Heavy rainfall that started from 11 August 2017 Friday has resulted in floods and landslides affecting 36 districts across the country.

Affected public health facilities: 39 public hospitals, 109 primary health care centres and 1,554 health posts. 10 of them: fully damaged and 64: partially damaged while others were inundated for a couple of days.

**Figure 1.1: Districts affected by floods and landslides (36)**

Source: Ministry of Health (MoH), 28 August 2017
Situation update

- Humanitarian and health response activities were initiated immediately following the floods.
- Access to affected populations still remains an issue as some major transportation routes are damaged due to floods and landslides.
- Health Cluster has been activated and working in coordination with Ministry of Health (MoH) at central level and with the District Disaster Relief Committees (DDRCs) and District Public Health Offices at district levels.
- 36 districts’ Rapid Response Teams (RRT) and 5 Regional RRTs have been mobilized
- Health cluster meetings were conducted on 14, 15, 17, 21, 25 and 30 August.
- No significant outbreak-prone cases have been reported
- Daily situation updates have been produced by MoH.

Public health concerns

- No significant outbreaks observed. Reports are coming from different districts showing cases of diarrhoea, ARI, viral fever, fever and ILI and skin diseases but numbers are not significant.
- Shortage of essential medicines has been reported from some of the districts and Department of Health (DoHS) has been adequately supporting with partners assistance.
- Provision of health services for Internally Displaced Persons (IDP) in scattered settlement with their relatives and/or neighbours.
- Syndromic surveillance system is established to identify potential outbreaks.
- Long Lasting Insecticide Nets (LLINs) are in high demand.

MoH Response

Ministry of Health has activated the Central Health Emergency Operation Center (HEOC) for effective health sector response to the flood and landslide. A Central Coordination Committee under the chairpersonship of Secretary, Ministry of Health and an Operation Committee under the chairpersonship of Deputy Director General, Department of Health Services have been formed. Five response coordination teams and 7 high level monitoring teams have been mobilized from the centre to the affected districts.

- Epidemiology and Diseases Control Division (EDCD) is continuously operating a telephone hotline (01-4100187) in day time (7:00 am to 7:00 pm).
- Surge Response Teams from the centre are deployed to the districts as per need of the districts.
- High level MoH monitoring visits to the affected districts are ongoing.
- MoH has requested partners to support district outbreak preparedness and response plan.
- DoHS has projected quantity of medicines needed now and in near future for preparedness. It has directed Logistics Management Division (LMD) and EDCD to manage those in coordination with health sector partners for effective management of drugs and medical supplies.
- MOH has decided to distribute the LLIN in IDP camps in close coordination with DDRC at the affected districts.
- DoHS is monitoring the stock levels of essential medicines in the affected districts, Regional Medical Stores (RMSs), EDCD and LMD to the extent possible replenishing stocks as needed.
- RRTs are kept on high alert.
- Health camps are organized in the communities where access to Health Facilities (HFs) is constrained. Nepal police and army are supporting the camps. Around 14 000 people are served.
through health camps.

**WHO Response**

- WHO has been continuously providing technical support in
  - Health sector coordination
  - WASH sector coordination
  - Information management
  - HEOC functions

- WHO has supplied following commodities
  - 8 Inter-Agency Diarrhoeal Diseases Kits (3 for Regional Medical Store, Biratnagar; 3 for Central Warehouse, Pathlaiya and 2 for Regional Medical Store, Nepalgunj)
  - 1 Inter-Agency Emergency Health Kits (IEHK)
  - 10 community water filters
  - 17 Rapid Response Team (RRT) Personal Deployment Kits
  - 550,000 chlorine tablets (aquatabs 33 mg suitable for 5 L water) to different RMSs.

- District level coordination and surveillance support (through WEDS officers and SMOs)
- DWSS has mobilized the Water Quality Testing Mobile Van (supported by WHO) to the flood area with water purifiers like chlorine tablets, chlorine solution and flocculants.
- About 30 engineers from DWSS and WASH partners have been trained by WHO for the cleaning of dug wells and hand pumps.
- Flyer on “method of treating turbid water in emergency” has been prepared in Nepali language and is being widely distributed through WASH and health clusters.
- WASH messages are being broadcasted through national radio and local FMs.
- Media monitoring is done on a daily basis. Two staff based in EDCD follow up with districts on a daily basis to capture outbreaks early.
- Case definitions of epidemic-prone diseases and health advisories have been developed and distributed.
- WEDS from 5 districts, WHO Emergency Program Field Officers (EPFO) from 2 districts and SMOs in 10 districts are assisting DP/HOs in the field on an ongoing basis. In addition, WHO staff are assisting EDCD.
- WHO is also engaged actively in supporting strengthening of immunization in the affected areas.
- Dr Jos Vandelaer, WHO Representative for Nepal and Mr Damodar Adhikari, NPO, WHE-WHO visited Rautahat and Sarlahi district from 3-5 September 2017 to monitor health sector response to Nepal Flood 2017.

**Partners’ Response:**

**Americares Nepal:**
Americares Nepal supported in transporting medicines in Makawanpur (Hetauda), Rupandehi (Butwal), Banke (Nepalgunj), Bara (Pathalaiya), Mahottari, Siraha, Saptari, Dhanusha, Sunsari and Morang (Biratnagar). Mobile medical camps were organized in co-ordination with IsraAID at Saptari. Medicines worth NRs 5,00,000 was handover to EDCD, DoHS for emergency response. Additional medicines worth NRs. 5,00,000 was provided to DPHO, Saptari.

**Family Planning Association:**
FPAN mobilized resources for 61 health camps in 9 flood affected districts. In Dang, Bardia, Sunsari and Saptari, the resources were mobilized in 9 camps in each district while the resources were
mobilized in 5 camps in each district in Jhapa, Sarlahi, Bara and Banke. FPAN reproductive health services have been focused on the Minimum Initial Service Package (MISP). FPAN in coordination with UNFPA and Nepal Army Hospital is planning to provide Reproductive Health Kits (6a and 6b). FPAN has also been in the process of distributing 424 pieces of dignity kits to the women focusing on pregnant and lactating women in the highly affected flood areas.

Medecins du Monde-France (MDM-F):
MDM-F has facilitated on orientation to RRT focal person and health facilities in-charge of 76 health facilities of Mahottari district to support District Health Office in setting up Disease Surveillance Mechanism through daily SMS reporting from Health Post level. 55 of the health facilities has started the daily SMS reporting.

UNFPA:
Approximately 30 comprehensive reproductive health (RH) camps are planned to be conducted in Rautahat, Sarlahi, Mahottari, Saptari and Sunsari in coordination with DoHS and D(P)HO. A total of 5198 people have been provided comprehensive RH services through 16 camps in Sarlahi and Sunsari. RH camps are also planned to be conducted in Saptari, Mahottari and Rautahat. UNFPA has handed over the RH kits in Mahottari and Sarlahi and will also handover the RH kits in Rautahat on September 6, 2017. Along with the handover of the RH kits, around 50 people including the District Rapid Response Committee has been orientated on RH kits and its use.

Resource Mobilization:

The emergency has not been declared by the Government of Nepal for Nepal Flood 2017. On 18 August 2017, the Ministry of Foreign Affairs issued a circular to Diplomatic Missions and International organizations that ‘The GoN would welcome assistance - both cash and kind- from friendly governments, organizations and interested individuals if they so desire to contribute’. This opens an avenue to mobilize the financial resources to support MoH for health sector response.

Through the UN Resident Coordinator’s Office, fundraising activities are being coordinated for all clusters, including health. Individual agencies are also fundraising for their specific needs.

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