

# **Koshi Floods Saptari Situation Brief 5<sup>th</sup> September 2008**

**Jointly prepared by WHO, UNICEF and UNFPA**

## ***Health Updates:***

- Not adequate health camp to cover the need of the displaced people. At present, there are only five fixed camps (one 24 hour) and four mobile camps, whereas there are more than 20 shelters
- Overall management of patients is very poor in terms hygiene, waste disposal, water resources, privacy for check up and furniture (beds and mats)
- Not adequate human resource providing services at camps as well as at the hospital to cope influx of patients, including additional tents.
- A team of ten specialist doctors arriving tomorrow (6 Sept) from KTM.
- Two camps recommended for 24 hour health service clinic, with medium level service provision, in Kankalni Mandir and custom health camp.
- DPHO will soon start their preventive clinics such as EPI, MC immunization, FP services and even Delivery or any RH issues after fixing the site.
- Availability of ambulance and lack of running cost is a major problem, which needs immediate attention.
- There has reporting of 5 suspected measles cases in Custom health camp, all of them from a same location and all the cases from Indian inhabitants. Need to validate the cases and set up surveillance system.
- Incidences of infection is increasing, particularly that of diarrhoeal cases. In Kankalni health camp, the case load of diarrhoea is increasing drastically and in the past two day almost exponentially. Have initiated tracking of Morbidity/Mortality for the preparedness and response of epidemic.

## ***General Food Relief Update***

- WFP through DEPROSC has been distributing food ration. Each family has been provided with 15 day dry ration-40 kg rice, 5kg lentils and 1 kg salt. As of 4<sup>th</sup> of September, the food has been distributed to around 4, 175 families out of initial target of 4,300 families. Field visits found that there are still some camps or settlements which are yet to be covered.
- Overall, the distribution has been good, with few logistical problems, double distribution to same family and exclusion of some eligible families. Some of the families did not have cooking utensils and firewood. These issues will be addressed once the displaced families are officially registered with family card.
- WFP has committed for food distribution for two months.
- WFP started provided food commodities for patient and their accompanying visitor.

### ***Nutrition***

- In the Health and Nutrition Cluster meeting, supplementary feeding, vitamin A distribution, Zinc supplementation and setting up of monitoring system to identify and treat severely malnourished children have been discussed. Also shared with the partners about CHD's training of health staff and nutrition facilitators on Infant Feeding during Emergency along with above issues.
- Concern informed that supplementary feeding will start from today.
- Concern has strongly indicated that they will only conduct supplementary feeding (as wet feeding) in 6 sites. Thus there is an urgent need to identify partners who could conduct the feeding in other sites.
- There is an urgent need to supply Zinc tablets and vitamin A supplementation. Vitamin A capsules was not available in the camps for case treatment.

### ***WASH Updates:***

- 71 hand pumps installed, 3 toilet completed so far.
- 15 VF in 7 group mobilized for hygiene promotion in Spur area shelter 1-8 (4 group in Camp A , One group in colony area camp C, One group in kankalin Mandir Camp B.
- Miking for key messages on sanitation conducted in Spur area 5-8.
- UNICEF has been requested to support set up latrines and tube wells in Health camps.

### ***Education Updates:***

#### **Discussion in Education cluster meeting:**

DToT is still an Issue in Education:

- DToT for safe space postponed and new DToT date is not confirmed yet .Reason is Local NGO (those who are not implementing partners of Save the Children and UNICEF) has threatened and pressurized DEO that they will not allow to run safe space training if they are not involved in DToT and for the implementation of safe space.
- Education assessment format for data collection of grade wise students and out of school children has been developed and will be finalized on the 8 Sept 2008 in education cluster meeting.
- Coordination with Save the Children for development of local level human resource (district trainer) for safe space facilitators training in future as alternative of DToT.

### ***Protection Updates:***

- Privacy is not maintained while examining women for treatment in health centers.
- No female health service providers available for women.
- Tracing of families of separated children is still an issue.
- Arrival of TPO –PS counselors to conduct assessment on the psychosocial issues and to recommend necessary steps and interventions required