	0
Kanchanpur	1 Municipality	264	1
Dailekh	2	>96	3
Baitadi	1		0
Dolpa	3	296	3
Salyan	1	65	3
Surkhet	3	407	0
Rolpa	1	197	2
Pyuthan	3	105	1

- In Jajarkot and Rukum, the two most affected districts, there are currently 52 health camps in place, with 36 in Jajarkot and 16 in Rukum.
- In Dailekh, more than 96 cases have been reported and two different health teams have been mobilized to assess the situation.
- Eight samples were positive for Vibrio Cholera 01 out of 20 samples collected from two districts. Remaining samples are positive for Enterotoxigenic E Coli.
- In Dolpa, Bajhang and Dadeldhura, the outbreak has been controlled but health workers continue to remain on high alert.

Response

Coordination

Central Level Coordination

- The Prime Minister of Nepal held a meeting on Saturday 25 August 2009 in Kathmandu to request for support to the outbreak response in the Mid and Far Western Development Regions from the UN, international and national NGOs.
- A meeting was held on Tuesday, 28 July 2009 in Kathmandu under the chairmanship of the Ministry of Foreign Affairs, to discuss and reiterate the Prime Minister's request for support from the international community to the outbreak response.
- The response activities are being coordinated at the central, regional and district levels. At the central level, EDCD/MoHP is coordinating the response with support from various other ministries.
- The health cluster had its third meeting on Tuesday, 28 July 2009 in Kathmandu to discuss the current situation and identify the gaps. A matrix of

activities to which the cluster members can contribute has been drawn up, to be shared with the MoHP on Wednesday, 29 July 2009.

- The Water and Sanitation Cluster held a meeting on 24 July 2009, in Kathmandu. The main discussion was around identifying the key priority areas for WASH response, and the cluster selected responsible organizations/task force to perform the identified priority tasks.
- A long and short term action plan has been put together by MoHP for responding to the current outbreak situation.

Regional Level Coordination

- At the regional level, Dr Pathak of DoHS/MoHP continues to coordinate the response. Dr Chand of MoHP is coordinating in Jajarkot, and Dr Thakur, DoHS/MoHP has recently been deployed to Rukum to coordinate the response in the district.
- A regional health coordination meeting was held on 25 July 2009 in Surkhet, under the chairmanship of Dr Pathak. OCHA, UNICEF, DFID, NEWA, GTZ, WHO and other agencies were present. Discussions were on strengthening the surveillance system, and the need to have stronger presence of the DHOs in the response mechanisms. A control room has been established in the Regional Health Directorate of Surkhet to collect and communicate the information related to the current outbreak. The contact information can be found in the contact section below.

District Level Coordination

- A coordination meeting was held in Jajarkot District of both the health and WASH clusters, on Monday 27 July 2009. The health cluster discussed strengthening the surveillance system and continuing ongoing activities of treatment and response. The WASH cluster discussed strengthening the WASH intervention through forming ward committees and distributing information on handwashing, preparation of ORS, and chlorination at each household. A monitoring group has been formed for this action.
- A health cluster meeting was held in Dahdeldura district on 27 July 2009 under the leadership of the DHO. The meeting discussed strengthening the distribution of IEC materials, mapping high risk areas of VDCs, ensuring the existence of key drugs and WASH related items in the district and strengthen overall preparedness measures in the district for this outbreak.
- In Bajura district, a health committee meeting was held under the chairmanship of the LDO on 22 July 2009. the meeting discussed the current situation in Bajura, and formed a monitoring committee to take stock of the situation.

Health

- WHO has shared its case management protocol with all partners for further distribution in the field.
- A large number of health workers have been mobilized to the affected areas, both by the GoN and the international and national agencies.
- Currently, the Government of Nepal has announced that there are sufficient supplies and human resources in place. However, we should now start to focus on the longer term priorities such as improving the overall hygiene and sanitation situation, as well as underlying causes/results such as malnutrition, protection issues and lack of food.

Surveillance

- WHO continues to support the districts in strengthening the surveillance system on the ground.

- NRCS has pledged its volunteers to support the surveillance efforts, as the agency has a large number of volunteers who are already on the ground.

Fund

- The Swiss Red Cross has committed around CHF 200,000 to the Nepal Red Cross Society to support for volunteer mobilisation activities in the affected districts.
- ECHO, DFID and USAID as requested for specific proposals from agencies for additional funding needed for the outbreak response. Currently no donor has received any proposal for the outbreak.
- USAID announces that the US Mission to Nepal can request to the Office of Foreign Disaster Assistance (OFDA/USAID) for up to \$50,000 for INGO implementation of activities and/or distribution of goods in response to a Government of Nepal request for support in emergency/disaster situations that are greater than the government can adequately cope with, and in conjunction with GON approval of the Mission's issuance of a disaster declaration. The Mission has informed OFDA of the cholera/diarrhea outbreak situation but has not requested their assistance to date

Logistics and Supplies

- Save the Children has provided different 11 items of medicines to the Regional Medical Store of Nepalgunj on 23 July 2009 to support the control of the outbreak of diarrhoea in Jajarkot , Rukum and other adjacent district.
- OCHA has provided a list of helipad landing points in and around the affected areas for possible use in delivering supplies.
- A basket fund is in preparation in Nepalgunj to fund the transportation cost. CARE is ready to support up to 100,000 NPR.
- Merlin has distributed 20,000 ORS to the DHOs in Rolpa and Pyuthan. Merlin has also donated RL, and other drugs and supplies to the DHO of Rolpa for use, including 30,000 zinc tablets.
- UNICEF is currently deploying 500,000 zinc tablets to different locations, both for immediate response as well as for stockpiling in case of escalation of the situation.
- MSF has sets of full cholera treatment centers in the country, which can be mobilized if needed and requested.
- Several private sector partners have donated drugs, aquatabs and piyush including Lomus Pharmaceuticals, CRS, Center for Socio Economic Development (CSED) and Environment and Public Health Organization (ENPHO).
- NFPH, with the support of USAID, collected information on stocks of ORS and Zinc tabs available with the DHOs of Surkhet, Dailekh, Rukum, Jajarkot and Dolpa which was shared with LMD/DOHS. NFHPH staff also distributed ORS, zinc and Metro to 2 PHCs and 3 SHPs of Surkhet.

Response per District (Efforts continue in various districts to respond to the outbreak. Please refer to previous sitreps for an overall picture of the response per district.

- In Jajarkot district, NRCS deployed a response team to carry out a rapid assessment which recommends immediate intensive awareness campaigns in all affected districts. Volunteers were identified, oriented and deployed to the field with specific roles and responsibilities which includes: door to door visit, IEC distribution, micking of information, distribution of chlorine tablets and ORS, immediate referral to health centers, coordinate with local networks for

- effective response). At the moment 200 volunteers have been mobilised according to the need in all affected districts
- CARE's Emergency support team has been mobilized to Jajarkot district. The team includes 10 Health Workers from within CARE's health programs in Far western region. Min R Gyawali, a senior staff of CARE working in Child health and maternal health program, Doti, will lead the team. By 29th July, all members will reach to Jajarkot district.
 - World Vision International has deployed 2 doctors to Jajarkot district. The team is carrying 300,000 NPR worth of drugs and supplies to be used in the district.
 - In Jumla district, World Vision International is distributing IEC materials into 15th VDCs. The agency also has a stock of ORS on standby for possible distribution if needed.
 - Merlin is actively involved in the outbreak response in Rolpa and is willing to expand its programms to Pyuthanif necessary. Merlin has a stock of drugs and supplies in the district to be mobilized if needed.
 - UNICEF has mobilized its national health officer to Jajarkot and Rukum districts to assess the situation.
 - In other districts, partners including CARE, KBI, WVI, WHO, UNICEF and others are on high alert for any further spread of the outbreak.

Nutrition

- In Jajarkot and Rukum districts, UNICEF will conduct a rapid surveillance of in affected VDCs using Mid Upper Arm Circumference (MUAC) to facilitate a better understanding of the impacts of the diarrhoea outbreak on child nutrition and for identifying nutrition needs.
- UNICEF is also planning infant and young child feeding promotion as part of Hygiene awareness raising campaign is being carried out in the district and other affected districts.
- At the central level, the nutrition cluster has prepositioned vitamin A supplements, supplementary food, supplementary feeding kits, therapeutic supplies (RUTF, F75, F100), medications, ReSoMal for treatment of acute malnutrition -MUAC tapes, height boards, weighing scales for rapid nutrition assessments, and nutrition IEC material for possible deployment in case of need.

WASH

- In Jajarkot district, NEWAH with support from Concern Worldwide has mobilized 1 Community Medical Assistants (CMA) and 1 Health volunteer, 2 NEWAH technical staffs from Nepalgunj to Majhkot and Dasera VDCs on July 13, 2009. Another team of 4 CMAs, 1 NEWAH Staff have also been mobilized on July 17, 2009. The teams are actively involved in distribution of IEC materials, awareness raising and hygiene promotion activities at the household level and distribution and training on the use of ORS, donated by UNICEF.
- In Jajarkot district, NEWAH is covering 4 VDCs, NRCS 9 (with the support of USAID), DEPROCS 9, and HRDC 8 VDCs for hygiene and sanitation campaigns.
- Oxfam, IRD, UNICEF, CARE, and other WASH partners are expanding on their routine programme in different districts to respond to the current outbreak. A detailed list of which agency will be the focal agency in each district has been developed.

- In Kanchanpur, the DDC agreed to support 8 handpumps with the costs covered by the municipality.

Challenges

- Logistics remains a main challenge, with some areas still un-accessed.
- The need for rapid distribution of water purification measures to the household level remains. There is also a high need to train on the use of ORS at the household level.
- The upcoming monsoon season may challenge the agencies in terms of its resources available should any flood happen in the country.

Next Steps

- The Government of Nepal will request for specific action and support from each agency for outbreak response.
- Agencies will try to strengthen its preparedness measures in areas that have not been severely affected in order to curtail the outbreak.

For Further Information

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The information can also be found on the following websites:

http://www.searo.who.int/en/Section1257/Section2263_15017.htm

<http://www.un.org.np/resources/diarrhoea-outbreak/>