



Situation Update

Mid and Far Western Region Diarrhoea Outbreak

This report was issued by UN OCHA Nepal. It covers the period until 16 July 2009.

Highlights:

- 111 diarrhoea related deaths in Jajarkot District DPHO confirmed, from 1 May to 16 July 2009
- 25 diarrhoea related deaths in Rukum District DPHO confirmed, from 29 June to 16 July, currently under investigation
- Ministry of Health and Population and District Line Agencies are coordinating response to outbreak
- Access to remote affected areas delay response of medical staff and delivery of supplies
- Public awareness campaigns on sanitation and hygiene underway

I. Situation Overview

1. The hilly Districts of the Mid Western Region have been affected by a diarrhoea outbreak. Jajarkot District was initially affected, with 111 diarrhoea related deaths, as of 16 July, according to the District Public Health Office (DPHO) ¹. Medical teams are mobilised to the affected areas and mass information hygiene awareness activities for prevention are underway. The Ministry of Health and Population (MoHP) is coordinating the response, with the support of WHO, to investigate the cause of the outbreak and verify the epidemiological data. UNICEF is supporting drinking water supplies and sanitation and hygiene awareness raising campaigns.
2. Jajarkot was the worst affected District, which is attributed to a lack of clean drinking water, poor sanitation and hygiene. The winter drought, dried up water sources and recent heavy rainfalls increased the risk of consuming contaminated water. Water quality, 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.
3. In Rukum District, the diarrhoea related death toll has reached 25 dead from 29 June to 13 July, according to the DPHO Rukum. The highest diarrhoea affected populations are in Aathbiskot and Gotamkot Village Development Committees (VDCs), adjoining affected VDCs in Jajarkot District. Any link between these cases is unconfirmed and under investigation by MoHP and WHO health teams.
4. Diarrhoea related deaths were also reported in a growing number of neighbouring Districts, however the health situation remains within normal limits and health teams are on alert.
5. Due to logistic constraints, DPHOs face challenges in the provision of medical aid to the diarrhoea affected population in the remote areas.

II. Humanitarian Needs

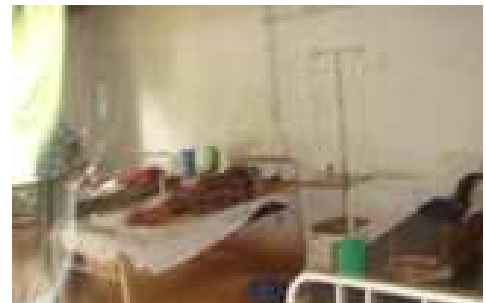
Health

▪ Central Response:

1. The MoHP is leading the response from the central level, with staff located in Jajarkot and Rukum Districts. Coordination focal points were identified from MoHP and Epidemiology and Disease Control Division (EDCD) for human resource mobilization, logistic coordination and communications. MoHP logistics coordinator is also located at the Chourjahari airstrip. The DPHOs in the various Districts are leading the response to the diarrhoea outbreak.
2. Sample testing was conducted and is being assessed in Kathmandu to identify the cause of the outbreak and enable a targeted response.
3. Surveillance is underway for MoHP, EDCCD, DPHO and WHO.

▪ Jajarkot District Level Response:

1. DPHO Jajarkot mobilised Health Posts and Sub-Health Posts, medical staff, including Female Community Health Volunteers (FCHVs) and Maternal Child Health (MCH) workers to provide medical support. Political party members, including the Maoist health workers are supporting affected communities.
2. As of 16 July, a total of 1,368 diarrhoea patients received treatment in various locations of the District. In Chourjahari, there are 31 Health workers including 8 doctors are in stand by position.



*Diarrhoea patient at DHQ hospital, Jajarkot
(Photo Credit – OCHA)*

¹ Jajarkot District a Human Development Index (HDI) ranked 71 out of 75 Districts in Nepal. 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.

3. Health camp locations and health team deployment locations are available the Nepal Information Platform.
 4. As of 16 July, a total of 1,368 diarrhoea patients received treatment in various locations of the District. In Chourjahari, there are 31 Health workers including 8 doctors are in stand by position.
 5. Health camp locations and health team deployment locations are available the Nepal Information Platform.
 6. Three tonnes of medicine were delivered to Chourjahari airstrip, of which two tonnes were distributed to Jajarkot.
 7. Epidemiology and Disease Control Division (EDCD), WHO, International Nepal Fellowship (INF), Helvetas, are supporting with health workers. MoHP, EDCC, WHO, NRCS, UNICEF, DEPROSC, NEWAH supported by CONCERN Worldwide, are providing medical supplies. For detailed information, please refer to the Commodity Tracking Matrix.
- Rukum District Level Response:
 1. DPHO Rukum mobilised medicine and health workers to control the diarrhoea outbreak and established four treatment camps at Gotam Kot, Arbiskot, Bankekot and Garaila. NRCS, Nepal Army, I/NGOs and UN Agencies are supporting the distribution of medical supplies.
 2. MoHP, NRCS, WHO, UNICEF, Save the Children, Child Workers in Nepal (CWIN), Safe Motherhood Network Federation (SMNF) are supporting the response with health workers, relief supplies and education materials. For detailed information, please refer to the Commodity tracking matrix.
 - Other Districts Response:
 1. *Other Districts in the Region:* DPHOs state that the health situation is normal, with sufficient health stocks and Rapid Response Teams (RRT), Health Post and Sub-Health Posts on standby in Accham, Baitadi, Bajura, Dadeldhura, Dailekh, Dolpa, Mugu, Rukum, Pyuthan and Salyan.
 - Key gaps:
 1. Confirmed information on number of deaths, affected population and linkages with other Districts, which MoHP and WHO is investigating.
 2. Lack of official epidemiological figures of the cases from the affected areas
 3. Access to the affected areas is limited.
 4. There is an urgent need to set up and strengthen the surveillance system, which will generate disaggregated data on the trend and support planning for further intervention.
 5. Stool samples from the districts have not reached the National Public Health Laboratory because of transport difficulties.

Water, Sanitation and Hygiene (WASH)

- Response:
 1. The District Drinking Water and Sanitation Division Office (DWSDO) are leading the response in Jajarkot and Rukum Districts. DWSDO teams were deployed to affected areas for water samples. DPHO Rukum is sponsoring public awareness campaigns on WASH through local FM radios and pamphlets are distributed through health workers and volunteers.
 2. UNICEF, DFID Community Support Programme (CSP), Development Project Services Centre (DEPROSC), NEWAH funded by Concern Worldwide. For detailed information, please refer to the Commodity Tracking Matrix.
- Key gaps:
 - Further information on number and breakdown of population required to plan for the WASH supplies.

Logistics

- Needs:

Transportation: Lack of transportation for 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). Weather conditions are also hampering air services.

Logistics coordination: In Jajarkot, the logistics base is located at Chourjahari airstrip in Rukum District, four hours walk from DHQ. There is a lack of coordination between the logistic centre in Chourjahari and DHQ due to communication constraints. Need to establish a helicopter base at DHQ.

Access: The majority of affected areas are difficult to access, requiring days of walking, and therefore difficult to transport required medicines and relay timely information.

Telecommunications: Nepal Telecom GSM mobile is only available from 1000hrs to 1600hrs. The CDMA telephone is static during the evening. There is limited communication with areas located outside District Headquarters, which has negatively impacted on timely information sharing. It is difficult to track supply and demand.

Electricity: There is no electricity in District Headquarters. Solar power is required for the telephone battery, laptop and other electrical equipment.

Staff Supplies: The deployed health teams should carry sufficient supplies, including water and food – as the majority of the areas are food insecure. NRCS Jajarkot has offered additional tarps and blankets to medical staff for accommodation.

▪ **Response:**

1. The MoHP determined that pharmaceutical companies, civil society and Nepal Red Cross Society (NRCS) will assist with medicine mobilization, community awareness raising and distribution of tents and other logistics for patient care.
2. Nepal Army is providing logistic support to distribute relief supplies and health workers, including transporting sick to health clinics.
3. Regional Medical Store delivers medicine from Nepalgunj upon the request of DPHOs. The political party supporters also transport medicine from DHQ to affected VDCs.
4. Two helicopters, one Nepal Army and another privately rented by Mr. Rajib Sahi (a local from Jajarkot), transporting medicine and other necessary equipment to nine distribution points. Due to the bad weather, it is difficult to send medicine to some locations.

III. Coordination

National Coordination: The MoHP is coordinating the deployment of health teams from Kathmandu through MoHP staff positioned in Jajarkot and Rukum District. The DPHO is coordinating medical supplies, health workers and surveillance information.

Regional Health Coordination meetings: Regional Health Coordination Meetings are chaired by the Regional Health Office (RHO) to coordinate the regional response to the diarrhoea outbreak.

District Level Coordination: In Jajarkot, meeting of the Diarrhoea Control Coordination Committee (DCCC)², chaired by the CDO, was held on 16 July, establishing focal points for health and logistics. Health coordination meetings will be held daily, chaired by the DPHO.

Local Coordination: Local coordination teams were activated in VDCs where there are health teams, which include VDC Secretary, local clubs, government line-agencies (agriculture, education school teachers), Political Parties. There are 30 VDCs in Jajarkot and only 14 VDC Secretaries active in the District. There are 270 Female Community Health Volunteers (FCHV) throughout the District. The DPHO plans to launch a 5-day prevention campaign on awareness, which is anticipated to cost NPR 700,000.

Assessments: In Jajarkot, a team of five members lead by WHO headed out to Khagenkot on 15 July for the assessment and investigation, sample collection and assessment questionnaire distribution to the health team deployed in the villages. The National Health Research Council has also deployed three members for the assessment.

Upcoming Meetings:

- *Central Health Coordination Meeting:* Tuesday, 21 July at 1000hrs in UN Conference Hall, Kathmandu. Agenda: Situation update on diarrhoea outbreak and response.
- *Jajarkot Health Coordination Meeting:* Daily in DHQ.
- *Jajarkot Diarrhoea Coordination Control Meeting:* Weekly – TBC

Online Information: For more information, please visit the Nepal Information Platform (NIP):

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

Products available on the NIP:

- *Commodity Tracking*
- *Contact list for district and regional focal points for the diarrhoea outbreak*
- *Diarrhoea Outbreak related maps*
- *Coordination meeting summaries*

² This is the District Disaster Relief Committee (DDRC).

IV. Contact

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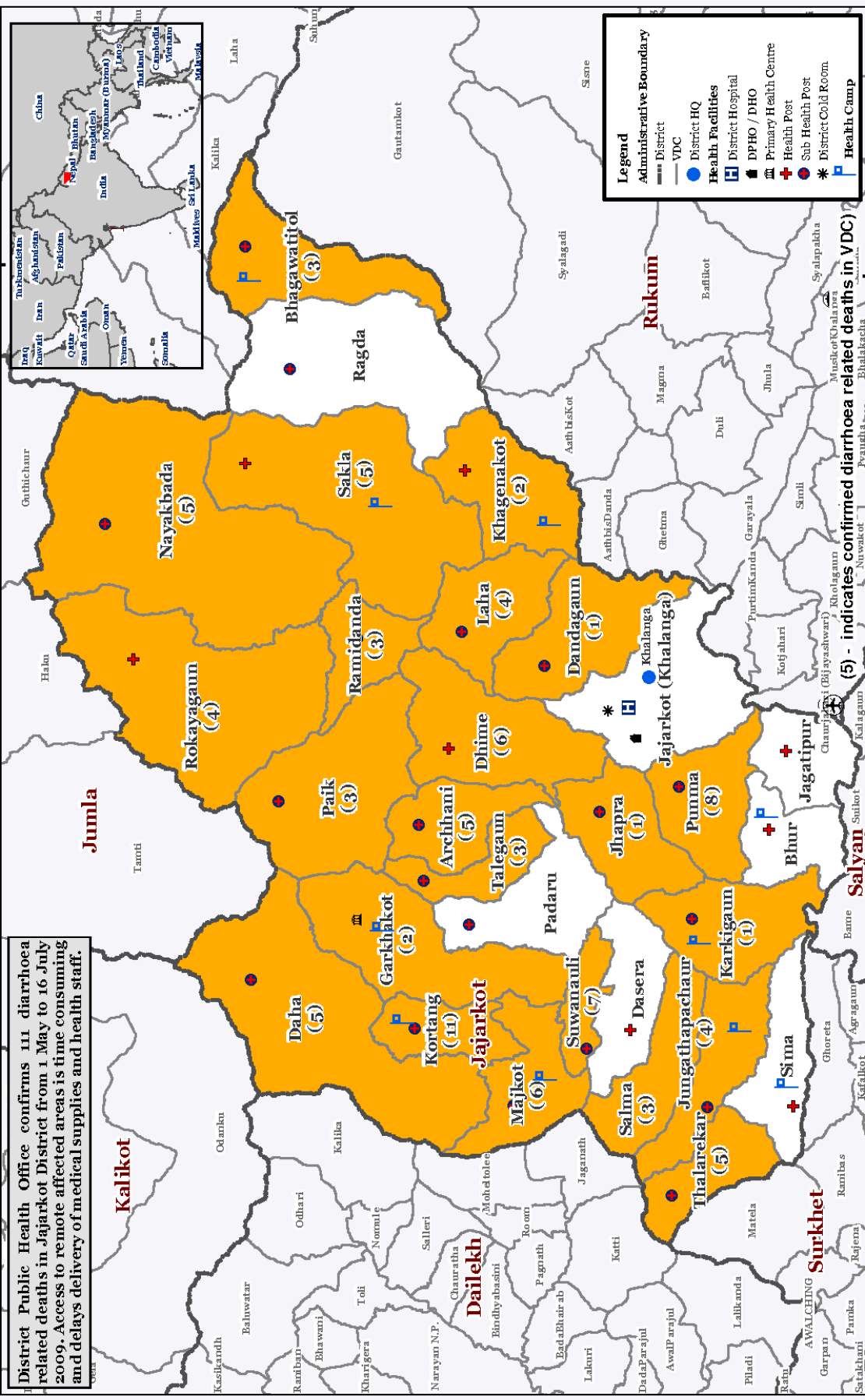
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NEPAL: Diarrhoea Outbreak in Jajarkot District

(16 July, 2009)

District Public Health Office confirms 111 diarrhoea related deaths in Jajarkot District from 1. May to 16 July 2009. Access to remote affected areas is time consuming and delays delivery of medical supplies and health staff.



Legend

- Administrative Boundary
- District
- VDC
- District HQ
- Health Facilities
- District Hospital
- DPHO / DHO
- Primary Health Centre
- Health Post
- Sub Health Post
- District Cold Room
- Health Camp

Map Produced by OCHA, Nepal
 Date Source(s): Data are collected from DPHO, UN Agencies and INGO's
 Boundaries - Department of Survey, Nepal

Map Produced on: 16 July 2009
Map Doc Name: D_Outbreak_Jajarkot_A4_16072009_v01
Web Resources: <http://www.un.org/np>
Projection/Datum: Geographic/Everest 1830

Disclaimer:
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