

EMERGENCY AND HUMANITARIAN ACTION

Update
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**World Health
Organization**

Regional Office for South-East Asia

This e-bulletin provides a snapshot of the activities of WHO South-East Asia in Emergency and Humanitarian Action, at the country and Regional levels.

BANGLADESH

Emergency Preparedness

- **Health Sector 'Needs Assessment' for Cyclone Aila:** Following Cyclone Aila, WHO assisted the Bangladesh Directorate General of Health Services (DGHS) in conducting a rapid health needs assessment to identify gaps in this sector and improve future interventions. The recommendations of this assessment include:
 - Provision of health care services, including emergency drugs, in cyclone shelters on a regular basis.
 - Provision of funds for mobile medical teams (rapid response teams for emergency preparedness and response) for outbreak investigation and management during epidemics.
 - Establishment of a desalination plant to resolve problems related to drinking water.
 - Greater capacity-building for emergency preparedness and response (EPR) and disease surveillance.
 - Regular replenishment of buffer stocks of emergency drugs.
- **Funds For Cyclone Aila:**
 - To assist the fifty thousand people who remain in crowded cyclone shelters after Cyclone Aila, WHO as a health cluster lead, in collaboration with DGHS, has prepared and submitted a six-month recovery proposal for US\$ 1 015 728 to the UN Resident Coordinator (UNRC) on 16 July 2009. The overall objective of the proposal is to reduce morbidity and mortality by providing emergency health support to those still living in cyclone shelters.
- **Health Cluster Activities:**
 - The first and second United Nations Disaster and Emergency Response (UN-DER) Health Cluster meetings were held on 4 and 25 June 2009 respectively and third meeting is scheduled for 10 August 2009. They were co-chaired by Dr. Duangvadee Sungkhobol, WHO Representative, Bangladesh and Dr. Anwar Hossain Munshi, Joint Secretary, Public Health and WHO, Ministry of Health and Family Welfare (MOHFW), and discussed issues on Cyclone Aila and current preparedness plans.

- Following the first Health Cluster meeting, a Planning and MIS sub-group, consisting of DGHS, WHO, The United Nations Children's Fund (UNICEF), Bangladesh Rural Advancement Committee (BRAC), International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) and a local NGO Rupantar, was formed. The sub-group met four times, on 10 and 18 June, and 15 and 29 July 2009 respectively, to formulate an action plan for the health cluster and to prepare a different, user-friendly management information system (MIS) reporting format. This was finalized at the last meeting and will be shared with humanitarian health partners.
- **Simulation Exercises:**
 - To clarify the role and responsibilities of humanitarian actors in emergency preparedness and response, four workshops on 'Multi-Sectoral Table Talk and Simulation Exercise on Disaster Preparedness and Response for Senior Level Health and Disaster Management Related Professionals' were conducted in Sylhet, Rajshahi, Khulna and Barisal Division in the months of June and July 2009.
 - The overall objective was to inform the participants about the recent development of the three pillars of 'Humanitarian Reform' (Cluster approach, financial management and humanitarian coordinator) from the global perspective.
 - At the end of the workshop, the participants made a short-, mid- and long term Action Plan, and committed to implementing the knowledge gained in real-life situations.
 - The next simulation exercises will be held at Chittagong, Cox's Bazar, Patuakhali and Dhaka.
- **Preparedness Activities**
 - As floods occur every year in Bangladesh, and can lead to water-borne disease outbreaks, WHO has procured and distributed emergency medicines for reducing avoidable mortality and morbidity in flood-prone districts. The drugs are kept as emergency buffer stock in the most disaster-prone districts.
- **Safe Hospitals Campaign**
 - In an initiative to mainstream disaster risk reduction in health facilities as a 'Priority Implementation Partnership', the Disaster Management Bureau and the Asian Disaster Preparedness Center (ADPC), Thailand, conducted a workshop on 'mainstreaming disaster risk reduction in health facilities development' in Dhaka on 20th July 2009.
 - A report on 'vulnerability and condition of the existing hospital facility' was presented, with recommendations sought from participants for increasing the seismic safety of hospital buildings. WHO presented on the 'Safe Hospital Campaign' including its future plan of action.
 - An assessment for disaster resilience was conducted in four selected hospitals in Bangladesh: Dhaka Medical College, Dhaka, National Institute of Traumatology and Orthopaedics Rehabilitation (NITOR), Dhaka, Chittagong Medical College, Chittagong, and University of Science and

Technology and Bangabandhu Memorial Hospital (USTC BBMH), Chittagong.

- Before conducting the assessment, a questionnaire was developed through a consultative process, taking into consideration existing methodologies prevalent in Bangladesh for structural assessment of buildings, as well as availability of global guidelines such as WHO's Hospital Safety Index.
- Dhaka Medical College and Hospital is one of the most oldest and important hospital in Bangladesh. The main inpatient unit is situated in an old building. Preliminary assessments revealed that this building is highly vulnerable to seismic hazard. It is moderately safe with regard to non-structural vulnerability according to the WHO checklist. In-depth assessment of the building is needed for upgrading and retrofitting recommendations.
- The following actions are identified as possible intervention options for reducing the earthquake risk in the assessed building:
 - In-depth study of the building, its structural system, and materials is recommended based on the identified weakness in this first-phase assessment, before any retrofitting is carried out.
 - All non-structural elements (partitions, furniture, equipment etc.) should be fixed properly to restrict their movement and prevent them from overturning, sliding and other impacts in an earthquake.

DPR KOREA

Emergency Preparedness

- Based on the UN Contingency Plan simulation exercise conducted by a facilitator from Bangkok, a UN Contingency Plan is being developed among UN and international community for flood preparedness (the monsoon season is July-August in DPRK).

Funding

- Greater support is expected for DPRK from the UN Central Emergency Relief Funds (UN-CERF), which is currently under-funded, with a total of US\$ 9 million and US\$ 0.9 million for WHO.
- Supplies and equipment have been ordered under the UNCERF 2009 and are in the process of procurement.

WHO Regular Activities

- Dr. Nazira Artykova, Technical Officer has joined as a focal point for EHA in WRO-DPRK.

INDONESIA

Recent Emergencies

- **Bomb Blast in JW Marriot & Ritz Carlton Hotels, Jakarta, Indonesia**
 - On 17th July 2009, at 07:45 am local time, two powerful explosions occurred in JW Marriott Hotel and Ritz Carlton Hotel in Mega Kuningan, South Jakarta.
 - Nine persons died, 55 were injured and treated in two hospitals (MMC and Medistra Hospital).
 - A mobile team from Crisis Center, MoH and Disaster Victim Identification Team were immediately deployed to the bomb sites. EHA WHO team joined the crisis center team for rapid assessment and all hospitals were on alert for mass causality management. Follow-up operational assessment was conducted by MOH, and support provided to the two hospitals treating the injured.

WHO Regular Activities

- **Pre-Hospital Emergency Care Network and Quality Improvement Meeting of Public Safety Center in Jakarta, 21-23 July.**
 - The Public Safety Center (PSC) in Jakarta is crucial to strengthening the pre-hospital emergency care network. The PSC consists of safety and security (Police), Rescue (Fire Brigade/Coast Guard) and Emergency Health Service (Hospital and ambulance).
 - In order to revitalize the PSC in the Jakarta area, WHO and the Basic Medical Care Directorate, MOH, conducted the meeting to discuss the law enforcement aspects of the PSC and to gain commitment from different stakeholders to support the programme.
- **Rapid Health Assessment Training**
 - The Ministry of Health Crisis Center and WHO conducted Rapid Health Assessment trainings in Gorontalo and West Java Province in July 2009.
 - Approximately 30 participants from the District and Provincial Health Office, hospital staff, and Indonesian National Army and Police Department personnel attended the training.
 - The objective of this training was to build the capacity of health staff to conduct rapid assessment in the disaster area, based on the guidelines developed by MOH. The activities included needs assessments, monitoring the health status, nutrition, water quality testing, and environmental health.
- **Radio Communication Training**
 - To strengthen the Information and Communication system for the Operation Room in the nine Regional Crisis Centers, MoH, supported by WHO, conducted the Radio Communication Training course.

- Forty-five participants from the Regional Crisis Center of North Sulawesi and West Sumatra, as well as the District and Provincial Health Office, attended.
- The objective of this training was to train the health staff on how to use the radio to communicate.
- **Consortium on Disaster Education (CDE) on Disaster Risk Reduction mainstreaming into the education system in Indonesia.**
 - WHO, as the member of Consortium on Disaster Education (CDE), participated in the workshop on mainstreaming disaster risk reduction (DRR) into the education system in Indonesia. The objective of the workshop was to establish and strengthen education and public awareness programmes in line with DRR activities, by developing a national strategy.
 - Three documents are currently being developed by the CDE:
 - i. Academic script for a national strategy on DRR mainstreaming into national system in Indonesia.
 - ii. Draft national strategy on DRR mainstreaming into the national education system.
 - iii. Lessons learnt from the review process of the initial draft of the national strategy on DRR mainstreaming into the national Education System.

NEPAL

Support for Diarrhoeal Outbreak

- **WHO support to Ministry of Health and Population (MOHP)**
 - WHO's Emergency and Humanitarian Action (EHA), Immunization Preventable Diseases (IPD) and Communicable Diseases Surveillance (COMDIS) units are supporting the Epidemiology and Diseases Control Division (EDCD), Department of Health Services (DHS), MOHP, in the following areas:
 - Coordination at the central level with partner agencies
 - Coordination with District Health Office
 - Establishing surveillance system
 - Provision of two diarrhoeal diseases kits
 - Supporting with 15 personal deployment kits
 - Specimen collection for laboratory test
 - Information management and logistics tracking
 - A WHO team consisting of Dr. A. Pinto, Epidemiologist, Ms. Hyo-Jeong Kim, Technical Officer, EHA, and Mr. Pujan Shrestha, Secretary, WHO COMDIS visited Jajarkot from 24 – 28 July 2009 to support the District Health Offices in establishing a surveillance system and to coordinate the response at the district level.
 - EHA has been closely monitoring the situation and producing situation reports twice a week, which is shared with all partners including the Ministry of Health and Population.

Emergency Preparedness

- **Hospital Emergency Planning workshop, Udayapur Hospital, Udayapur District**
 - WHO-EHA supported a Hospital Emergency Planning workshop, organized by Epidemiology and Diseases Control Division (EDCD), for health staff at the district hospital in Udayapur district, on 6-8 July 2009.
 - Twenty-five people participated, including the hospital director and the in-charges from district health offices.
 - The training covered disaster concept/terminology, mechanisms in place for public health disaster management focusing on coordination, mass casualty management, triage and the concept of hospital emergency preparedness and disaster response.
 - The output was a hospital emergency preparedness plan which was drafted and tested during the workshop. A working committee has been formed to finalize the hospital plan by August 2009.

- **Micro-Planning workshop on Disaster Management, Makwanpur & Terathum Districts**
 - WHO EHA supported a micro-planning workshop on disaster management organized by the Epidemiology and Diseases Control division (EDCD) for district health office staff in Makawnpur and Terathum districts, on 1-2 July and 10-12 July respectively.
 - At both the districts, there were 25 participants including the district health officer and the rapid response team focal point.
 - The training covered disaster concept/terminology, experiences from DHO on the management of disasters in the district, information on health sector emergency preparedness and disaster response, and role of public health personnel during disasters in the district.

- **Information Mapping**
 - WHO-EHA is continuing its work with HMIS unit of MoHP to strengthen the information management system and mapping of the health indicators. A workplan has been developed and the first district will be mapped in early August.
 - The first assessments of the health facilities in 48 districts that EHA initiated with the World Food Programme's (WFP) Vulnerability Assessment and Monitoring unit, has been received. WFP and WHO will develop a joint report based on the outcomes. Some of the data collected will also be used by HMIS in its mapping exercise.

- **First Aid Training**
 - WHO is working with Nepal Red Cross Society (NRCS) to train five Red Cross district chapters in the Eastern and Central region on first level triage in mass casualty incidents, and utilization of first aid kits for initial services to patients.

- **Contingency Planning Exercise**
 - WHO-EHA will conduct contingency planning exercises at the district level.
 - The tool has been developed and shared among partners for feedback. The final tool will be translated into Nepali for easier access.

- **Emergency Health and Nutrition Working Group Meeting**
 - WHO has hosted the Emergency Health and Nutrition Working Group (EHNWG) meeting on a weekly basis since 16 July 2009.
 - In July the meetings discussed the ongoing diarrhoea outbreak and reviewed preparedness and response capacity in order to provide immediate support to the Ministry of Health and Population.

(For more information, please visit <http://www.nep.searo.who.int>)

SRI LANKA

Conflict in North Sri Lanka

- **Resettlement of Internally Displaced Persons:**
 - The Sri Lankan Ministry of Health (MoH) has drawn up a 180-day health sector plan to complement the Government of Sri Lanka's plan for resettlement of internally displaced persons (IDPs).
 - A MoH mission to Vavuniya will assess healthcare services that will be needed following the decongestion plan for IDPs.
 - Health partners involved in the emergency have agreed to prepare contingency plans for three scenarios:
 - establishment of a greater number of camps as part of decongestion efforts
 - early resettlement of IDPs with safety and dignity
 - mitigate the impact of the monsoons
- **Health Care Services:**
 - In Vavuniya, MoH medical officers have provided consultations for more than 46 000 patients in the primary healthcare centres in Zone 2, 4 and 5, in the past month (out of 6 existing zones).
 - Copies of the MoH "standardized case Definitions of Infectious Diseases" including a special fact sheet on meningitis has been printed for distribution at all primary healthcare centres.
 - MoH and UNFPA have conducted eleven mobile reproductive health clinics, and 326 hygiene packs have been distributed to displaced women of reproductive age.
 - Eight awareness clinics on reproductive health and HIV/AIDS have been conducted for 600 people.
- **Immunization**
 - MoH and UNICEF conducted a three-day immunization campaign on 3-5 August for 40 000 children in camps. Measles, Vitamin A and polio vaccines were given to all children who have not yet received them. Children were also given mebendazole for de-worming. The next phase of this campaign will be in Jaffna and Trincomalee districts.
 - In Vavuniya, 591 children aged 6-12 months were given additional (catch-up) measles dose. Another 2604 children in IDP camps,

between the age of 1-3 years, were also given MR dose in lieu of routine MR at 3 years.

- **Mental Health and Psychosocial Issues:**
 - In the past three months, a psychiatry unit was opened in the General Hospital, Vavuniya. National and district mental health committees were established and activities were carried out with the Sri Lanka College of Psychiatrists, the Ministry of Social Welfare and Social Services and other health partners.
 - The human resources capacity for mental health was increased in Vavuniya and Chettikulam: one consultant psychiatrist, two psychiatric social workers, and one MOMH. In addition, WHO provided support to 30 community support officers (CSOs), 24 of whom are from IDP sites. These CSOs identify and refer persons with severe mental disorders to the proper channel of treatment.
 - A programme 'Help to Heal' was launched on 21st July 2009 in all 6 welfare centers. This is a holistic programme for mental well being of individuals to community. This programme consists of individual interventions to community interventions.
 - There is a plan to provide long term rehabilitative care to 50 mental health patients as there are no family members or relatives to care for these patients
 - The Sri Lankan College of Psychiatrists is involving in an assessment among ex-combatants.

- **WHO Action**
 - WHO has provided support in conducting a comprehensive, tent-to-tent assessment of types of disability among the IDPs, and their needs.
 - WHO supported the MOH in implementing the emergency mental health contingency plan.
 - Psychiatric drugs worth US\$8000 has been provided to General Hospital Vavuniya.
 - The Organization has also assisted in providing 3 CDMA phones and hiring a vehicle to provide transport to doctors visiting IDP sites.

(For more information please visit <http://searo.who.int/eha> or <http://www.whosrilanka.org>)

SEARO

Regular Activities

- **Meeting on Managing Disaster Health Information**
 - The Emergency and Humanitarian Action (EHA) unit and the Information Management Division (IMD) are planning a meeting on managing disaster health information, in Jakarta, Indonesia, in the last quarter of 2009.
 - Although the South-East Asia region is one of the world's most disaster-susceptible regions in the world, lessons from each disaster are often forgotten because the action and experiences are not properly documented.

- In order to utilize the memory of past disasters for future benefits, there is an urgent need of establishing a system of collecting, and storing information with the intention of creating a repository of “good practices” in different countries. This information can then be shared by scientists, practitioners, technical institutions and end users through the existing SEARO medical library network.
- **Evaluating progress on benchmarks for emergency preparedness**
 - In 2006, Member Countries had adopted 12 benchmarks that need to be achieved by every country for emergency preparedness in the Region.
 - EHA –SEARO is in the process of developing quantitative tools to measure progress in achieving those benchmarks.

The Emergency and Humanitarian Action programme of the South East Asia Regional Office Of the World Health Organization produces regular news update of events and activities of countries of the Region. This note, which is not exhaustive, is designed for internal use and does not reflect any official position of the WHO Secretariat.

For more information, please visit our website: <http://www.searo.who.int/eha>