



WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA

Week 38

Date: September 16- 22, 2012

1. Situation around IDP hosting districts

A: Situation in “Jalozai” IDP camp, Nowshera district

WHO along with health cluster partners and provincial health authorities lead the emergency health response for the displaced IDPs in Jalozai camp and IDPs living in host communities of district Nowshera.

Population:

Till 19th September, 2012 total IDPs families registered are 77,252 families with 356,390 individuals. Jalozai IDP camp hosts 14,541 families with 68,992 individuals. 62,711 families with 28,7398 individuals are living in off communities.

Alerts and Consultations:

No alert was reported in this week. There were 3,239 consultations provided through health care provider, including acute respiratory infection (23.6% or 763 cases), other acute diarrhoea (9.3% or 302 cases), skin infection (2.4% or 79 cases) and confirmed malaria (1% or 33 cases).

Coordination:

A meeting of all health partners working at Jalozai IDP camp with the grand shura was held at PDMA office on 17th September 2012. The members of the shura shared their problems related to the health partners and all concerned. WHO and partners answered all their problems one by one and assured solutions for each of their problems. It was decided that if a death occurs in Jalozai camp it will be the responsibility of PDMA to provide transport for carrying the dead body to their required destinations.

It was also decided that a complaint cell will be established at PDMA office in which two officials will be sitting daily and they will receive complains from the IDPs relating to Health, WASH, Food, shelter etc and these officials will then communicate the issues to the concerned authorities and will get feedback from the concerned authorities as soon as possible in order to find solutions to the problems of IDPs.

Health, Nutrition & WASH cluster meetings take place once a week in Jalozai attended by partners from health (Merlin, CAMP, CERD, FATA Health, GiZ, AGE, IR, CTC, UNICEF), WASH, Nutrition, Food and CCM clusters working in the camp where issues are discussed and decisions are taken on the spot to address any loop holes in the health response for containment and control of disease outbreaks in the camp.

The camp Health, Nutrition and WASH cluster weekly meeting was held on Wednesday September 19, 2012, at J-3 health post of Merlin. The meeting was chaired by WHO. Merlin, CAMP Organization, CERD MCH, EHSAR Foundation, LASOONA (Oxfam GB), HRDS, SSD and Helpage International attended the meeting.

HRDS representative informed the forum that their project is winding up on the 20th September 2012, the hygiene kits and soaps recently provided to them will be handed over to BEST and DEED who are taking over the activities of HRDS. WHO appreciated the services of HRDS for the IDPs. SSD informed the forum that they are going to resume their WASH activities in the next two to three days, lids have been provided for all the tanks without lids and

washed water tanks. WHO health promotion department informed the forum that training has been planned for the hygiene promoters of Oxfam on the 26th and 27th September 2012, few health promoters from CERD, CAMP and Lasoona will also attend this training. Lasoona informed the forum that their hygiene promoters are continuously working in the field and are in close coordination with the health partners working in the camp. Helpage Int conducting Eye camps at Jalojai with the support of Merlin, so far they have done 1788 consultations, provided medicine to 1482 patients, provided goggles to 1198 patients and performed 87 surgeries. They thanked Merlin for providing them support. EHSAR. WHO was requested to process their medicine request as soon as possible. CERD providing MCH services elaborated that both their centers are performing their routine activities. CAMP organization highlighted that two confirmed Typhoid cases have been reported at their health facility. Merlin thanked WHO for approving 1000 hygiene kits for Merlin, Merlin intends to arrange a one day refresher for their newly recruited staff and requested WHO for facilitation. The TB centre has been shifted to J-2.

Two days training on WHO health promotion guidelines was conducted at Peshawar for the health staff of UNHCR. WHO took session on mosquito borne diseases (Dengue & Malaria), session was also taken on skin infections and snake bites.

WHO will conduct DEWS refresher training for the newly hired staff of Merlin on 25th September, 2012. WHO will conduct health promotion training for the staff of Lasoona (Oxfam GB) on 27th and 28th September, 2012.

EHE Interventions:

WASH partner (HRDS) in Jalojai camp will be replaced by 2 new WASH partners in the camp i.e. BEST & SEED. BEST will look after Phase 4 and half of Phase 5; however SEED will look after other half of Phase 5 & Phase 6. WHO held coordination meeting with the new WASH partner (BEST) in the camp and ensured them of possible support from their side regarding WASH activities in the camp.

WASH partner SSD informed WHO that they had temporarily suspended their services in the camp from 1st September due to some internal issues but will resume their activities in a day or two. In the meantime they told WHO that SSD had completed washing of all water storage tanks in their respective phases and all uncovered water tanks are also covered with lids.

WHO in their coordination meeting with WASH partner (Lasoona) was told that Lasoona is regularly conducting health and hygiene promotion sessions with the community in Phase 7 & 8 with special emphasis on negating open defecation by creating awareness among the community.

WHO tested 18 water samples for residual chlorine both at sources and at user ends, 14 samples were found to have residual chlorine within the required limits while for the rest of the samples chlorine dose was adjusted. So far, WHO has tested a total of 1001 water samples for residual chlorine, out of which more than 95% of samples have shown residual chlorine and for the rest chlorine dose was adjusted accordingly.

WHO took 8 samples for microbiological contamination and all samples were found fit for drinking with no contamination. WHO has so far tested 246 samples for microbiological contamination, out of which less than 1% of samples showed contamination at consumers' end, probably due to improper handling, for which chlorine dose was adjusted.

Essential Medicines:

WHO held monitoring visit to BHU J-3 supported by Merlin. Overall conditions of rational use of medicines, availability of essential medicines, patient counselling and storage of essential medicines found satisfactory. In Camp Health Cluster Meeting at J-3, suggestion of capacity building to dispensers and pharmacists on RUM and record keeping was given to Merlin.

B. Togh Sarai" IDP camp, Hangu district

The curfew has been imposed in district Hangu due to security and kidnapping. WHO visited IDP camp and 05 water samples were collected from IDPs camp from tents and storage tanks for microbial test, in which 03 water samples collected from jar canes and storage tank were found feacally contaminated. 10 water coolers will be installed by PDMA at different points in the camp. WHO provided 200 cakes of laundry soap to camp partner organization.

09 out of 18 health facilities reported to WHO via e DEWS. There were 661 consultations provided through partner organization, including other acute diarrhoea (16.2% or 107 cases), acute respiratory infection (15.4% or 102 cases), also skin infection (2% or 12 cases) and suspected malaria (3% or 19 cases).

C. Situation in Tank district

WHO conducted meeting with DEDO- H and EPI Coordinator in order to discuss the outcome of Polio campaign in the district. WHO Shared report of investigation of AWD in catchment area of BHU Kot Hakim and Dabarra, with DEDO H. WHO held meeting with UNFPA.

WHO received news about diarrheal disease outbreak in village Dabarra through In-charge facility. The area was visited along with health emergency team and surveillance done. The news was not true, in fact, there were cases of simple diarrhoea. WHO investigated a case of VHF and report was shared. Sample was sent to verify both Dengue and CCHF.

WHO visited 4 health facilities, DHQ hospital, EPI fixed center, OPDs and a visit was conducted to UNFPA center inside DHQ hospital. WHO conducted on job training of the health staff at BHU Dabarra and Kot hakim.

D. Situation in D I Khan district

WHO attended weekly meetings with EDO Health & Deputy EDO Health to discuss the weekly disease trend reported through e DEWS. The EDO discussed the working modalities of humanitarian partners i.e. UNFPA, MDM-F and PRCS with WHO.

WHO conducted meeting between EDO Health & SEED organization that will rehabilitate WASH infrastructure in 07 BHU s. SEED is implementing partner of UNICEF. WHO also discussed a proposal submitted by PEI (Poverty Eradication Initiative) with representative of PEI in a meeting of EDO Health & PEI focal person.

UNFPA is working in RHC Pahar Pur & RHC Paroa. MDM-F is working in BHU Ramak in Tehsil Paroa up to December as no cost extension. PRCS is operational at CD Nai Wela, Tehsil Paroa. SAHARA, a local NGO is implementing CMAM project of PRIME (An NGO of Peshawar Medical College) in 07 UC s of the district. IDRF & UNICEF are the donors for CMAM project. SEED (IP of UNICEF) in WASH project will rehabilitate WASH infrastructure in 7 BHUs.

E. New Durrani” IDP camp, Kurram Agency

Save and Serve providing services of PHC in New Durrani IDPs camp Sadda. Save and Serve providing regular OPD services to the IDPs. A total of 812 consultations received through Save and Serve organization. Acute respiratory infection is the highest cause of morbidity (33% or 267 cases) of total consultations; other acute diarrhoea (11.5% or 93 cases); suspected Malaria (4% or 31 cases); skin infection (8.3% or 67 cases).

F. Situation in Kohat district

WHO received and responded 3 BD cases reported by SHC Surgul. WHO did detailed investigations in the area; SHC staff was met and inquired. WHO collected few water samples from households for bacteriological examinations, 03 water samples collected from Village Surgul and all the samples were found 0 CF. SHC staff was requested for maintaining the line-list along with recording of addresses of suspected cases for epidemiological

investigations to be conducted.

WHO also received and responded 05 AWD cases reported by SHC Surgul. WHO visited the affected area and meeting was conducted with health staff and community members. During field no severe case of diarrhoea was found and total 03 water samples were collected from household's levels in which all the samples were found 0 Coliform unit.

Fumigation spray in 18 union councils and Larvicidal spray in 22 UCs has been done in district Kohat.

23 out of 43 health facilities in district Kohat provided eDEWS data to WHO.

eDEWS:

KPK eDEWS:

- 270 reports were received reporting 83,081 patient consultations in 13 districts of Khyber Pakhtunkhwa Province. Acute respiratory infections are the highest cause of morbidity (18.2% or 15,081 cases) showing 1.1% increase in percentage; other acute diarrhoea (11.2% or 9,284 cases); skin infection (2.1% or 1,738 cases); suspected malaria (2% or 1,515 cases).

FATA eDEWS:

- 16 reports were received reporting 5,404 patient consultations in 1 agency of FATA. Acute respiratory infections are the highest cause of morbidity (9% or 485 cases) showing 1% decrease; other acute diarrhoea (8.5% or 457 cases); skin infection (2% or 95 cases); suspected malaria (9.6% or 521 cases).

Alerts:

- WHO received and responded a total of 72 alerts including 10 outbreaks. Out of these alerts 43 were measles, 08 were AWD, 02 were NNT, 01 was Pertusis, 03 were Leishmaniasis, 04 were Diphtheria, 2 were H1N1, 03 were BD, 01 was VHF and 05 were Dengue Fever. All cases reported were properly investigated and responded by WHO.

DTC:

- EHSAR Foundation supports DTC center with the support of WHO in Pabbi satellite hospital district Nowshera from 4th May, 2012. In last week 2012 a total of 325 patients were consulted at DTC center, out of these 168 were of type A, 156 were of type B, 1 was of type C.

Essential Medicines:

- WHO conducted a total of 10 monitoring, 01 assessment and 02 follow up visit in districts Lower Dir, Dir Upper, D.I. Khan, Bannu, Kohat, Peshawar, Nowshera and Swat. During monitoring visits gaps regarding irrational use, storage of essential medicines, record keeping, safe disposal of expired drugs and stock outs identified generally.
- Total 7 hands on training sessions held at D.I. Khan, Dir Lower, Kohat, Peshawar and swat on Rational use of medicines, storage of essential medicines, LSS, and record keeping.
- WHO conducted 6 coordination meetings with different stakeholders including EDOHs, Head of Paed Department and MS SGTH in which non-availability of essential medicine, Irrational use of medicines, Pharmacy standard at facility levels and Leishmaniasis discussed.
- WHO responded 1 measles outbreak at Dir Upper by providing vitamin A capsules.
- WHO delivered a total of 15 types of assorted medicines to Dir Lower which is sufficient for 1394 patients approximately.

- In district Haripur WHO conducted 6 monitoring visits. In which gaps regarding irrational use of medicines, storage and stock outs identified generally. Hands on training provided to the concerned staff.
- WHO conducted 5 coordination meetings including MS DHQH, Pharmacist DHQH, Incharge Malaria control program and health manager Save the Children in which EM situation, SC, treatment and supply of Anti Malarial medicines discussed.
- WHO provided 04 hands on training to the concerned staff of the facilities on STG of Dengue and AWD, GSP and Rational Use of Medicine. Total 4 MOs, 2 nurses and a store keeper were trained.

WASH:

- **District Peshawar:**

- WHO facilitated and educated 25 individuals on “water born diseases and health” in a training session held at Peshawar on 17th September 2012.
- WHO conducted meeting with PHED FATA regarding handing over of water testing equipment to PHED FATA in order to build the capacity of the department on water quality monitoring.

- **District Charsadda/ Swabi:**

- WHO participated in a coordination meeting at Executive Engineer Office PHED on 18th Sep-2012. The meeting reviewed the operational benefits and constraints of 46 Auto-chlorinators at different tube well schemes in district Charsadda. PHED & TMA Charsadda has received the color comparator kits for residual chlorine monitoring and its distribution is in progress. PHED & TMA raised their concerns regarding the liquid chlorine (sodium hypochlorite 20%) for regular chlorination at targeted water schemes.
- WHO in collaboration with HRDS Charsadda (UNICEF IP) provided 25 Kg HTH 70% contingency stock at prioritized tube well schemes of TMA/PHED in urban settlements for uninterrupted chlorination.
- WHO visited THQ hospital Shabqadar and BHU Turnab. The hospital management requested for urgent support of HCWM items, waste disposal unit (drum incinerator) and disinfectant supplies for improving the hospital hygiene and control of nosocomial infections. WHO provided 10,000 aqua tabs, 10,000 pur sachet each and 1000 hand washing soap to both health facilities. Staff was trained on manual chlorination with 5 kg HTH initially provided for cleaning and disinfection activities.
- WHO visited village Pajman, Yar hussain, and Jhunda in follow up of the AWD cases from these locations. The situation was found satisfactory, LHWS program swabi and PPHI teams are disseminating health promotion messages on diarrhea prevention and control and social mobilization for positive behavioral modification to prevent water born disease at community level. WHO team participated in these corner meetings and community gatherings with DoH & PPHI.
- WHO visited Bacha Khan Medical complex swabi and RHC Yar hussain. The staff was trained on proper waste disposal and operation of biomedical waste and drum incinerators installed at these health centers. The waste management staff was provided with protective gloves, face masks and supplies of 5 kg HTH for routine disinfection.
- WHO collected and tested 9 water samples from different locations in Yar hussain, Jhunda and Pajman village. 25% of the samples were found contaminated from household pots. The families were educated on the importance and benefits of Aqua Tabs, Pur sachet and water boiling. PHED team has completed their preliminary survey of rehabilitation of water supply systems identified by WHO in outbreak investigation and response in these UCs.
- WHO tested 20 water samples from consumer points for residual chlorine from MC1, MC2, Suger mill, Mardan road, Daulat pura, Prang and Peshawar road schemes during routine water quality monitoring. 57% of the samples were found with 0.2-0.5PPM residual chlorine range. The results were shared with TMO Charsadda for close follow up and optimization.
- 03 on job sessions were conducted in which 17 DoH staff and 09 TMA staff were oriented on waste management and chlorination process for water quality improvement.
- **District Mardan:**
- WHO held meeting with XEN PHED, SDO and Sub Engr Mardan Division in PHED office on 19th Sept 2012, during meeting discussions were carried out for improvement of District water quality surveillance system. Two persons were nominated as focal persons responsible for water quality monitoring.
- WHO will provide on job training to these staff members on water quality monitoring.

- WHO held meeting was conducted with Incharges and heads of all Units/wards of DHQ hospital Mardan in Ms office on 17th September 2012, during meeting store keeper of DHQ hospital shared list of WHO supplied equipment and essential medicine for utilization of mentioned items laying in DHQ store for their concern unit.
- Routine monitoring visits were conducted to DHQ Hospital, Mardan Medical Complex, BHU Baizo Kharkai, CD Shiekh Maltoon. During visits on job training of 14 health staff were conducted on health care safety and hospital hygiene, communicable diseases alert/outbreaks response.
- WHO received and responded 3 alerts. (2 Suspected Measles and 1 C-Leishmaniasis alert), all the reported alerts were jointly responded with DoH and PPHI, during response all the required interventions were carried out.
- WHO distributed 15 antibacterial soaps, 100 Aquatabs, 12 IEC and 2 hygiene kits during measles alert response in district Mardan.
- **District Swat:**
- WHO tested 5 water samples for the water sources developed by an NGO "IDEA" for their WASH Project. Out of the 5 samples tested 2 were found microbiologically contaminated and remaining were found fit for drinking.
- WHO visited CH Manglawar, BHU Odigram and BHU Qambar, during visit Hygiene sessions were conducted to the patients and attendants at each health facility. Total number of participants in all these health and Hygiene sessions were 50 including children and females.
- WHO conducted coordination meetings with SDO PHED Swat on 19th and 20th September in order to strengthen the coordination activities between WHO and PHED at district level. Further SDO PHED also nominated himself and his sub engineer for water quality testing activities and coordination activities.
- **FATA:**
- WHO visited AHQ Ghalanai, RHC Yakaghund & BHU Ghazi Kor for its physical structure, water quality and sanitation on September 18th, 2012 at Mohmand agency. Four out of 09 water samples collected during these health facilities assessments were found contaminated for bacteriological pathogens.
- **District Haripur:**
- Two bloody diarrhoea alerts at Kalabat Township and village Bagra and two DF alert at KTS sector 2 and 4 and WHO investigated and responded promptly with water analysis, distribution of WASH supplies and health and hygiene session.
- WHO raised awareness in the community regarding mosquito control and early referral of hemorrhagic cases to the DHQ. IRS was carried out in the 100 meters radius around the patient's house. Bed nets provided for the family.
- LHWs were also asked to identify cases of BD to the HFs for further reporting. Health and hygiene session was conducted for the affected families. Soaps and aqua tabs were distributed among the families. EDO H was informed of the cases
- WHO tested a total of 9 water samples for bacteriological analyses during alert investigation and HF monitoring, 78 % tested water samples were found with bacteriological contamination.
- WHO provided 10 hygiene kits, 144 antiseptic soaps, 5000 Aqua tabs and 20 IEC materials to community during alert investigation and response
- For capacity building on water quality monitoring and effective use of water testing kit provided by WHO to PHED Haripur Division, a meeting was conducted with XEN PHED on September 20,2012 and following points were discussed.
- WHO highlighted the overall significance of water testing kit, XEN appreciated WHO contribution and nominated three staff/member team from subdivision Haripur and Ghazi each headed by SDO Haripur. The team will be trained by WHO next week and the trained team will start field work immediately.
- **Togh Sarai Camp:**
- WHO collected 05 water samples from IDPs camp from tents and storage tanks for microbial test, in which 03 water samples collected from jar canes and storage tank were found microbiologically contaminated.
- 10 water coolers will be installed by PDMA at different points in the camp.
- 200 cakes of laundry soap were supplied to camp WASH partners to be provided to IDPs community.
- Three Acute Watery Diarrhea (AWD) cases were reported last week. Detailed visit was done to the affected area and meeting was conducted with health staff and community members. During field no severe case of

diarrhea was found and total 03 water samples were collected from households' levels in which all the samples were found fit for drinking.

- 64,000 chlorine tablets, 6 pieces of Ambu bags, 4500 disposable masks and 42 bottles were provided by WHO to EDO-Health for distribution to civil hospitals, RHC's and civil dispensaries of Kohat.
- **District Lower Dir:**
- WHO visited BHU Makhai, DHQ Timargara, CD Rabat and BHU Khagram and conducted on job training to 6 health facilities staff on safe disposal of health care waste and infection control measures.
- During routine water quality monitoring 5 water samples were collected from Timargara Bazaar Near Kashmir Bakery, Allied Bank and MCB Bank and checked for pH, turbidity, Residual Chlorine and microbiological contamination. All the water samples were microbiologically contaminated (3 house hold and 2 pipe water samples)
- **District Nowshera:**
- WHO held coordination meeting with XEN PHED Nowshera regarding Water quality Testing equipment handed over to them. In the meeting it was decided that WHO will conduct on job training on the use of Wag Tech kit to the staff nominated by the Department. It was also agreed upon that water quality testing data will also be shared on regular basis.
- WHO responded to AWD alert reported from Jalozai village (Muhalla Safi Abad). Conducted hygiene assessment especially of the patient's house, took health & hygiene sessions with the local community and distributed EH supplies i.e. soaps, aqua tabs and pur sachets.

Nutrition:

- Facilitation in training of trainers on Health Promotion for various health care providers on Nutrition and Reproductive health as nominated by provincial Health Promotion officer and approved by team leader.
- Monitoring visit to Charsadda. Monitoring of stabilization center and health and nutrition sentinel sites.
- Total of **26** patients of severe acute malnutrition with life threatening complications were admitted in 8 Nutrition Stabilization Center with **25** patients were discharged, out of which **25** were cured **00** died, **00** were medically referred and **01** were defaulter cases.
- In Pabbi Hospital Nowshera, **two** new cases of children with severe acute malnutrition with life threatening complications were admitted in the hospital out of which 01 was cured and 01 defaulted.

District level coordination & monitoring:

Haripur A case of Polio case has been confirmed in a 4 month old girl infected with PV1. She had been administered 4 round of OPV. The case was first reported to DEWS and was investigated and then cross notified to PEO polio. 2 passages of SIAD has been planned in whole district from 27th Sep-30th Sep and 3 Oct-6 Oct followed by NID and 3 SIAD round may take place involving high risk UCs. WHO visited 06 health facilities (DHQ, CH Khalabut, CD KTS3, BHU Sikandarpur, BHU Sarai Saleh, RHC Kallinger). WHO conducted coordination meeting with EDO Health, PEO Polio and EPI coordinator: To discuss polio positive case and planning for the upcoming SIADs and identification of high risk union councils. ARI 20% with increase of 2% compared to previous week remained the major cause of morbidity both in hosting and Afghan refugee population in Haripur followed by diarrhoea 10% with 0% decrease compared to previous week and scabies 3% with 0% increase in its proportional morbidity. WHO received and responded 11 alerts.

Mardan: WHO conducted meeting with Incharges and heads of all Units/wards of DHQ hospital Mardan in Ms office on 17th September 2012, during meeting store keeper of DHQ hospital shared list of WHO supplied equipments and essential medicine. WHO requested the participants for utilization of mentioned items laying in DHQ store for their concern unit. WHO conducted routine monitoring visits to DHQ Hospital, Mardan Medical Complex, BHU Baizo Kharkai, CD Shiekh Maltoon. During visits on job training of health staff was conducted on disease case definition, alert/outbreaks response and weekly eDEWS reporting. WHO received and responded 3 alerts (2 Suspected Measles and 1 C-Leishmaniasis alert), all the reported alerts were jointly responded with DoH and PPHI, during response all the required interventions were carried out. In response to Measles alerts, EPI team was requested for outreach vaccination in the areas. Detailed sessions with LHW's and community elders

were conducted.

Lower Dir & Upper: The situation has on high alert due to bomb blast in Samarbagh and Maindan Area. WHO conducted coordination meeting with EDO health, DCO, MS DHQ, MSF Belgium, Focal person DEWS and focal person national program Dir lower and Upper. WHO received and responded 05 suspected measles outbreak reported from Vilage Shedyal UC khagram, Tehsil Wari, Dir Upper, Village Taranoo, Pashat, Tehsil Salarzai ,Village Mattako gulibagh Gardai, Tehsil Utman Khail district Bajaur, Village Sharvan, Darmal Bala, UC Lajbook Dir Lower. WHO visited BHU Makhai, DHQ Timargara, CD Rabat and BHU Khagram.

Charsadda: WHO visited BHU Baz Mian Kallay, BHU Kot, DHQ hospital, THQ Tangi, BHU Umerzai. Registers checked and on job orientation of the facility incharges regarding DEWS was done. Total consultations number of consultations was 14573.

Shangla: WHO received and responded outbreak of AWD reported from village Shahtot UC Alpuri. WHO visited the infected area and on job training with the villagers on health and hygiene was conducted. WHO held meeting with EDO health regarding district health coordination meeting. It was decided to call meeting in this week.

Swabi: WHO conducted coordination meeting with EDO office Swabi on 18 September 2012. Relief International also participated. The meeting was held at DHIS/ DEWS office. The agenda of meeting was formation of ZEWS for animal health worker. WHO shared its technical inputs for the formation of ZEWS and all the participants agreed with WHO. WHO visited 4 health facilities. WHO briefed the in charge of the relevant health facility on proper case definition and maintenance of proper line list in case of outbreak. WHO received and responded 2 suspected Dengue Fever alert, 2 suspected H1N1 alerts and 1 suspected Diphtheria alert.

Peshawar: WHO received and responded 5 alerts (3 Diphtheria and 2 for Measles). WHO conducted coordination meeting with EDO-H regarding ongoing health intervention by various health partners. WHO visited 6 health facilities Infection Disease Hospital, LRH, City hospital, HMC and RHC Nahaqi.

Swat: WHO visited Visited CH Manglawar, BHU Odigram and BHU Qambar in order to investigate the system generated alerts, hygiene sessions was conducted to the patients and attendants at each health facility. Total number of participants in all these health and hygiene sessions was about 50 including children and females. CERD is working in 25 UC at Swat on CMAM funded by World Food Program from 21st April 2012. No representative participated in the meeting as the senior management team was busy with the senior management team was busy with WFP in Peshawar in a Internal Evaluation Meeting. MIHO is working in Swat since 2007 and providing mobile immunization services. At the movement 18 EPI technicians are working in 18 UC of Swat. Coordinator MIHO – Mr. Bakht Mohammad Khan informed the chair that the services of MIHO will be stopped from 30th September 2012 and as per MoU clause 2nd, a letter for the termination of services already issued in this regard. EDO-Health asked the MIHO representative to convey the message to his senior that Department of Health Swat appreciated the services of MIHO and request that the services may be continued for next 6-12 months as Department of Health Swat have gaps in terms of Human Resources, 2nd the Polio is now in eradication phase and MIHO technician are actively involved in routine as well as in SIA's, so therefore the termination of services will increase the burden and the provision of immunization services will suffer. Malteser International Informed the forum that Mint had constructed additional rooms in 6 Health Facilities and providing incentive to the Health Workers in these units as well. Malteser International also recruited a WMO for BHU Meragai, while LHV provided to CD Chitawar and presently running the facility. EDO-Health thanked Malteser International for their services and construction work and asked to arrange an inauguration ceremony in the said Health Facilities so that community and media reflects the services of eh organization. Malteser International representative also confirmed that they will provide services during out break and emergencies as pledged earlier will provide the medicines if needed as well as Malteser International intends to do activities regarding EPI in future. MERLIN: Is working in 19 Health Facilities on Reproductive Health and PHC services which includes 1 THQ, 3 CH, 10 BHU's and 5 CD's, providing incentive to MoH staff for better service delivery and motivation. Merlin will support the department of Health as usual, will pre-stock the medicines for the winter season and will respond jointly to any outbreak or emergency. Merlin will conduct capacity building activities in collaboration

with the kind EDO-Health. So for trained 172 Health staff in Lahore, Karachi and Nairobi. EDO-Health asked the Merlin representative to solve the issue of round the clock duty on female side at Civil Hospital Kabal.

Battagram: WHO conducted visits to DHQ Hospital Batagram, RHC Kuza Banda, CH Thakot, BHU Jambura, BHU Batly, CD Gijjbori, BHU Kanai, BHU Hthai Bathkool, BHU Arghashori and RHC Banna for eDEWS analysis. WHO received and responded Measles Outbreak from Village Bab, UC Huthal Bathkool, Tehsil Allai was responded. 1 Alert of Measles reported from DHQ Hospital. WHO attended coordination meeting with EDO and Senior Manager Health Battagram regarding the outbreak of Measles at Allai and discussed the current status of routine immunization activities at District Battagram.

Manshera: WHO received and responded 10 alerts, seven for suspected cases of Measles and three for AWD. All alerts responded on time. All 7 cases of Measles reported from DHQ Hospital while three cases of AWD also reported from DHQ hospital, Three blood samples of Measles cases sent to NIH for confirmation. Suspected cases of AWD reported from UC Baffa, UC Data (Ghazi Kot Village and one case from Manshera City, 2 were women and one was man, stool samples sent to NIH for confirmation of Vibrio Cholera. WHO conducted visit to DHQ Hospital, BHU Gandian, CH Battal and RHC Shinkari for alert response and disease surveillances. An increase in reported cases of Diarrhoea from DEWS reporting sites as compared to previous weeks. Measles cases still reported from different parts of Manshera. WHO conducted training of EPI technician on Measles alert, response, prevention and current situation in the district, this training was arranged by Health Department.

Malakand: WHO conducted coordination meeting with EDO health and EPI coordinator regarding upcoming Measles campaign, which is cancelled till further orders due to non availability of funds. WHO held coordination meeting with MS DHQ Hospital Batkhela regarding delivery of SFD equipments. All equipments handed over and delivery note signed. WHO visited RHC Skhakot, CH Malakand, CH Thana, DHQ Batkhela. WHO received and responded five Measles alerts and four system generated alerts including three Bloody diarrhoea and one Typhoid fever. Samples of Measles alerts were sent to NIH while System generated alerts were followed. WHO monitored free medical camp at Village Khaadu arranged by Al-Khidmat Foundation and findings shared with EDO-H. WHO arranged health education and promotion session arranged on Malaria and Dengue for the teachers and students of Government High School Skhakot. WHO visited Sabawoon Welfare Hospital visited. OPD Register checked and staff requested to report single case alert diseases.

Bunir: WHO conducted coordination meeting with EDO health and EPI coordinator. WHO held meeting with CDC coordinator regarding malaria situation in district. WHO conducted meeting with EPI coordinator and DSV regarding measles cases in various regions. WHO visited 5 health facilities. Health staff briefed about eDEWS, case definitions of different infectious diseases under surveillance, special emphasis given on AWD and dengue surveillance, Alert reporting, and timely submission of weekly reports. WHO received and responded 3 alerts (AWD). All alerts responded promptly.

Khyber Agency: WHO received and responded two alerts of measles. The measles outbreak was responded with mass measles vaccination. WHO participation in polio campaign SNID. WHO responded three system generated alerts, all of which were false alerts. WHO held coordination meetings with Agency Surgeon, DEWS Focal person FATA, FSMO, and PPHI. WHO conducted coordination meeting with FATA Livestock department regarding CCHF for the elimination of ticks in domestic animals. WHO conducted monitoring visits to AHQ Landikotal, BHU Mian Morcha, CD Pindi Lalma, and CH Jamrud.

Mohmand: WHO conducted monitoring visits to 3 health facilities AHQ Ghalanai, RHC Yakaghund & BHU Ghazi Kor. WHO participated in a Four days visit to Kurram Agency in inter cluster security & Assessment mission. WHO conducted meeting with cluster members regarding objectives of inter cluster mission WHO participated in meetings with Political administration regarding return of IDPs to recently de-notified villages of Lower, Central & Upper Kurram & health needs in area of return. WHO held coordination meeting with FDMA Kurram regarding data of returnee & health services in New Durrani IDP camp. WHO visited shafi abad & khewas villages of Upper Kurram, meet with returned IDPs & carried out health needs assessment. WHO visited Nijab village of central Kurram, Mission was briefed by APA central Kurram, Assistant Political Agent requested

support of WHO in establishing health post at nijab.

Bajaur Agency: 16 out of 24 sentinel sites submitted their eDEWS to WHO. WHO participated in 3rd phase of SIAs Polio campaign. WHO received and responded 5 alerts. 3 of suspected Measles while 2 of Neonatal Tetanus. WHO visited 3 health facilities, feedback shared with Assistant Agency Surgeon and EPI coordinator. Health & hygiene session was conducted in a boys Middle School on request of FCHP-SCF in village Qazafi of Tehsil Utmankhel along with distribution of Dettol Soap. WHO held coordination meeting with MS-AHQ Hospital Measles beds to isolate from other ward beds. WHO provided examination gloves to Peads and Surgical wards. WHO conducted coordination meeting with Agency Surgeon regarding some areas where polio campaign was not up to mark.

WHO EHA KPK SitRep