



Situation Update

Mid Western Region Diarrhoea Outbreak

*This report has been issued by UN OCHA Nepal. It covers the period until 12 July 2009.
The next report will be issued by 14 July.*

Highlights:

- District Public Health Office confirms 96 diarrhoea related deaths in Jajarkot District from 1 May to 12 July 2009
- 19 unconfirmed diarrhoea related deaths reported in Rukum District and two deaths in Dailekh District, currently under investigation
- District Line Agencies are coordinating response to outbreak
- Difficult access to remote affected areas delays response of medical staff and delivery of supplies

I. Situation Overview

1. The hilly districts of the Mid Western Region have been affected by a diarrhoea outbreak, in particular Jajarkot and Rukum Districts¹. Jajarkot District was initially affected, with 96 diarrhoea related deaths as of 12 July, according to the District Public Health Office (DPHO). Media reports indicate diarrhoea related deaths are increasing in Jajarkot and neighbouring Districts, WHO is working with the DPHOs to investigate the cause of the outbreak and verify the epidemiological data.
2. Jajarkot is the worst affected District, which is attributed to poor sanitation and hygiene by local health workers. The winter drought, delayed monsoon rains and dried up water sources increased the risk of consuming contaminated water. Water quality and availability and latrine coverage figures are unknown at this time. The DPHO stated that the latrine coverage is very low and open defecation is a common practice. In early May 2009, DPHO responded to the initial diarrhoea outbreak in remote communities in southern Jajarkot District, which was difficult due to lack of logistical access and locally available resources. On 14 May, the Minister for Health and Population (MoHP) including a team of Doctors assessed the diarrhoea affected communities in the Mid Western Region. The number of diarrhoea related deaths continued to rise. On 24 June, DPHO mobilized available medicine and health teams and requested additional support from the Regional Health Directorate and MoHP.
3. There are additional reports of diarrhoea related deaths in Rukum, Dailekh, Salyan and Dolpa Districts. In Rukum District, unconfirmed reports indicate an estimated 15 diarrhoea related deaths, with about ten VDCs adjoining to Jajarkot and Dolpa Districts affected by the diarrhoea outbreak. In Dailekh District, the DPHO confirmed two diarrhoea related deaths in VDCs bordering Jajarkot District on 25 June and 4 July. In Salyan District, the DPHO stated that there were two diarrhoea related deaths in the District on 2 and 3 July, however, the situation is under control. According to sources at the regional medical store, in Dolpa District headquarters 25 police affected by the diarrhoea are under going treatment and dozens of people are affected in the villages bordering to the Jajarkot.
4. Due to the logistic difficulties DPHOs are facing challenges to provide the medical aid to the diarrhoea affected population in the remote villages. There were also shortages of the health workers and medicine in some of the diarrhoea affected Village Development Committees (VDC) in Jajarkot and Rukum Districts, which is being addressed by the DPHOs.

¹ Jajarkot District is one of the poorest in Nepal, ranked 71 out of 75 Districts in the national Human Development Index (HDI). The projected population of Jajarkot District is 151,551 people. Rukum District HDI ranked 64, with a projected population 215, 270. Dailekh HDI is 66 with a projected population of 255, 858. Salyan HDI is ranked 61 with a projected population of 610,000.

II. Humanitarian Needs

Health

- Response:

1. The DPHOs in Jajarkot, Rukum, Salyan Dailekh and Dolpa are leading the diarrhoea outbreak response. In Rukum District, four treatment camps were established at Gotam Kot, Arbiskot, Bankekot and Garaila. The DPHO Rukum sent medicine and health workers to control the diarrhoea outbreak. The DPHO Dailekh mobilized the 6 member health team to recent diarrhoea affected areas and directed all the Health Post and Sub-Health Post to remain on high alert. District and the local health institutions are to maintain a maximum of medicine stock. In Salyan, the DPHO reported that the situation is under control and there is no epidemic in the area. The DPHO immediately mobilized health teams and medicine to the reported affected area. Salyan health facilities have sufficient medicine stock and health workers and all are on high alert.
2. Epidemiology and Disease Control Department (EDCD) deployed the health workers team from Banke District to Jajarkot District.
3. Department of Health Services sent nine health workers, including two Doctors to Jajarkot District.
4. The World Health Organisation (WHO) is providing support to the DPHO of affected Districts, as well as support to the RHO and MoHP.
Jajarkot: WHO provided the DPHO one diarrheal disease kit, which can treat 100 severe cases and 4-500 mild cases of diarrhoea. (WHO has positioned 12 diarrheal disease kit at various strategic locations throughout, which can be mobilized be required). A WHO SMO and a National Public Health Laboratory (NPHL) officer will reach Jajarkot on 11 July with medicine and reagents to test for sources of infection.
Rukum: A WHO Surveillance medical officer is supporting the outbreak investigation.
All areas: The Regional Rapid Response Team (RRT) and District RRTs were mobilized and are active. WHO also requested a surveillance officer from the Regional Office, who will be deployed to Nepal this week. WHO is supporting the EDCCD at central level in coordination of the response efforts.
Central level: WHO also has 54,000 aquatabs on standby, to be released upon request from MoHP.
5. International Nepal Fellowship (INF) deployed a 6-member response team (Doctor, health assistant, nurse, team coordinator and support staff) to the southern communities of Jajarkot District to administer treatment for 15 days from 10 July.
6. ADRA Nepal supported medicine equivalent to NPR 40,000 to the DPHO Rukum.
7. Safe Motherhood Network Federation (SMNF) is supporting health education in the diarrhoea affected VDCs of Rukum District.

- Key gaps: Information on the cause of the outbreak and the epidemiological breakdown of numbers are the current key gaps. WHO is responding to the information gap. The DPHOs state that there is sufficient health staff in the health facilities.

Water, Sanitation, and Hygiene

- Response:

1. The District Drinking Water and Sanitation Division Office (DWSDO) are leading the response in Jajarkot and Rukum Districts.
2. The DPHO Rukum is sponsoring the public awareness campaign on WASH through local FM radios and pamphlets are distributed through health workers and volunteers.
3. UNICEF has expedited its WASH campaign in the affected Districts in support of the DWSDO.
4. *Jajarkot:* UNICEF provided 108,000 aquatabs (water purifiers) to the Jajarkot DWSDO and 36,000 aquatabs to the implementing partner, NEWAH, on 10 July. UNICEF also provided information pamphlets for distribution and 1,000 ORS. On 11 July, DWSDO provided an orientation for stakeholders to distributed the aquatabs to the affected areas along with the WASH awareness-raising leaflets.
5. *Rukum:* UNICEF will supply 108,000 aquatab with leaflets and 3000 sachets ORS on 13 July.
6. Development Project Services Center (DEPROSC), UNICEF implementing partner, will distribute 2,000 ORS, 3,000 soap and hygiene communication materials in Jajarkot District, as provided by UNICEF. The DEPROSC team in Jajarkot are fully mobilised for door to door visits and distribution of aquatab, and dissemination of sanitation messages.
7. NEWAH is conducting hygiene campaigns and household water treatment, funded by Concern Worldwide.
8. Community Support Program (CSP) of DFID has supported 85,000 chlorine tablets, 20,000 packets ORS and 15 hand speakers for the awareness raising in Jajarkot District.

- Key gaps: Zinc tablet supplies are low in Jajarkot health facilities. UNICEF is identifying available stocks to deliver to Jajarkot and Rukum Districts.

There is a need for an expanded hygiene promotion including latrine construction and protection of water sources is important for mid and long term.

Logistics

- **Needs:** The largest constraint is the transportation of the medicine and the health workers to the affected areas. The diarrhoea affected villages are remote, in some areas it takes five days to reach from District Headquarters (DHQ). One local man from Jajarkot District has privately hired a helicopter to support the delivery of medical supplies.

- **Response:**

Jajarkot:

1. DPHO Jajarkot mobilised medical workers, including Female Community Health Volunteers (FCHVs) and Maternal Child Health (MCH) workers to provide medical support.
2. Regional Medical Store transported medicine from Nepalgunj to Jajarkot District Head Quarters.
3. Two helicopters, one Nepal Army and another privately rented by Mr. Rajib Sahi (a resident of Jajarkot), transport medicine and other necessary equipment to nine distribution points, from 11-12 July. Due to the bad weather, it is difficult to send medicine to some locations.

Rukum:

4. The medicine is dropped by helicopter and porters are mobilized to transport the medicine to the affected areas.

III. Coordination

1. **Regional Health Coordination meetings:** On 12 July, at 1600hrs there was a Regional Health Coordination Meeting focused on the diarrhoea outbreak in Jajarkot, Rukum and Dailekh.
2. **District Level Coordination:** Epidemic Response Committee has been formed in Jajarkot, DPHO, District Development Committee (DDC), District Police Office (DPO), District Administration Office (DAO) Nepal Red Cross Society and Civil Society are participating in the Coordination meetings.
3. **Assessments:** The DPHO with the support of WHO, is conducting an investigation on the outbreak, which will also confirm the source of outbreak.
On 7 July, the Health Minister visited the DHQ and diarrhoea affected areas. The Minister directed the DHO and authority to expedite the rapid response.

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