WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA	Week 40	Date: September 30-October 06, 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 02nd October, 2012 total IDPs families registered are 81,579 families with 375, 872 individuals. Jalozai IDP camp hosts 16, 045 families with 75, 687 individuals. 65, 534 families with 300, 185 individuals are living in off communities.

Alerts and Consultations:

One alert of dog bite was reported and responded in this week. There were 4,428 consultations provided through health care provider, including acute respiratory infection (23.3% or 1,032 cases), other acute diarrhea (8.2% or 365 cases), skin infection (2.3% or 101 cases) and confirmed malaria (1% or 46 cases).

Coordination:

Health, Nutrition & WASH cluster meetings take place once a week in Jalozai attended by partners from health (Merlin, CAMP, CERD, FATA Health, GiZ, AGEG, 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 3rd October 2012, at J-2 health post of Merlin. The meeting was chaired by WHO. Merlin, CAMP, CERD MCH, BEST, SSD, SEED, UNFPA and UNICEF attended the meeting.

Merlin highlighted that eye camp is in progress at J-3 with the support of HelpAge International. CERD providing MCH services informed the cluster that one of their team is working at the registration point to indentify and register pregnant ladies, they further stated that they have been working there since long and after identifying pregnant ladies they request security staff to facilitate these pregnant ladies, today one of the security staff stopped them from working. WHO assured them that they are going to take up the issue with PDMA. CERD thanked WHO for provision of medicine. CAMP Organization Informed the forum that their CAMP 1 health post has resumed its services since 2nd October, 2012. UNFPA. Informed the forum that a Psychiatrist has been hired for Jalozai camp and his working schedule will be soon shared all. WHO Polio eradication initiative representative informed the meeting that next polio campaign will commence from 15th October 2012.

Two days training on Age Friendly PHC was organized by HelpAge International at Peshawar on 4th and 5th October 2012, in which WHO took a session on the 5 Geriatric Giants. This training was basically for the organizations working in the health sector at Jalozai camp.

EHE Interventions:

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WHO held coordination meeting with WASH partner (SSD) regarding hygiene promotion and water quality monitoring. SSD updated WHO that their health & hygiene promotion teams are routinely conducting sessions with the community and water quality is also being monitored by their water quality analyst. Phase-1 tube well was non functional for 3 to 4 days due to some mechanical problem and during this period SSD did water tankering to ensure continuous supply of water to the community.

WHO conducted coordination meeting with WASH partner (SEED), SEED informed WHO that after taking charge they are conducting regular health & hygiene sessions with IDPs from 21st of September and up-till now they had conducted 162 sessions. SEED had requested WHO for provision of water testing kit (Wagtech) and also some EH supplies, so that they can distribute them in the community after proper counselling and sensitization.

WHO planned on job training on Water Quality Monitoring for water quality analysts of both new WASH partners in the camp i.e. BEST & SEED for proper water disinfection, ensuring supply of 100% chlorinated water to the community in the camp and water quality data sharing.

WHO tested 21 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 1044 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 tested 8 samples for microbiological contamination and all samples were found fit for drinking with no contamination. WHO has so far tested a total of 260 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 Support:

WHO made a follow up visit to J-2 supported by Merlin, some discrepancies in physical stock and bin cards found. Prescriptions slips (other than health book) had no date. LHV was also involved in prescribing. Irrational use of medicines and all these issues highlighted to pharmacist, MO and PMC. In camp cluster meeting at Jalozai, all IPs informed that key essential medicines are available in sufficient quantities.

B. Togh Sarai" IDP camp, Hangu district

1159 families with 5821 individuals are residing in IDP camp. WHO visited IDP camp and took 05 water samples collected, in which 60% contamination was detected. Result was shared with WASH partner for immediate action, 10 water coolers will be installed by PDMA at different points in the camp**.** 200 cakes of laundry soap were provided to camp partner organization.

10 out of 18 health facilities reported to WHO via e DEWS. There were 676 consultations provided through partner organization, including other acute diarrhoea (17% or 115 cases), acute respiratory infection (16.3% or 110 cases), also skin infection (4% or 25 cases) and suspected malaria (2% or 14 cases).

C. Situation in Tank district

UNFPA was running a single facility in DHQ hospital Tank. They have handed over all the equipments and the facility to Department of health. Merlin has completed the training regarding investigation of Malaria. Four technicians from district Tank attended the 20 day training in DI Khan.

WHO held meeting with DEDO H who recently joined office after departure of EDO H. New EDO H was briefed about the role of WHO and DEWS. In a joint meeting with PEO and EPI coordinator, WHO briefed the participants on technical aspects of NEAP and last campaign results were explained to EDO who will attend a review meeting regarding Polio campaign in provincial secretariat. WHO will provide DEWS refresher training to the all facilities

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in charges in a review meeting WHO shared measles case investigation report with DEDO H. WHO briefed EDO H and DEDO H on preventive measures of control of Malaria and Dengue.

WHO received and responded a measles and VHF case reported from district Tank.

D. Situation in D I Khan district

Updates on IDPs of South Waziristan Agency: A total of 721 families (3141 members) from MAHSUD tribe have returned to their homes in various parts of South Waziristan agency from Tank and DI Khan in the 9th three-day phase of government-sponsored rehabilitation process for internally displaced persons.
In the phase, which began on Sept 24 and ended on Wednesday, displaced families sheltering at KAWAR IDP camp centre in Tank and Rata Kulachi Stadium in DI Khan were sent to their hometowns in SARA E ROGHA, KOTKEY and SHAUR areas of South Waziristan. On Wednesday, special functions were held at KAWAR IDP camp centre in Tank and Rata Kulachi Stadium camp in D I KHAN.

WHO arranged weekly coordination meeting with EDO Health & Deputy EDO Health & M.S. of DHQ Hospital to present & discuss the weekly disease trend reported through e DEWS. District health authorities thanked WHO for construction of ware house and requested for installation of a transformer as a three phase electricity connection was not enough to bear the load. WHO participated in a meeting of LHV s called by EDO Health for continuation of Conditional Grant Project. The EDO informed them that WHO will also be a part of the district monitoring team with Deputy EDO Health & Conditional Grant focal person.

WHO provided on job training on e DEWS & DEWS alerts to staff of health facilities during visit to Nai Wela, FATEH, and DARABAN KHURD & MALANA in order to expand the e DEWS net work.

WHO received and responded 02 alerts of Dengue fever.

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. An incident of Gas cylinder blast took place in the camp on 02-10-2012. Save and Serve provided first aid services to the patients wounded by the gas cylinder blast, and referred them to the Para Chinar hospital in save and serve's ambulance. Save and Serve providing services with the support of WHO and FDMA. A total of 563 consultations received through Save and Serve organization. Acute respiratory infection is the highest cause of morbidity (49% or 277 cases) of total consultations; other acute diarrhoea (8% or 44 cases); suspected Malaria (1.2% or 7 cases); skin infection (3% or 17 cases).

F. Situation in Kohat district

WHO received and responded 02 cases of AWD reported from Liaqat Memorial Hospital and Jungle Khel of Urban III UC. WHO collected samples and sent to NIH for confirmation. Detailed hygiene session conducted.

WHO conducted coordination meeting with PHED staff. The agenda of the meeting was strengthening and capacity building of PHED staff on water quality monitoring and treatment. WHO provided 1 DT kit on the request of district health authorities.

MS DHQ Hospital has requested for supply of infusions (Dextrose, Ringer's, Normal Saline etc) on emergency basis.

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

eDEWS:

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KPK eDEWS:

- 274 reports were received reporting 71,263 patient consultations in 13 districts of Khyber Pakhtunkhwa Province. Acute respiratory infections are the highest cause of morbidity (24% or 17,046 cases) showing 5% increase in percentage; other acute diarrhoea (10.5% or 7,481 cases); skin infection (0.2% or 1,973 cases); suspected malaria (2% or 1,237 cases).

FATA eDEWS:

- 36 reports were received reporting 13,564 patient consultations in 2 agencies of FATA. Acute respiratory infections are the highest cause of morbidity (12.5% or 1,691 cases) showing 0.4% decrease; other acute diarrhoea (9.2% or 1,244 cases); skin infection (2% or 240 cases); suspected malaria (8% or 1,053 cases).

Alerts:

- WHO received and responded a total of 58 alerts including 06 outbreaks. Out of these alerts 37 were measles, 06 were AWD, 01 was NNT, 06 were Leishmaniasis, 01 was Diphtheria, 04 were Dengue Fever, 01 was Malaria, 01 was Mumps and 01 was Tetanus. All cases reported were properly investigated and responded by WHO.

Health Promotion Activities:

- WHO organized 2 days training on WHO Health Promotion Guidelines in collaboration with OXFAM GB. The training was organized in Nowshera for the health promotion teams working in IDPs camp Jalozai as a part of WHO Health promotion & protection plan. Total 26 participants were trained, out of which 20 Public Health Promoters, Public Health engineers from OXFAM GB & Lasoona, 4 Social Organizers from CERD and two health promoters from CAMP organization participated in the training.
- WHO coordinated with Malteser international team and distributed 100 IDPs booklet and 750 different IEC materials on health & Hygiene for their health promotion team working in Shangla & Kohistan districts of KP.

Essential Medicines:

- WHO conducted a total of 11 monitoring and 01 follow up visit in Swabi, Mardan, D.I. Khan, Dir Lower, Kohat and Swat. 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 provided a total of 09 hands on training sessions held at D.I. Khan, Dir Lower, Kohat, Swabi, Mardan and swat on Rational use of medicines, storage of essential medicines, LSS, dosage and administration of ARVs, rational use of Primaquin and record keeping.
- WHO conducted 14 coordination meetings with different stakeholders including EDOHs, MS, DSM, In Charge Malaria Program, DMS, EHSAR Foundation, Merlin's PC, In charge National Program and MS SGTH in which non-availability of essential medicine, Irrational use of medicines, Pharmacy standard at facility levels and Leishmaniasis discussed.
- WHO responded 2 alerts and 3 outbreaks of Measles at Dir Lower by providing vitamin A capsules, 2 Leishmaniasis alerts at Afghan Refugee Camp Dir Lower by providing Meglumine Antimoniate Injections and 1 AWD at Mardan.
- Remaining part (Insulin 70/30= 200, Insulin Regular= 200) of SCHP was delivered to each district Kohat, Nowshera and D.I. Khan which are sufficient for 1200 patients. One type of assorted medicines delivered to Kohat sufficient for 150 patients approximately. 1000 Vitamin A delivered to EDOH Swat.
- WHO delivered Insulin 70/30= 600 and Insulin Regular= 600of SCHP to DHS FATA warehouse.

WASH:

- **<u>District Nowshera:</u>**

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- WHO finalized on job training on Water Quality Monitoring with PHED, which will be carried out in the next week. XEN-PHED appreciated the initiative taken by WHO for capacity building of their staff and also assured full cooperation from their department in this regard.
- WHO held coordination meeting with TMA Nowshera, TMA requested WHO to conduct training of their staff, so that they can fully functionalize the Water Quality Testing Lab established by WHO.
- WHO in collaboration with Oxfam GB conducted 2 days training on WHO Health Promotion Guidelines to Health & WASH partners i.e. Lasoona, CAMP and CERD. 26 participants were trained.
- **District Peshawar:**
- WHO held meeting with Executive Engr. PHED FATA regarding handing over of water quality testing kits (Wegtech Kits) to subdivisions in FATA and further training of their nominated staff on water quality testing and monitoring.
- WHO conducted meeting held with administrator Lady reading hospital regarding celebration of Global Hand Washing day.
- **District Charsadda & Swabi:**
- WHO participated in a progress review meeting with technical team of selected construction firm hired for implementation of HCWM system in DHQ Gujrat. WHO provided structural details, AutoCAD drawings and quantitative specification of the project. The firm requested for further guidance and supervision till completion of the planned interventions.
- WHO organized a coordination meeting with PHED and TMA Charsadda regarding WHO appraisal of focal person for water quality monitoring in district Charsadda. TMO Charsadda proposed to start the district water testing lab with formal staff training of TMA & PHED focal persons so that both the stakeholders can jointly perform water quality improvement and public health protection efforts in the district.
- WHO visited UC Yar hussain, village Pajman and Takhil. PHED swabi has included rehabilitation of main community water supply systems in these targeted villages after severe episode of AWD investigated, responded and contained by WHO in collaboration with PPHI and DoH. Social mobilization and health promotion campaigns are in progress in local community and schools by PPHI team and community volunteers. WHO team facilitated the sessions focusing on diarrhea prevention and control measures at household and community level.
- WHO is monitoring the auto-chlorinators installed by WHO at 46 different community water schemes in the district. All the units are functional and need regular supply of liquid chlorine (sodium hypochlorite 20%) for uninterrupted chlorination. 16 samples were tested this week from MC1, MC2, Turnab and Utmanzai town area for residual chlorine. All the samples were found within WHO recommended residual chlorine range.
- WHO collected and analyzed 11 water samples for faecal contamination from main sources under continuous monitoring in urban areas of Charsadda. 25% of the samples from household containers were found contaminated probably due to unhygienic conditions. The results were shared with TMA Charsadda for mitigation and regular follow up.
- WHO facilitated an on job session on manual disinfection and water treatment to health staff from BHU Umarzai. 05 staff members participated in the training sessions.
- **District Mardan:**
- WHO held coordination meeting with newly appointed Ms DHQ Mardan,. WHO conducted coordination meeting with SDO and Sub Engr PHED Mardan in PHED office on 2nd Oct 2012, training session on Portable lab water testing kit is in progress.
- WHO arranged one day training session on "DEWS, Dengue and Dengue Hemorrhagic fever" for field staff of organization "App Ki Sehat" held on 4th Oct 2012 in their Dist. office at Mardan; total 25 field staff members were trained/ participated in the training.
- WHO conducted routine monitoring visits to DHQ Hospital, Mardan Medical Complex and BHU Gujhar Gari. During visits on job training of 8 health staff was conducted on alert/outbreaks response focusing AWD, health and hygiene.
- WHO received and responded a total of 2 alerts reported last week (1 Suspected Measles and 1 suspected AWD alert) all the reported alerts from the District 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. In response to suspected AWD alerts stool sample collected for lab conformation; hygiene kits, soaps and Aqua-tabs were

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provided to the affected families with detailed sessions to family elders. 100 Aqua tabs and 3 hygiene kits were distributed during AWD/ measles alert response in Dist. Mardan.

- **District Swat & Shangla:**
- 0ne day training on "Health Care Waste Management" in two sessions on 4th and 5th October 2012 was conducted for Health Department. The training was facilitated by WHO and arranged and funded by Merlin Swat in order to build the capacity of Health Department. Total number of participants was 30 on each day, so total of 60 Health personal were trained.
- WHO received and responded 7 measles alerts. In response health education was given to the community regarding vaccination and hand washing with soap. Total of 50 people educated and about 144 soaps were distributed.
- WHO conducted coordination meeting with Merlin Swat and EDO health focal person on 1st October EDO Health office regarding the trainings on HCWMS for nomination of persons from health department which was then conducted on 4th and 5th October 2012.
- **FATA:**
- On October 3rd 2012, thirty one health staff of PPHI working in Khyber agency was educated on personal hygiene, water disinfection at household level, food hygiene and faeco-oral root diagram in a monthly review meeting held at PPHI office Peshawar. Provincial director and focal points and WHO team participated in the meeting.
- WHO responded to a measles alert reported from Landikotal Khyber agency on Saturday October 6th, 2012. Seventeen community members were educated on advantages of personal and household hygiene, maintaining proper food hygiene, household water disinfection methods. About 216 antibacterial soaps and 770 HTH disinfection tablets has been distributed to the community members in response with the measles case reported.
- On October 6th, 2012 coordination meeting was held at CH Jamrud with the Agency Surgeon and DEWS focal person Khyber Agency regarding the RAHA funding for DEWS at Khyber agency.
- **District Lower Dir:**
- WHO attended the UPEC meeting on 2 October, 2012 at Jirga Hall DCO office Timaragara Dir lower. WHO held coordination meeting with MSF Field coordinator, medical supervisor and nurse supervisor and shared the updates of measles alerts/outbreak list and their results with MSF team.
- WHO responded to 5 Measles alerts received from Vilage Godar, UC Shalkandai, Tehsil Munda, Vilage Muslim Bagh, UC Kharkai, Tehsil Samarbagh, Vilage Dinjari, Kambat Tehsil Samarbagh, Vilage Hajiabad High School, UC Koto, Village Balambat Colony Near National Bank, UC and Tehsil Balamabat Dir lower.
- Health education session conducted with the 79 family members and community, patient isolated, EDO-H & EPI Coordinator were informed.
- WHO responded to C-Leishmaniasis alert received from village UC Chukyatan and Akhagram UC Akhagram, Dir upper.
- ITN's and Antiseptic Soaps were distributed in the affected patients. LHW's were informed and requested for identification of new cases in their catchments areas. RBM focal person was informed and requested for vector control interventions in the affected areas. Health & Hygiene session was conducted with 27 family members and community elders.
- 14 LHS were sensitize and trained on DEWS Response by WHO Team Timargara on alerts/outbreak response and their role in Alerts/outbreak.
- **District Kohat & Hangu:**
- WHO held coordination meeting with PHED staff including Executive Engineer and SDO at PHED office Kohat. The agenda of the meeting was strengthening and capacity building of PHED staff on water quality monitoring and treatment.
- WHO collected 4 water samples from village jungle khel, in which 25% contamination was detected. 3 water samples were collected from village Usterzai bala, in which 34% contamination was detected.
- WHO provided 9 hygiene kits, 10 jerry canes and 5,000 aqua tabs to CD jungle khel and to affected families. Health and hygiene sessions were conducted for the affected communities. 11 community members participated in health and hygiene sessions.
- WHO distributed 6 hygiene kits, 15 jerry canes among the affected families of Usterzai bala. Health and hygiene session conducted for the affected families of Usterzai bala. 16 people participated in health and hygiene sessions.

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- WHO provided a total of 15 Hygiene kits, 25 jerry canes and 5,000 aqua tabs to the affected communities of village jungle khel and usterzai bala district Kohat.
- **District Haripur:**
- WHO responded to malaria alert at UC Rehana .Enteric fever cases reported from Refugee camp and KTS were also responded.
- WHO collected a total of 10 water samples for bacteriological analyses during alert investigation and health facility monitoring visits, 70 % tested water samples were found with bacteriological contamination. The community and in specific the affected families were educated for the improvement of their hygiene i.e. use of chlorinated water for drinking purpose or Boiling of water before drinking, proper hand washing before eating and specially after using toilets and also proper disposal of human & animal excreta.
- WHO tested residual chlorine at 8 different locations at Afghan Camps in which more than 75% of samples were not found within permissible limit.
- WHO conducted a coordination meeting with MS DHQ regarding Health Care Waste Management refresher training to hospital staff. MS appreciated WHO contribution towards environmental health and nominated 5 members for HCWM training.
- WHO provided 40 antiseptic soaps, 3000 Aqua tabs, 1200 Pure sachets and 20 IEC materials of different subject were displayed and provided to community during alerts response.
- **District DI Khan:**
- WHO conducted routine monitoring visit to BHU Roda, BHU Fateh and CD Navaila and conducted on job training on Hospital Waste Management and infection control.
- WHO collected 8 water samples from BHU Roda, BHU Fateh and CD Navaila, in which 6 contained minor biological contaminations
- WHO provided 30 hygiene kits, 12,000 aqua pura sachets and 30,000 aqua tabs to BHU Roda, BHU Fateh and CD Navaila.

Nutrition:

- WHO provided facilitation in training of Health Promotion for various health care providers on Nutrition and Reproductive health in Nowshera as nominated by provincial Health Promotion officer and approved by team leader.
- WHO provided facilitation in 2 days provincial multi-sectoral consensus building workshop on Nutrition Policy guidance notes and strategic/operational planning held in PC Peshawar.
- WHO conducted coordination meeting with Nutrition Cell regarding proposal submission and technical and financial reports of previous LoAs.
- Total of **45** patients of severe acute malnutrition with life threatening complications were admitted in 9 Nutrition Stabilization Center with **35** patients were discharged, out of which **31** were cured **00** died, **00** were medically referred and **04** were defaulter cases.
- In Pabbi Hospital Nowshera, **six** new cases of children with severe acute malnutrition with life threatening complications were admitted in the hospital out of which 03 were cured and 01 defaulted.

District level coordination & monitoring:

Haripur: WHO visited 06 health facilities (DHQ, BHU Dheenda, BHU STC3, BHU STC2, BHU STC4, CD KTS4). WHO conducted evening meeting during the SIAD polio campaign in Haripur. ARI 23% with increase of 1% compared to previous week remained the major cause of morbidity both in Hosting and Afghan refugee population in Haripur followed by diarrhea 9% with 1% decrease compared to previous week and scabies 2% with 1% decrease in its proportional morbidity. WHO received and responded 09 alerts.

Mardan: WHO conducted coordination meeting with newly appointed Ms DHQ Mardan, during meeting MS was briefed about the WHO interventions and support at DHQ Level, MS also requested installation of SFD equipment's supplied by WHO for different units of DHQ Hospital Mardan, he also requested for diarrheal kit owing to increase suspected AWD cases in the district. WHO arranged one day training session on "DEWS, Dengue and Dengue Hemorrhagic fever" for field staff of organization "APP KI SEHAT" held on 4th Oct 2012 in

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their district office at Mardan; a total of 25 field staff members were trained/ participated in the training, IEC materials were also provided to the participants during training. WHO conducted routine monitoring visits to DHQ Hospital, Mardan Medical Complex and BHU Gujar Ghari. During visits on job training of health staff was conducted on disease case definition, alert/outbreaks response focusing AWD and weekly eDEWS reporting.

Lower Dir & Upper: Upper Dir: Security forces on high alert due to last week attack on Bind Dara security forces post from Afghanistan .WHO conducted coordination with EDO health, MS DHQ Dir lower/upper, MSF Belgium, Focal person DEWS and focal person National Program Dir lower/upper. WHO attended the UPEC meeting on 2 October, 2012 at Jirga Hall DCO office Timargara Dir lower. Chaired by EDO health and co chaired by WHO. During the meeting it was decided to ensure the participation of teacher and female in upcoming NID and to Ensure the full coverage and availability of required vaccine. WHO held coordination meeting with MSF Field coordinator, medical supervisor and nurse supervisor. WHO shared the updates of measles alerts/outbreak list and their results with MSF. Requested MSF team to give reports on WHO format and ensure full address with numbers of patients. WHO and MSF team will strengthen their coordination further with each other. WHO has coordination meeting with National program and EDO health to trained LSS on alert response. WHO responded 5 Measles alerts received from Vilage Godar, UC Shalkandai, Tehsil Munda, Vilage Muslim Bagh, UC Kharkai, Tehsil Samarbagh, Vilage Dinjari, Kambat Tehsil Samarbagh, Vilage Hajiabad High School, UC Koto, village Balambat Colony Near National Bank, UC and Tehsil Balamabat Dir lower. WHO sensitized and trained 14 LHS on DEWS response. WHO visited CD Koto, DHQ Timargara, BHU Osakai and THQ Chakdara.

Charsadda: WHO visited BHU Akhoon Dheri, BHU Behlola, DHQ hospital, THQ Sarki Pul, BHU M.Nari, CD Char Khas. Registers checked and on job orientation of the facility incharges regarding DEWS was done. Total consultations number of consultations was 18613.

Shangla: The Surveillance office of district Shangla has joined WHO KP office on 2nd Oct 2012. He was introduced to his tasks. On 3rd October 2012 held a meeting with Dr. Obaid Ul Islam on the issue of positive polio case in district Shangla and the efforts on part of WHO to help Polio teams out in the SIAD's and than NID. WHO assured full support and at the same time contacted partner organizations for helping out in PCM and market survey. WHO participated in Mother and child week preparatory meeting. WHO emphasized on the need to increase routine immunization and at the same facilitate districts in Alerts and outbreaks response.
WHO has prepared a draft work plan for Avian Influenza it will be discussed with Dr. Zia Deputy Director Public health for approval and further actions.

Swabi: WHO conducted monthly review meeting at PPHI office Swabi on 2nd Oct 2012. WHO Co- chaired the meeting. WHO described the role of EDEWS and the importance of surveillance of communicable disease. DSM PPHI appreciated the role of WHO and for 1 day workshop on rational use of medicine in coming monthly review meeting. WHO monitored 2nd round of polio eradication activities. WHO held coordination meetings with EDO Health, MS Bacha Khan Medical Complex & DSM PPHI district Swabi on 3rd Oct 2012, in which alarming situation of AWD reported through remote areas & current essential medicines states was highlighted, EDOH, MS & DSM requested WHO for DD kits. WHO monitored 14 health facilities for EDEWS analysis. WHO responded 6 system generated alerts. 3 suspected BD, 2 OAD and 1 URTI was investigated and responded.

Peshawar: WHO received and responded 4 measles and 01 Diphtheria alerts**.** WHO conducted coordination meeting with EDO-H and EPI Coordinator regarding measles alerts. WHO visited 6 health facilities.

Swat: WHO received and responded 6 alerts of suspected Measles. WHO conducted 5 monitoring visits to Saidu Group of Teaching Hospital, CD Parrai, CD Nawakelay, CH Barikot, BHU Chungai, CD Ghalegay, BHU Manyar, WHO facilitated one day training on "Health Care Waste Management" in two sessions on 4th and 5th October 2012 was conducted for Health Department and PPHI. A total of 60 Health personal were trained. WHO attended the 24th Monthly Review meeting of PPHI Swat.

Manshera: WHO received and responded a total six alerts. Five for suspected cases of Measles and one for suspected Dengue fever from DHQ Hospital, two Measles alerts reported from CH Battal Hospital. Decrease in reported cases of Diarrhoea and increase of ARI cases from DEWS reporting sites as compared to previous weeks.

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Measles cases still reported from different parts of Mansehra. WHO attended DPEC (District Polio Eradication Committee) meeting under the chair of DCO Manshera, all the line departments attended the meeting and strategy for upcoming round was discussed in detail. WHO conducted monitoring visit to DHQ Hospital, BHU Sandesar, and BHU Attershisha for alert response and disease surveillance.

Battagram: WHO held planning meeting with coordinator M & E Merck Foundation for upcoming Global Hand Washing Day activities at District Batagram. WHO attended evening SIAD meeting chaired by ACO Batagram and EDO Health Batagram. WHO visited to DHQ Hospital Batagram, RHC Kuza Banda, BHU Khair abad, BHU Shingli Payeen, CD Gijjbori, BHU Bhattian, BHU Kharari, CD Bandigo for eDEWS analysis. WHO received and responded 4 alerts of Measles and 2 alerts of AFP reported from DHQ Hospital.

Malakand: WHO conducted coordination meeting with MS-DHQ Batkhela regarding installation of SFD equipment. WHO held coordination meeting with EDO-H and EPI coordinator district Malakand regarding upcoming **POLIO** campaign arrangements in the district. WHO visited and monitored BHU Wazirabad, BHU Kharki Dargai, BHUBaizo, CD Khadu and DHQ Batkhela data tallied with OPD registers of these facilities. Weekly data submitted by all 25 targeted health facilities (in a total of 41 Facilities). WHO received and responded 3 Measles alerts. WHO responded 5 systems generated alerts (3 of bloody diarrhoea and 2 of typhoid fever) none of those was a confirmed alert. WHO arranged Dengue awareness campaign for the residents of Zngal patay Afghan refugee's camp.

Bunir: WHO received and responded one case of measles and AWD. WHO visited 05 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.

Khyber Agency: WHO received and responded two alerts of measles and Leishmaniasis. The measles alert (AHQ Hospital Landikotal) was responded with active surveillance and mass measles vaccination. The Leishmaniasis alert (CH Jamrud) was responded by providing and administering Injection Glucantime on the spot. Three system generated alerts were responded, all of which were false alerts. WHO conducted coordination meetings with Agency Surgeon, DEWS Focal person FATA, FSMO and PPHI. WHO attended Monthly Review meeting with staff of BHUs in PPHI office KP. WHO held coordination meeting with DEWS Focal person FATA in FATA Health Directorate KP regarding RAHA funding in DEWS component of Khyber Agency. WHO conducted monitoring visits to AHQ Landikotal, CD Pindi Lalma, CH Jamrud, BHU Ali Masjid and CD Qadam.

Bajaur Agency: 21 out of 24 sentinel sites submitted their eDEWS to WHO. WHO attended Polio APEC meeting at PA office of Bajaur Agency. WHO held coordination meeting with Agency Surgeon regarding situation of Polio and distribution of hygiene kits along with health education session in those areas where hygiene is very poor. WHO did follow up of last week's issue regarding arrangement of Oral Therapy for Cutaneous Leishmaniasis from FATA Directorate and according to Agency Surgeon, they will receive this important supply within a few days. WHO received and responded 8 alerts i.e. 2 of Cutaneous Leishmaniasis, 1 each of Mumps; NNT & Tetanus while 3 of suspected Measles. WHO visited 3 health facilities, feedback shared with Agency Surgeon and EPI Coordinator.

Logistic:

The following supplies were supplied from WHO KP warehouse to:

CH MARDAN (RUSTAM)	1 Anaesthesia Equipment, 1 Defibrillator cu-er 5, 2 M3 Vital signs monitor, 1 Plazma freezer, 1 Ultra sound machine +ups + printer.
BAJOUR AGENCY (FATA)	400 Hygiene kit, 300 Jerry cans 20 liters
MALTEZAR INTERNATIONAL (ISLAMABAD)	500 IEC Materials

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