



WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA

Week 23

Date: June 03- 09, 2012

**1. Situation around IDP hosting districts**

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

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

**Population:**

Till 8th June, 2012 total IDPs families living in camp and off camp are 65,332 with 302,150 individuals. Jalozai IDP camp hosts 11,540 families with 56,142 individuals. 53,792 families are living in off camp with 246,008 individuals.

**Alerts and Consultations:**

A total of 5 Measles alerts and 1 Cutaneous leishmaniasis were reported and responded. There were 3,557 consultations provided through health care provider, including acute respiratory infection (16% or 569 cases), acute diarrhea (8% or 269 cases), skin infection (2% or 65 cases) and suspected malaria (2.1% or 73 cases).

**Coordination:**

Health & WASH cluster meetings take place once a week on every Wednesday in Jalozai attended by partners from health (Merlin, CAMP, CERD, 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 twenty seventh camp health Cluster meeting of Jalozai IDP camp was held on Wednesday, June, 6th, 2012, in J-3 Health Post of Merlin. The meeting was chaired by WHO-EHA. UNICEF, FATA Health Team, Merlin, CAMP, CERD, AGEK representing GiZ, HRDS, SSD, EHSAR and DoH representatives attended the meeting.

GiZ has approved training of TB diagnosis and management for the health care providers of the camp. Merlin has completed Indoor Residual spray in the camp. Issue of patients referred without referral slips to DTC was discussed in camp cluster meeting and it was decided that print referral slips will be provided to patients.

WHO conducted a meeting with coordinator FEPRU and Agency Surgeon FATA. The issues of health services provision in FATA health facilities of Jalozai IDP camp were discussed in details. WHO will conduct DEWS training for the FATA health facility staff depend upon the staff availability.

**Needs:**

Bed nets are required for the malaria cases in the camp. EPI in Jalozai camp needs permanent registers, daily registers and family cards.

**EHE Interventions:**

WHO responded 1 AWD alert in Phase 3 of Jalozai camp. Hygiene education was given to the families/tents visited during field visit, which covered benefits of keeping their vicinity clean, washing of hands before eating and especially after using latrine. Proper washing of hands was practically demonstrated to the community especially to children. 72 Soaps and 20 sets of IEC material on hand washing was also distributed among the community. Water samples taken from tube well, water taps and house hold pots were tested for residual chlorine and were found

adequate.

According to UNICEF, ACF will complete the remaining work of pipe networking in Phase 7 & 8 within a week's time. Auto chlorinator will be installed on Phase 7 tube well to supply chlorinated water to the community.

MOU has been signed between UNICEF, Oxfam GB & Lasona (Swat based NGO) for WASH interventions in Phase 1,2,3,4,5 & 6 which will include both refurbishment and reconstruction of different WASH facilities.

Regarding WASH installations in new phases (7 & 8), UNICEF had installed 940 latrines, 444 washrooms, 268 water tanks, 268 washing pads, 60 points for laundry and 52 garbage collection points.

PDMA had installed board for demarcation of phase 7 & 8 however tent numbering in these phases is still not completed by IRC.

In view of complaints from IDPs of phase 7 & 8 regarding shortage of water, PDMA camp in-charge had directed UNICEF to increase water tanker trips to 3 trips a day instead of 2, till the completion of pipe network.

WHO instructed WASH partner (SSD) to clean latrines near listing & registration point more often as they are frequently used by people coming for registration.

WHO brought the issue of illegal electrical connections in tents in the notice of PDMA; as such connections are extremely dangerous and are potential threat for fire. Camp in-charge affirmed to take action against it.

There was shortage of water in the health facility of CAMP-2, the issue was traced out and it was found that health facility was using the supplied water for plantation. Health facility was advised not to use chlorinated water for plantation.

WHO took and tested 22 water samples for residual chlorine both at sources and at user ends, 18 samples were found to have residual chlorine within the required limits while for the rest 4 samples chlorine dose was adjusted. In total 788 water samples have been tested up-till now for residual chlorine, out of which 88% of samples have shown residual chlorine and for the rest chlorine dose was adjusted accordingly.

WHO tested 9 samples for microbiological contamination and all samples were found fit for drinking with no contamination. In total 141 samples have been tested up-till now for microbiological contamination, out of which less than 2 % of samples showed contamination at consumers' end probably due to improper handling, for which chlorine dose was adjusted.

#### **Essential Medicines:**

WHO conducted monitoring and assessment visits to Jalozaï. Gaps regarding rational use of medicines and inventory management were checked. Hands on training provided to the concerned staff. Inventory of health facility checked for the availability of essential medicines. ORS was noted in insufficient quantity at the facility of CAMP organization and after intervention, required stock of ORS provided from CAMP office.

#### **B. Togh Sarai' IDP camp, Hangu district**

In Togh Sarai CERD organization is receiving 4-5 diarrheal cases with severe dehydration on daily basis. WHO and CERD considered setting up DTC inside the camp. Fumigation activities need to be done in the camp to reduce vector related health problems.

In Togh Sarai washing of water storage tanks has been completed. New VIP latrines and wash rooms have been installed in different sectors i.e. H, I, administrative block etc. Cleaning of main drainage system and local waste water channels are in progress by PDMA in the camp. Selling of unhygienic food items is observed inside camp and request is forwarded to camp administration and WASH partner to stop selling of all unhygienic items inside camp

which can trigger diarrheal infections.

District health authorities has requested WHO assistance for establishment of DTC in district Hangu.

WHO monitored Polio immunization activities in UC Raisaan of district Hangu.

11 out of 18 health facilities reported to WHO via e DEWS. WHO DEWS report that acute respiratory infection is the highest cause of morbidity (16% or 117 cases) of total of 731 consultations; acute diarrhoea (17% or 121 cases); skin infection (2% or 13 cases).

### **C. Situation in Tank district**

UNFPA is the only health partner working in Tank district, one center runs at DHQ hospital Tank and other in RHC Ama Khel.

WHO polio team leader visited district Tank for monitoring of polio campaign. During monitoring visit gaps were identified and solutions were proposed.

Commissioner DI Khan acknowledged the services of WHO in district Tank. WHO was requested to assess the water quality from the laboratory as taken from a pond in village Ranwal.

WHO conducted meeting with EPI Coordinator on measles cases in the district. In meeting measles vaccination status in district was discussed.

Date for proposed UN Mission is yet to be announced. This mission is proposed for Gomal areas of Tank which hosts more than 4,000 families, many of these families are believed to be neither properly registered, nor assessed. This mission has already been postponed twice.

Joint visit conducted by WHO with Deputy EDO H to BHU Ranwal and Gara Shehbaz. Status of essential medicine was assessed. Meeting was held with field monitoring officer UNFPA. UNFPA had some issue regarding formal evacuation of their staff at RHC Gomal which was discussed with EDO H.

WHO responded two alerts of Cutaneous Leishmaniasis from Ghundaey and Girney Sheikhan. Measles alerts were responded in Qutab colony Tank city.

WHO gave on job training to the in charge health facility of Dabarra, Ranwal, Cheena, Mumrez Pathan, Gara Baloch, Shah Alam, Kiri Haider, Gul Imam and Toran. Main focus was Measles and AWD.

### **D. Situation in D I Khan district**

29 health facilities reported to WHO via e DEWS during Week 23, 2012. Total 6020 Consultations were reported. All diarrheas were major cause of morbidity representing 13.25 % (OAD as 12.68 % & BD as 0.56 %). ARI was reported at 9.93 % during week 23, Scabies at 2.99 % and Suspected Malaria at 2.54 % respectively.

WHO participated in SNIDs from 04 June 2012 to 7 June 2012 in addition to Measles outbreak response.

UNFPA will close its project in D I Khan & Tank after June 2012. It was working in two health facilities in D I Khan & 03 health facilities in Tank. PRIME ORGANIZATION (Peshawar Medical College) & SAHARA have started CMAM project in flood affected union councils of D I KHAN.

WHO delivered on job training on Measles surveillance to staff of health department during field visits in Measles Response. Health & Hygiene session was held with staff of DHQ Hospital on the occasion of distribution of Waste Bins.

### **E. New Durrani” IDP camp, Kurram Agency**

WHO is in process of finalizing contract with a new partner for provision of PHC services in New Durrani IDP camp.

### **F. Situation in Kohat district**

District health authorities requested WHO assistance for establishment of DTC in district Kohat.

MS Liaqat Memorial Hospital (Women & Children hospital) requested for building of SHED for patients attendants and building of concrete waste collection point.

WHO responded to AJS alert in college town, urban VI of district Kohat.

District health authorities requested for ARV's and ASV's. More ever MS, DHQ and DMS, LMH has requested for provision of Insulin 70/30, Inj Magnesium Sulphate and Inj Valium for Insulin.

Coordination meeting was conducted with MS DHQ KOHAT regarding proper use of WHO provided health care waste equipments functioning of bio-medical incinerator and proper follow up of HCW mechanism. MS DHQ requested WHO for construction of shade above incinerator to protect it from rain and provision of missing parts and expertise to operate the incinerator.

Vector control (fogging) activity has been completed in the District Kohat.

41 out of 43 health facilities in district Kohat provided eDEWS data.

#### **eDEWS:**

##### **KPK eDEWS:**

455 health facilities reported 124,890 patient consultations from 17 districts of Khyber Pakhtunkhwa. Acute Respiratory Infection (Upper and Pneumonia) represented 18.3% or 22,850 cases of total consultations showing no change in percentage as compared to previous week. Other Acute Diarrhoea shared 11.4% or 14,252 cases of the total consultations showing 0.5% increase in percentage as compared to last week. Skin Infection (Skin Inf.) reported at 3% or 3,523 cases and Suspected Malaria comprised 2% or 2,360 cases of the total consultations. Pyrexia Unknown Origin (PUO) shared 5% or 6,320 cases.

##### **FATA eDEWS:**

50 reports were received reporting 15,734 patient consultations from 3 Agency of FATA. Acute Respiratory Infection (Upper and Pneumonia) represented 12.4% or 1,778 cases of total consultations showing 0.2% decrease in percentage as compared to previous week. Other Acute Diarrhoea shared 11% or 1,529 cases of the total consultations showing 1% increase in percentage as compared to last week. Skin Infection (Skin Inf.) reported at 3% or 393 cases and Suspected Malaria comprised 9% or 1,248 cases of the total consultations.

#### **Alerts:**

- WHO received a total of 99 alerts. 82 were suspected measles, 1 was OAD, 4 were NNT, 1 was AWD, 2 were BD, 1 was CCHF, 1 was Enteric Fever, 2 Dengue Fever and 5 were Leishmaniasis. All cases reported were properly investigated and responded by WHO team.

#### **DTCs:**

- EHSAR Foundation supports DTC center with the support of WHO in Pabbi satellite hospital district

Nowshera. A total of 220 patients were consulted, out of these 100 were of type A, 66 were of type B and 54 were of type C.

- WHO visited DTC Pabbi on 7<sup>th</sup> June to ensure that WHO standards are followed and quality services are provided to any AWD cases reported to the DTC. WHO expressed satisfaction over infection control measures and knowledge of staff about management of AWD cases.

#### **RAHA:**

- WHO organized the Handing over ceremony of equipments and an Ambulance under RAHA project on 7<sup>th</sup> June 2012 at the office of Secretary Health Khyber Pakhtunkhwa, Dr Guido Sabatinelli WR Pakistan attended the occasion. Certificate of handing over was signed by both WR Pakistan and Secretary Health KPK.

#### **MNCH:**

- A meeting was arranged between MNCH program and WHO on 5<sup>th</sup> June 2012, regarding possible support of WHO to MNCH Program for various areas of mutual interest in the PC -1 of MNCH program submitted to Department of Health for approval. Program Manager MNCH Program welcomed the support offered by WHO for this PC 1.

#### **Dengue:**

- WHO successfully conducted consultative works on PC 1 for Malaria and Vector Borne Disease for FATA at Nathigali on 9<sup>th</sup> June 2012. Deputy Secretary Planning and Development, Director Health Services and other stake holder of FATA government participated in the workshop.

#### **Health Promotion:**

- WHO participated in cluster coordination meeting in Jalojai camp and inform all the participants about the future health promotion plan in camp. WHO coordinated with Muslim aid, IRC and UNICEF to collect data of the schools which are functioning in Jalojai, so that health promotion intervention may be started in the schools along with the help of health cluster partners.
- Health promotion response was provided to the AWD alert in Jalojai. In response CAMP and SSD health promoters were provided technical inputs regarding health promotion and messages dissemination to the affected and surrounding family. WHO conducted a small session on hand washing and personal hygiene was conducted with the children and male members outside the tent.

#### **Essential Medicines:**

- Total 4 monitoring and 1 follow up visit performed including Bannu and D. I. Khan. Gaps regarding irrational use, storage of essential medicines, record keeping and stock outs identified generally. Hands on trainings provided to the concerned staff of health facilities.
- WHO conducted 3 days training on Logistic on Support System (LSS) for the essential medicines store keepers of Malakand Agency, Bajaur Agency, district Dir Lower and Upper. Total number of participants was 30 including EDO health, store keepers from DHQ hospitals, PPHI, districts EM stores, THQ hospitals, RHCs and facilitators. One day training on Leishmaniasis conducted at Bannu in which 1 dispenser and 2 MTs trained.
- 3 Measles alerts and 1 Neonatal alerts responded at Lakki and D.I. Khan by providing Vitamin A, Paracetamol syrup and TIG.
- A total of 06 coordination meetings held with different stake holders including MS SGTH, EDOHs, and Regional Manager Khwendo Kor in which WHO's support for PHC services, availability of essential medicines and training and implementation of LSS and contingency planning were discussed. Due to the increase in number of Leishmaniasis patients in District Bannu coordination meeting was held with the EDOH Bannu regarding the alarming situation in which the CD Chandni Chowk was decided as a treatment point. EDOH Nowshera agreed to provide a room for WHO use and during meeting it was suggested that Meglumine

Antimoniates Injections should be included in purchasing list of PPHI and EDOH.

- 2 EH Packages provided to the Johannitter for IDPs of off camp health facilities.
- Four participants from DOH Bajaur Agency trained on use of LSS. As part of EHK, syrups are delivered to main warehouse of DHS FATA from WHO Islamabad.

#### WASH:

- Provincial WASH Cluster meeting was held on 5<sup>th</sup> June 2012. Important issues regarding utilization of provincial water quality testing laboratory by the partners for water testing was discussed. It was also decided to initiate series of trainings on water treatment for the water supply staff from Pat district level.
- Training on health care waste management for the health facility staff in afghan refugees camps will start from 14<sup>th</sup> June 2012. This training is funded by UNHCR. WHO shared manual & agenda for two days training with the PDH Afghan commissionrate.
- WHO inspected civil works under progress in Lady reading hospital Peshawar. Meeting was held with director accident and emergency department to discuss the progress of work. WHO directed the contractor to improve the progress of work.
- **District Swat:** Coordination meeting held with chief officer TMA Mingora on 5th June 2012 regarding Chlorinators installed by WHO through PCRWR on TMA schemes. Chief Officer requested for more Liquid Chlorine from WHO before Monsoon to make these chlorinators keep functioning in order to prevent any major outbreaks.
- Meeting was held with DSM PPHI regarding the potential threats of alerts/outbreaks of AWD cases from different areas and a comprehensive list had also been prepared with the coordination of PHED and TMA. It was decided that chlorination shall be carried out in advance to avert any possible outbreak in those areas.
- WHO visited Saidu Group of Teaching Hospital and Ware House at BHU Odigram on 8<sup>th</sup> June 2012 to monitor WASH improvement civil works but the contractor has still not started the work.
- 21 water samples collected by State Development Organization-Pakistan were tested by WHO Swat .Out of these 21 samples tested, 12 samples were found safe while 9 samples were microbiologically contaminated. 57% samples were found fit for drinking while 43% were found unfit
- **District Upper Dir:** WHO visited DHQ Upper Dir along with the contractor to start the civil works for improvement of Gyne and Operation Theatre.
- **District Mardan:** Routine field visits were conducted to DHQ Mardan, MMC, BHU Miankali, Akbarabad, Takar, MohibBanda, Qasim and RHC Gumbat. 05 Water samples were collected 1 each from main water supply source of each Health facility for bacteriological analysis, all water samples were found safe for drinking. During routine field visits to DHQ Mardan, Mardan medical complex, BHU Miankali, Akbarabad, Takar, MohibBanda, Qasim and RHC Gumbat; on job sessions to the health staff was conducted on Health care waste handling and disposal. Total 15 persons were trained during visits.
- **District Kohat:** On job training was conducted to Tube well operator on using of stock solution for chlorinator at LMH hospitals total 3 people were trained on this occasion.
- **FATA:** WHO received 19 alerts of from Tehsil Landikotal villages, Pero khail & Pasi khail Khyber agency FATA were responded and 30 individuals were educated on proper hand washing and benefits of maintaining a good personal hygiene & significance of routine immunization regarding prevention of the reported disease.
- **District Shangla:** 2 bloody diarrhoea alerts received from Tehsil Pura and Shikwalai District Shangla. 12 hygiene kits, 2000 aqua tabs and 720 soaps have been distributed in Martung, Chowga and Shikwalai as a response to the alerts along with on job training on hygiene, health education and awareness in the affected communities.

#### Nutrition:

- WHO conducted 07 days workshop on facility based management of severe acute malnutrition. ToT to be conducted from 5 – 11 June 2012.
- Coordination meeting held with Nutrition Cell DoH and DHQ Hospital Upper Dir regarding nominations for the 04 days Training on facility based management of severe acute malnutrition refresher in Upper Dir. Tentative date is from 13th June 2012.

- Total of 24 patients of severe acute malnutrition with life threatening complications were admitted in 8 Nutrition Stabilization Center with 27 patients were discharged, out of which 25 were cured 00 died and 02 were defaulter cases.
- In Pabbi Hospital Nowshera, four new cases of children with severe acute malnutrition with life threatening complications were admitted in the hospital and six were discharged.
- **Upper Dir:** Monitoring and supervision visits conducted to Stabilization centre. Orientation of the 59 Lady Health Workers on the Nutrition Surveillance at Category D Hospital Wari and Category D Hospital Barawal Bandai. Meeting held with district coordinator National Program for Family Planning and Primary Healthcare to share the Nutrition status of the upcoming Lady Health Workers training on the Nutrition Surveillance.
- **Lower Dir:** Monitoring visit was held to National Programme office, Timargara. Refresher training will be delivered to LHWs of the sentinel site (RHC Gulabad) and LHWs of the catchment area on the day of their monthly routine meeting.
- One day refresher training session on HANSS data collection was conducted at one of the sentinel site, RHC Gulabad. A total of 27 LHWs from sentinel site were trained for HANSS data collection. Monitoring visit conducted to THQ-H Chakdara NSC Lower dir.

#### **District level coordination & monitoring:**

**Shangla:** WHO conducted meeting with ACO- Shangla on fixed funding for running Wajeeha Thalesemia centre which holds most of ECHO equipments. A meeting was held with MS DHQ Alpuri for the start of nutrition stabilization centre. District health sectoral working group/WATSAN meeting was conducted at EDOH office. The meeting highlighted Monsoon contingency/ WASH activities and AWD contingency. UPEC chairman meeting was held. WHO participated in the meeting and explained the monitoring role and achievements by WHO during last NID's. A meeting was held with CRS, EPS and PPHI on AWD prone UC's and WASH activities. PPHI has shared a list of water supply schemes identified during last year's outbreak. EHE was directed to visit the areas and conduct compulsory WATSAN activities. WHO visited RHC Karora, DHQ Alpuri, THQ Puran, CD Shikolay, BHU Martung, BHU Kuzkana and THQ Besham A total of 05 alerts were responded to (02 Bloody Diarrhea, 01 Measles, 01 Enteric Fever and one Leishmaniasis).

**Swat:** WHO received and responded 16 alerts of suspected measles. Twelve system generated alerts of last week were responded. WHO with the support of DoH has planned refresher training for the staff of DoH on AWD & ORT corner. The training will be conducted with the support of Malteser International and CWS. WHO conducted coordination meetings with EPI coordinator Swat, MS SGTH and EDO Health Swat. WHO conducted monitoring visit to CH Kabal, BHU Kotlai, CD Dadahara, BHU Taghma and Saudi Group of Teaching Hospital.

**Haripur:** WHO received and responded 19 alerts (2 outbreaks). WHO conducted training of health staff of 39 BHUs on sign symptoms, management and surveillance of measles. WHO conducted training of EPI technicians on measles surveillance, cluster taking and strategies for improvement of routine immunization. Coordination meeting held with Save the Children for training and launching of measles campaign in ARC on 12 June 2012. ARI 19% with decrease of 1% compared to previous week remained the major cause of morbidity both in hosting and Afghan refugee population in Haripur followed by diarrhoea 13% with 1% increase compared to previous week and scabies 2% with no change in its proportional morbidity. WHO visited 7 health facilities (DHQ, RHC Halli, BHU Tofkian, BHU Kariplian, CD KTS 3, CH KTS, BHU Sarai Saleh).

**Mardan:** WHO conducted coordination meeting with PPHI and RBM (Role Back Malaria) Program; they updated about the completion of house to house IRS with support of RBM and local community in all the C-Leishmaniasis outbreak areas. WHO team participated actively in the SNID activities and evening meetings for feedback in the EDO-H office district Mardan. Routine monitoring visit was conducted to DHQ Mardan, Mardan Medical Complex, RHC Gumbat, BHU Takkar, Mian Kalay, Akbar Abad, Mohib Banda and BHU Qasim. Apart from DEWS activities SNID monitoring was also carried out at all sites during visits. On job training of health staff was conducted on disease case definition, alert/outbreak response.

**Lower Dir & Upper:** WHO conducted coordination meetings with DCO, EDOH, EPI coordinator, National

program, MS Timargara, and MS, EDO health Dir upper. WHO visited DHQ Dir upper along with contactor for repair of OT, gyne, emergency wards and Shed for ambulances. WHO team visited RHC Pattrak, BHU Tall and DHQ Dir Upper. WHO responded one measles alert/outbreak reported from Qalla UC Kambat Tehsil Smarbagh Dir lower. All the alert/outbreaks were jointly responded by DoH& WHO along EPI Vaccinators. Outreach Immunization activities were conducted in affected areas with all available antigens. Vitamin A was given to all children.

**Charsadda:** WHO visited BHU Kangra, RHC Battagram, BHU Behlola, BHU Mohmad Nari, DHQ hospital, and BHU Dhaki, Registers checked and on job orientation of the facility incharges regarding eDEWS was done. DEWS data was submitted by 45 health facilities. Total numbers of consultations were 12026. URTI was 18%, Diarrhea 12%, Malaria 2% and scabies 3% of the total consultations. WHO team supervised and monitored EPI fix centres during the polio campaign.

**Manshera:** WHO received a total of nine alerts, six suspected cases of measles reported from DHQ Hospital one each from CH Battal, CH Darband and ARC Barari. Vitamin A given to children 2 team visited in two far flung areas. Three cases found in Village Judh Bala in Tehsil Oghi, while only one case found in Village Devli UC Battal, vaccination status of the children was poor in both areas. WHO attended and facilitated one day Work Shop in Nathia Gali organized for FATA on consensus development for PC1on IVM. One suspected case of Measles reported from HF of Barari Camp and reported from Kohistan colony, on active surveillance no more cases found. WHO conducted visit to RHC Shinkari, BHU Kotli Bala, BHU Ahl and CH Battal for DEWS strengthening and to find out alerts of epidemic prone diseases. WASH supply for Manshera (Soaps) reach in the district and handed over to EDO health for AWD response. Acute (upper) respiratory infection (10.01%), Scabies (1.71%), Suspected malaria (0.08%), Other Acute Diarrhea (8.83%), Pneumonia (0.28%) remain the leading causes of morbidity representing a total of 20.91%. Bloody diarrhoea, Dengue Fever, acute watery diarrhoea (AWD), suspected measles, Cutaneous Leishmaniasis and meningitis represented less than 1 % of total morbidity in reporting period. Bloody diarrhoea represented 0.32% of this morbidity. All diarrheal disease comprised 9.15%, Viral Hepatitis 0.31% and ARIs 10.29% of total morbidity. In patients aged < 5 years, Pneumonia (1.23%) was the most notified cause of morbidity, followed by other acute diarrhoea (27.08%), Acute Watery Diarrhea (0%), Bloody Diarrhea (0.71%).

**Swabi:** WHO received 38 reports through E DEWS system. Monthly review meeting was attended by WHO at PPHI office Swabi. WHO briefed the participants on case definitions and all the relevant issues were addressed by WHO and DoH. Coordination meeting held with MSs DHQ and Bacha Khan Medical complex regarding the installation of ECHO funded equipments. 11 Health facilities were visited during last week.

**Mohmand:** WHO visited 4 health facilities AHQ Ghalanai, RHC Yakkaghund, BHU Ghazi kor, BHU Yousaf khel,. WHO responded one alert of C-Leshmaniasis reported from Qandahari area of upper Mohmand Agency. WHO held participation in Polio campaign. Coordination meeting held with Agency Surgeon Mohmand in which reports of monitoring visits to health facilities were discussed, Agency Surgeon advised to report all absent staff directly to him. Coordination meetings with FPHC coordinator regarding free medical camps in IDP returned area of Suran, FPHC coordinator requested provision of one EHK for these camps. WHO conducted meeting with FSMO & AHCSO regarding development of Micro plan & communication plan for measles campaign in Mohmand Agency. Meeting with Save the children coordinator regarding reporting of measles cases through mobile health unit & sharing of measles vaccination data. Attended evening meetings in which issues regarding Polio campaign were discussed in detail. On job training for EPI technicians on response to measles outbreaks & maintaining line listing of measles cases.

**Lakki Marwat & Bannu:** NID started from 4th June to 7th June. WHO participated in campaign activities in both districts and data was shared with concerned authorities in evening meetings. Five alerts were reported from different health facilities. Total 3 cases of suspected measles were reported from FR Bannu, and one suspected case of NNT and death from suspected CCHF were reported from Lakki Marwat. All the cases were investigated properly. In response to CCHF, LHW's and facility health staff were briefed about the disease and to report immediately any case of PUO or bleeding from any part of the body without any obvious cause. Total eleven health facilities were visited by WHO team. Health staff briefed about malaria, dengue, AWD and CCHF. To



enhance the outreach activities by EPI staff, a coordination meeting is called by the EDO health Bannu on 13th of June. All the concerned departments will participate to make plan for measles vaccination in the district.

**Battagram:** WHO conducted visits to DHQ Hospital Battagram, RHC Kuza Banda, RHC Banna, CH Thakot, BHU Batly, BHU Paimal Sharif, BHU Pomang, BHU Argashori, BHU Bhattian, BHU Kharari, BHU Phagora for eDEWS analysis. Provided on job training to the EPI Technicians of above health facilities regarding “How to Plan and conduct outreach immunization activity, How to prepare defaulters List”. 1 Measles Alerts reported from DHQ Hospital were investigated and responded. System generated Alert of URTI, 3 of OAD, 3 of BD and 3 of TF for Week 22-2012 were investigated and responded. Coordination meeting held with the M/S DHQ Hospital Battagram, EDO Health, Senior Manager Health Save the Children Battagram, Coordinator EPI and Coordinator DHIS regarding the current status of Measles Alerts as well as status of the eDEWS activities were discussed. EDO requested for the DT Kit and acknowledged the WHO for provision of antiseptic soaps. WHO attended the monthly meeting of all in charge health facilities of District Battagram under the chair of EDO Health.

**Khyber Agency:** WHO responded two outbreaks of measles. WHO vaccinated 92 children during mass measles campaign. WHO participated in Polio campaign. Coordination meetings held with Agency Surgeon, FSMO and PPHI. WHO conducted monitoring visit conducted to CHC Wazir Muhammad killi, AHQ Hospital Landikotal, CH Jamrud, BHU Ali Masjid.

**Nowshera:** WHO conducted meeting with EDOH Nowshera. A meeting called by EDO-H Nowshera on the request of WHO deliberated on situation of Leishmaniasis, Malaria, Dengue, Measles/VPD's, Diarrhea in the district and response given by DoH, PPHI, WHO and other organizations serving in Nowshera. Monsoon Contingency Plan of the district was discussed in detail. It was decided that as a contingency planning measures four sub stores will be established by DoH/PPHI for proper storage of medicines. DHIS & DEWS Data related issues were discussed. It was decided that the District Health Cluster meeting will be held on Wednesday 13th June 2012 at 10 AM in EDOH Office to discuss Monsoon Contingency Plan of District Nowshera. DRR Training in District Nowshera organized by IMMAP was attended by WHO. During monitoring visit WHO imparted on-job training to Doctor & Nursing staff on duty in RHC Pirpai. Training of UNHCR staff in district Nowshera Afghan Refugees Camps is planned on 14th & 15th June 2012 in Mardan.

**Logistic:**

The following supplies were supplied from WHO KP warehouse to:

|                                   |  |
|-----------------------------------|--|
| <b>THQ GARAM CHASMA (CHITRAL)</b> | 1 Generator 7000E 8_AVRC, 1 Horizontal Autoclave, 1 Resuscitation /Crash Trolley , 1 Resuscitation Board   |
| <b>RHC MARGHUZ SWABI</b>          | 1 Generator 7000E 8_AVRC   |
| <b>Peshawar</b>                   | <b>D.G HEALTH (KPK) Office:</b> 1 Generator 7000 E 8_AVRC,<br><br><b>For WHO Sub Office EHA Peshawar Library:</b> 3 Books on emergency water treatment, 3 Urdu & English posters on Chlorine disinfections, 3 posters on disinfections of water, 3 posters on essential hygiene, 3 follow up identify treatment Posters, 3 guideline for Cholera control, 3 Urdu instructions posters on Hand wash method, 3 books in Urdu on Health & Islamic education, 3 guide lines on Health is wealth, 3 books on Healthy society for pregnant & feeding woman, 3 English & Urdu posters on house hold water storage, 3 Urdu & English poster on public Hygiene, 3 Safe disposable of faces in English Poster, 3 Safe drinking water Urdu & English Poster , 3 Small boys & girls give some quantity of food , 3 Urdu version posters on |

|   |  |
|---|--|
|   | Use Of dustbin, 3 posters on Water using Procedures, 3 Weight for age chart, 3 WHO response in flood in Pakistan , 3 booklets on Case definitions of Cholera, 3 Environmental health books in Urdu , 3 posters on hand hygiene, 3 Posters on preparation & use of Chlorine, 3 Posters on preparation & use of disinfections , 3 Posters on Preventing Eyes, 3 books of Urdu version on Save from Aids, 3 posters on Solid Waste Urdu & English, 3 Urdu version books on Spending life on rules of Islam, 20 Bed Nets   |
| <b>CH MALAKAND TOP</b>  | 1 Generator 7000 E 8_AVRc  |
| <b>RHC CHUPRIAL (SWAT)</b>  | 1 Generator 7000 E 8_AVRc  |
| <b>RHC USTERZAI KOHAT</b>   | 1 Generator 7000 E 8_AVRc  |
| <b>RHC NARYAB HANGU</b>   | 1 Generator 7000 E 8_AVRc  |
| <b>RHC TALASH LOWER DIR</b>   | 1 Generator 7000 E 8_AVRc  |
| <b>RHC KOTJAI DI KHAN</b>   | 1 Generator 7000 E 8_AVRc  |
| <b>RHC GOMAL BAZAR TANK</b>   | 1 Generator 7000 E 8_AVRc,1 Horizontal Autoclave ,1 Resuscitation/Crash Trolley ,1 Resuscitation board   |
| <b>RHC EKKA GHUND (MOHMAND)</b>   | 1 Generator 7000E 8_AVRc,  |
| <b>RHC BARANG (BAJOUR )</b>   | 1 Generator 7000E 8_AVRc   |
| <b>Nowshera</b>   | <b>JALozAI CAMP (NOWSHERA):</b> 72 Dettol bath soap, 10 IEC materials on hand washing method.<br><b>JOHANITOR INTERNATIONAL:</b> 2 EHK subs kits   |
| <b>WHO GILGAT</b><br><b>On the request of WHO Islamabad the items were supplied on emergency basis from KP Warehouse to Surveillance officer GILGIT</b> | 100000 Aqua tabs 67 mg, 157 Books on Emergency water treatment, 50 Chlorine disinfection Urdu & English poster, 10 Essential hygiene poster, 10 Follow up identify treatment, 30 Guideline for cholera control, 30 hand wash method Urdu instructions poster, 10 Health & Islamic education book in Urdu, 10 health is wealth guide line, 10 Healthy society for pregnant & feeding woman, 100 House held water storage English & Urdu poster, 100 OPD register, 10 public hygiene Urdu & English Poster , 110 Safe disposable of faces in English poster, 100 Safe Drinking Water Urdu & English Poster, 100 Small boys & girls give some quantity of food, 100 use of dustbin Urdu poster, 10 Water using procedures in Urdu, 10 Water using procedures in Urdu, 10 Weight for age chart, 2 WHO response in flood in Pakistan, 10 Care of health Urdu books, 56 case definitions booklet, 6 Environmental health books in Urdu, 10 hand hygiene English & Urdu posters, 10 Preparation & use of % chlorine posters, 10 preparation & Use of disinfections poster , 100 preventing eye English posters, 100080 Water pure sachets, 10 books on Save from Aids, 10 solid waste Urdu & English posters. |