



WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA

Week 39

Date: September 23- 29, 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 27th September, 2012 total IDPs families registered are 80,368 families with 370, 660 individuals. Jalozai IDP camp hosts 15, 600 families with 73, 847 individuals. 64, 768 families with 296, 813 individuals are living in off communities.

Alerts and Consultations:

No alert was reported in this week. There were 3,843 consultations provided through health care provider, including acute respiratory infection (26% or 999 cases), other acute diarrhoea (8.5% or 326 cases), skin infection (2.3% or 87 cases) and confirmed malaria (1% or 35 cases).

Coordination:

Camp Cluster meeting was conducted at PDMA office on 25th September, 2012. WHO participated in the meeting, weekly disease trends were shared with the forum along with interventions from the health partners.

One day DEWS refresher training was organized by Merlin on 25th September 2012 for their newly hired staff in which a total of 14 participants were trained on DEWS by WHO. The staff included 7 doctors, 2 LHVs, 1 pharmacist, 1 HMIS assistant and 2 social organizers from CERD.

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 Friday September 26, 2012, at J-2 health post of Merlin. The meeting was chaired by WHO. Merlin, CAMP Organization, CERD MCH, EHSAR Foundation, LASOONA (Oxfam GB), BEST, SSD, SEED, UNFPA and Helpage International attended the meeting.

Merlin informed the forum that their eye camp is in progress at J-3 with the support of Helpage, it will continue on alternate days for three days, all the partners were requested to refer eye patients as this is the last camp. CERD providing MCH services in camp informed the forum that there is a demand from the community for ultrasound and UNICEF has promised to provide ultrasound machine. EHSAR Foundation informed the forum that 30th September 2012 is the last working day of DTC Pabbi, they further informed the forum that MS Pabbi visited the DTC and keeping in mind the patient flow the MS decided that he is going to write a letter to WHO for a further extension. They thanked WHO for provision of medicine. CAMP organization informed the forum that their CAMP 1 health post to resume services from 1st of October 2012. Helpage International shared the progress data of the eye camp So

far they have conducted total OPD 2479, Surgeries. 115, medicine provided to 2004 patients, Vision glasses provided to 1466 patients, Dark glasses provided to 118 patients and 29 wheel chairs are provided. They further informed the forum that they are arranging training on Age friendly PHC on 3rd and 4th October 2012 and requested the health partners to nominate 30 participants, the participants should include doctors, LHVs and dispensers.

EHE Interventions:

WHO supplied 1000 Hygiene kits to MERLIN in Jalozai camp which will further be distributed among IDPs after proper counselling and sensitization.

WHO held coordination meetings with WASH partners (BEST & SEED) replacing HRDS in the camp. BEST will be responsible for Phase 6 & Phase 5 (Sectors A to F) and SEED will be responsible for Phase 4 & Phase 5 (Sectors G to K). SEED informed WHO that they had started their hygiene activities from 21st of September. SEED requested WHO to provide them with Water Testing Kit (WagTech), Jerry cans & hand washing soaps.

WHO offered SEED to provide on job training to their water quality analyst on water quality testing and an on job training to their tube well operator on chlorine solution preparation.

WHO held coordination meeting with IRC in the camp. IRC updated WHO that flash flood damage assessment had been completed and sectorial committees had also been formed including Shura members so that any gaps left out can be filled and each and every affected IDP should be compensated in terms of food as well as NFIs.

WHO held coordination meeting with SSD (WASH partner) and asked them to quickly resume all of their temporarily suspended activities (for almost 20 days) in the camp, especially hygiene promotion and water quality testing.

WHO tested 22 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 1023 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 6 samples for microbiological contamination and all samples were found fit for drinking with no contamination. So far WHO has tested a total of 252 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.

B. Togh Sarai" IDP camp, Hangu district

1159 families with 5821 individuals are residing in IDP camp. The curfew has been imposed in district Hangu due to security and kidnapping. 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.

WHO delivered 2 EHK delivered to CERD for use at Togh Sarai sufficient for 12000 populations.

09 out of 18 health facilities reported to WHO via e DEWS. There were 632 consultations provided through partner organization, including other acute diarrhoea (16.5% or 104 cases), acute respiratory infection (14% or 88 cases), also skin infection (2% or 11 cases) and suspected malaria (2% or 13 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

Updates on IDPs of South Waziristan Agency: Government sponsored rehabilitation of IDPs of SWA in D I Khan & Tank on 24th September started & a total of 721 families returned to S. Waziristan in three days. A total of 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 Rogha, Kotlay and Shaur areas of South Waziristan. The registration of the returning families continued from Sept 12 to 14.

On Wednesday, special functions were held at Kawar IDP Camp Centre in Tank and Rata Kulachi Stadium Camp in D I KHAN.

WHO attended weekly coordination meeting with EDO Health & Deputy EDO Health to present & discuss the weekly disease trend reported through e DEWS. The EDO Health also discussed the exit of UNFPA & working modalities of other Humanitarian partners i.e. MdM-F and PRCS with WHO. WHO participated in a meeting between EDO Health & SEED organization and witnessed the signing of MOU between Health department & SEED. The later will rehabilitate WASH infrastructure in 07 BHU s identified by Health department. SEED is implementing partner of UNICEF.

A proposal was submitted by PEI (Poverty Eradication Initiative) representative to EDO Health for supporting and launching of a project in D I KHAN.

WHO received and responded 03 alerts of Measles & 02 alerts of NNT. WHO provided on job training on e DEWS & DEWS alerts to staff of health facility during visit to Paroa, Ramak & Pusha Pul as response for Measles alerts.

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 871 consultations received through Save and Serve organization. Acute respiratory infection is the highest cause of morbidity (33.4% or 291 cases) of total consultations; other acute diarrhoea (11.3% or 98 cases); suspected Malaria (3% or 24 cases); skin infection (8% or 70 cases).

F. Situation in Kohat district

WHO provided 10 Insulin 70/ 30 on request of DMS LMH Hospital from KDA (DHQ) hospital district Kohat. 23 out of 43 health facilities in district Kohat provided eDEWS data to WHO.

eDEWS:

KPK eDEWS:

- 327 reports were received reporting 108,484 patient consultations in 16 districts of Khyber Pakhtunkhwa Province. Acute respiratory infections are the highest cause of morbidity (19.2% or 20,862 cases) showing

1.5% increase in percentage; other acute diarrhoea (9.6% or 10,401 cases); skin infection (2.3% or 2,444 cases); suspected malaria (2% or 1,959 cases).

FATA eDEWS:

- 19 reports were received reporting 5,274 patient consultations in 1 agency of FATA. Acute respiratory infections are the highest cause of morbidity (13% or 678 cases) showing 1.4% increase; other acute diarrhoea (10% or 520 cases); skin infection (2% or 107 cases); suspected malaria (10% or 519 cases).

Alerts:

- WHO received and responded a total of 60 alerts including 03 outbreaks. Out of these alerts 43 were measles, 08 were AWD, 02 were NNT, 01 was Pertusis, 01 was Leishmaniasis, 01 was Diphtheria, 01 was typhoid fever, 01 was VHF and 02 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 387 patients were consulted at DTC center, out of these 257 were of type A, 130 were of type B, 00 was of type C.

Health Promotion Activities:

- WHO conducted 2 days training on WHO Health Promotion Guidelines in Peshawar. Health staff of UNHCR implementing partners participated in the training. Out of **total 23** participants, 7 doctors, 7 LHVs, 2 nurses, 1 Master trainer, 1 community outreach worker, 1 community mobilization officer, 1 MCH supervisor and 1 HIS officer from FPHC, CWS, Union aid, AHTP, Save the Children and PDH were trained on WHO health Promotion Guidelines.
- WHO conducted 2 days training on Health Promotion was conducted for community staff from UNHCR's implementing partners like, FPHC, union aid, IMC, CWS AHTP and PDH. Out of **total 21 participants**, 18 were community health supervisors, 1 LHV, 1 vaccinator and 1 was community activist/ volunteer.

Essential Medicines:

- WHO conducted a total of 07 monitoring and 01 follow up visit in districts Lower Dir, D.I. Khan, Tank and Bannu. During monitoring visits gaps regarding irrational use, storage of essential medicines, record keeping, safe disposal of expired drugs and stock outs identified generally.
- WHO conducted two capacity building workshops on "Essential Medicines Management" held at PC and Shelton house, Peshawar. In which 67 participants from IPs of UNHCR, DOH, PPHI and IMC near to Afghan Refugee camp were trained on Good Prescribing Practices, Good dispensing Practices, Good Patient Counselling, Interventions to improve RUM, Rational treatment process and Management of Medicines.
- WHO conducted 05 coordination meetings with different stakeholders including EDOH, coordinator National Program MNCH, RBM supervisor, DGHS KP in which management of key essential medicines, Supply chain Management, transportation of reserve stock of DTC from D.I. Khan, Gelofusine for Dengue affected area, Irrational use of medicines, Pharmacy standard at facility levels and AWD outbreaks discussed.
- WHO responded 21 Leishmaniasis cases, 2 AWD alerts and Diphtheria alert at Bannu, Nowshera, Swat and Mardan by providing Meglumine Antimoniate Injections to Leishmaniasis cases and ADS to Diphtheria patient.
- WHO delivered 25 vials of ADS (sufficient for 5 patients) to swat, 500 Gelofusine infusions (sufficient for 500 patients) to DGHS KP, 300 Meglumine Antimoniate Injections (sufficient for 60 patients) to Merlin for RHC D.I. Khel and 1 DD Kit without ringer lactate infusions (sufficient for 500 patients) delivered to Ehsar Foundation for DTC, Pabbi.

WASH:

District Peshawar:

- WHO held meeting was held with IDEA organization regarding training of their staff working for Bara IDPs in Peshawar on water quality testing and hygiene promotion. WHO conducted meeting held with Ex. 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. Alert out break response items including jerry canes and hygiene kits distribution plan was approved by DG and these items have been dispatched further to the districts.

District Charsadda/ Swabi:

- WHO visited THQ hospital Shabqadar, THQ hospital Tangi and RHC sherpao. The hospital management requested WHO for urgent support of HCWM items, waste disposal unit (drum incinerator) and disinfectant supplies for improving the hospital hygiene and control of hospital acquired infections.
- WHO provided 10,000 aqua tabs, 5000 pur sachet each and 500 hand washing soap to both health facilities. Water quality samples from both the hospital were tested for faecal contamination and were found satisfactory. The staff was trained on manual chlorination with 5 kg HTH initially provided for cleaning and disinfection activities.
- WHO organized coordination meetings with Executive Engineer Offices PHED, WHO requested PHED to nominate two persons for water quality monitoring training from these districts and joint operation plan for optimal use of water testing equipment recently handed over to each sub division of PHED in KPK by WHO Peshawar office. PHED agreed to provide nomination and training schedule for the staff with update on distribution of color comparator kits for residual chlorine monitoring to targeted tube well staff.
- WHO collected and tested 7 water samples from different locations in Yar hussain, Jhunda and Pajman village. 14% 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. The targeted contaminated dug well was manually disinfected with 70% chlorine in collaboration with PPHI and PHED staff District swabi.
- WHO made follow up visits to AWD affected areas of district swabi including village Pajman, UC Yar hussain, and village Jhunda. The situation was found satisfactory with no new cases of acute diarrhea and 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 facilitated a health promotion session held after Jumma Prayer in these areas.
- WHO visited shah Mansoor complex swabi, civil Hospital Kabgani and RHC Yar hussain. The staff was on-job orientation on proper waste disposal and operation of biomedical waste and drum incinerators installed at these health centers. The waste management staff was provided with safety boxes, protective gloves, face masks and supplies of 2 kg HTH for routine disinfection.
- WHO monitored Residual chlorine at 05 location including MC1, MC2, old city area and college road tube well schemes during Epi wk-39. All the samples were found with residual chlorine in 0.2-0.5 PPM range. Additional supplies of liquid chlorine (sodium hypochlorite 20%) are urgently needed for regular operation of auto-chlorinators installed by WHO on these schemes.

District Mardan:

- WHO conducted coordination meeting with SDO and Sub Engr. PHED Mardan held in PHED office Distt Mardan on 25th Sept 2012, during meeting WHO requested to nominate staff to be trained for water quality testing.
- WHO team participated in UPEC chairman meeting for coming NID/SNID held in EDO-H office on 27 Sept 2012.
- WHO arranged two days detailed training sessions for PHED Mardan on 25-26 Sept 2012 on “Wagtech PotaLab”. Practical demos and water testing procedures for physiochemical and bacteriological water parameters have been conducted to 8 participants of PHED Mardan in which 2 persons nominated by XEN PHED were responsible for water testing using WHO provided testing Kits. Training session on chemical testing using Wagtech Potalab and Hanna ionic specific reagents will be carried out during next week.
- WHO facilitated one day training session on “Dengue” arranged by DoH held on 27 Sept 2012 in EDO-H office District Mardan; TMA, FPHC, HDF, AAP Ki SEHAT and PEACE participated in the training. During training participating organizations requested WHO for technical support to arrange detailed training sessions on Dengue

and other communicable diseases for their staff.

- Routine monitoring visits were conducted to DHQ Hospital and Mardan Medical Complex. During visits on job training of 10 health staff was conducted on alert/outbreaks response, health and hygiene.
- Total 5 alerts were reported during last week (1 Suspected Measles and 4 suspected AWD alert), all the reported alerts from the Distt 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 8 water sample were collected and analyzed for bacteriological contamination; hygiene kits, soaps, Aqua-tabs and ORS were provided to the affected families with detailed sessions to LHW's and community elders. 1 AWD alert reported from emergency unit DHQ Mardan was cross notified to WHO team Nowshera for field investigations.
- 5027 antibacterial soaps, 1800 IEC, 1 multipurpose waste trolley, 500 jerry cans, 350 Aquatabs and 3 hygiene kits were handed over to DoH and distributed during AWD/ measles alert response in Distt Mardan.
- **District Swat/ Shangla:**
- WHO responded to 7 measles alerts and investigated 1 diphtheria case of district Shangla in SGTH and ADS were provided to the patient. During Measles response health education was given to the community regarding vaccination and hand washing with soap. Total of 80 people educated and about 144 soaps were distributed.
- During routine water quality monitoring total number of 7 samples were tested and out of 7 only 2 samples were found microbiologically contaminated which is about 29%.
- WHO visited Saidu Group of Teaching Hospitals, CH Manglwar, BHU Charbagh, BHU Guali Bagh, CH Khwazakhela and THQ Matta . During visits WASH and Civil work at SGTH was monitored and HCWS was monitored in other Health facilities with Hospital Hygiene sessions within Health Facility. Hospital Hygiene sessions covering topics like “importance of vaccination”, “importance of Clean and safe drinking water”, “methods of water disinfection at House hold level” and “importance of Hand Washing with Soap” was conducted at each health facility level and total of about 130 people was educated in Hospitals.
- WHO conducted coordination meeting with SDO PHED Swat on 26th and 28th September 2012 in PHED office Swat and updates were shared.
- **FATA:**
- WHO facilitated and educated 25 individuals on “water born diseases and health” in a training session held on 26th September 2012. WHO also conducted on job sessions to residents, patients and their families regarding personal hygiene, household sanitation and communal hygiene to the dwellers of that vicinity in response to a Leishmaniasis alert reported from CH Jamrod Khyber agency
- About 465 antibacterial soaps , 1000 aqua tabs & 100 IEC materials were distributed to the community members in response to the measles cases reported from Mohmand and Khyber agencies.
- **District Lower Dir:**
- WHO held coordination meeting with EDO health, MS DHQ Timargara and MSF Belgium.
- WHO visited BHU shalkandai, RHC Lalqala, DHQ Timargara and Measles ward Dir lower. During routine monitoring visit WHO conducted on job sessions with the health facilities staff on health care waste management, infection control measures and guidelines for AWD response.
- Six water samples were collected from Timargara City bazaar near DHQ hospital and tested for pH, turbidity, Residual Chlorine and microbiological contamination. 5 out of 6 water samples were found microbiologically contaminated.
- 12 female hygiene kits, 6 collapsible jerry can, 72 soaps and 12 hygiene kits were provided to patients in measles ward.
- **District Kohat & Hangu:**
- On request of EDO-Health Hangu, WHO collected 05 water samples for microbial test from Hayatabad U/C Ganjeyano district Hangu. All water samples were found E. Coli free. The result was shared with concern communities and EDOH.
- 4,000 chlorine tablets were provided to TMA Hangu for distribution among the affected communities of Hayatabad union council Ganjeyano killi district Hangu.
- **District Haripur:**
- WHO investigated & responded to diseases Alerts/outbreak, during last week including DF outbreak at jolia , VHF alert at kangra and Enteric Fever at Kohala, in the district Haripur

- Awareness was raised in the community regarding vector 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 disease to the HF's 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 about the cases.
- WHO collected a total of 6 water samples for bacteriological analyses during alert investigation and HF monitoring, 60 % tested water samples were found with bacteriological contamination.
- WHO provided 5 hygiene kits, 72 antiseptic soaps, 3000 Aqua tabs 5kg HTH 70% and 10 IEC materials of different subject to community during alert investigation and response.
- WHO provided non formal training For capacity building on water quality monitoring to TMA KTS staff on September 26, 2012 and handed over 5 kg HTH 70% for disinfection of overhead tanks and chlorination.
- **District DI Khan:**
- WHO conducted meeting with EDO-H and SEED (NGO) representative, Project Manager for signing MoU. SEED will rehabilitate/improve WASH facilities in 7 BHUs identified by WHO. EHE will monitor their quality of work.
- WHO collected 6 water samples including 3 from BHU Zaffarabad and 3 from DHQ Hospital in which 4 contained minor bacteriological contaminations.
- WHO handed over 300 hygiene kits, 300 jerry cans, 54000 aquapura sachets and 112000 aqua tabs to EDO-H, D.I.Khan, 4800 aqua tabs and 1000 soaps to EDO-H Bannu and 5000 aqua tabs to PPHI Bannu.

Nutrition:

- WHO participated in 02 days Provincial Review for AusAid Project in Upper Dir Lower Dir , Kohistan and Buner districts. Progress in the districts presented by districts and provincial representatives.
- WHO provide 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.
- WHO conducted coordination meeting with Nutrition Cell regarding proposal submission and technical and financial reports of previous LoAs.
- WHO held coordination meeting with National Program for Family Planning and Primary Health Care for data collection.
- Total of **27** patients of severe acute malnutrition with life threatening complications were admitted in 8 Nutrition Stabilization Center with **22** patients were discharged, out of which **21** were cured **00** died, **00** were medically referred and **01** were defaulter cases.
- In Pabbi Hospital Nowshera, **three** new cases of children with severe acute malnutrition with life threatening complications were admitted in the hospital out of which 02 were cured and 01 defaulted.

District level coordination & monitoring:

Haripur: WHO visited 07 health facilities (DHQ, RC Sirikot, RHC Khanpur, BHU Tofkian, BHU GUDwalian, BHU Sarai Saleh, BHU Shah Muhammad, BHU Sikandarpur). WHO conducted evening meeting during the SIAD polio campaign in Haripur. ARI 22% 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 diarrhea 10% with 0% decrease compared to previous week and scabies 2% with 1% decrease in its proportional morbidity. WHO received and responded 10 alerts.

Mardan: WHO conducted WHO team participated in UPEC chairman meeting for coming NID/SNID held in EDO-H office on 27 Sept 2012. During meeting last SNID issues were discussed and suggestions for next SNID/NID were also shared by all participants. WHO has facilitated one day training session on "Dengue and Dengue Hemorrhagic fever" arranged by DoH held on 27 Sept 2012 in EDO-H office Distt Mardan; TMA Mardan, FPHC, HDF, AAP Ki SEHAT and PEACE participated in the training. During training participating organizations requested WHO for technical support to arrange detailed training sessions on Dengue and other communicable diseases for their staff. Routine monitoring visits were conducted to DHQ Hospital and Mardan

Medical Complex. During visits on job training of health staff was conducted on disease case definition, alert/outbreaks response, using different sampling medias and weekly eDEWS reporting. Total of 5 alerts were reported during week 39 (1 Suspected Measles and 4 suspected AWD alert), all the reported alerts from the Distt were jointly responded with DoH and PPHI, during response all the required interventions were carried out.

Lower Dir & Upper: WHO conducted coordination with EDO health, MS DHQ Timargara, MSF Belgium, Focal person DEWS and Focal Person National Program Dir lower. WHO visited BHU BHU shalkandai, RHC Lalqala, DHQ Timargara Dir lower, Measles ward Dir lower and TB control center. WHO provided on job training to health staff of BHU Shalkandai 1 Medical technician, EPI technician, and 1 LHV trained on DEWS. In upper Dir one army man and 14 insurgents killed after attack on Bind Dara security forces post from Afghanistan.

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: DPEC meeting conducted on 25th Sept 2012. WHO participated in the meeting. WHO conducted meeting with Team leader Polio Dr Obaid Ul Islam on 25th Sept 2012. Matter of concern was geographical identification of risk prone areas for possible polio transmission. WHO held meeting with EPI coordinator on 25th Sept 2012. Matter under discussion was to sort out ways to strengthen EPI coverage in the district. It was also known that vacant EPI posts have been handed over to the information department for advertisement. WHO conducted meeting with MS DHQ for supplies of I/V fluid for a possible AWD outbreak. It was known that capacity of the DHQ needs to be increased in face of a possible outbreak. WHO conducted a trilateral meeting with EDOH, and DSM PPHI after DCO announced that the later officials will be part of Health decision committee for issues like immunization and response. The point of discussion was current outbreak of VPD's in the district. WHO visited DHQ Alpurai and BHU Katkoo, BHUMartung and CD Kotkay, BHU Shalizara, and CD Lelonai WHO received and responded a total of 02 alerts (Measles).

Swabi: WHO conducted a one day work shop on Zoonotic disease control organized by RI and technically supported by WHO held on 25th September 2012 at Live Stock Department Swabi. WHO conducted sessions on communicable disease, prevention and their proper reporting and notification to district health administration. 40 animal health workers were properly trained. Round 1 polio eradication activities were monitored by WHO Swabi. A ZCC coordination meeting was held at EDO office Swabi on 28 September 2012. Agenda of the meeting was nomination of 5 new UCs at District Swabi and also nomination of 1 Focal Person from Health Department for notification of disease. WHO visited 7 Health facilities. WHO responded 5 system Generated alerts.

Peshawar: WHO received and responded). WHO conducted coordination meeting with EDO-H regarding ongoing health intervention by various health partners. WHO visited 4 health facilities Infection Disease Hospital, LRH, City hospital and HMC.

Swat WHO received and responded suspected Measles. One suspected diphtheria also received the patient belong to Shangla. WHO conducted 06 monitoring visits to Saidu Group of Teaching Hospital, CD Shahdara, CD Rang Mohallah, CD Amankot, CH Manglawar, BHU Charbagh, BHU Gulibagh, BHU Bandai, BHU Baidera, BHU Dherai, CH Khwazakhela, WHO attended district Polio Control room meeting. DCO Swat chaired the meeting. Training session carried on ARI, arranged by Merlin WHO conducted eDEWS training session for the newly appointed staff of PPHI.

Manshera: WHO received and responded three alerts, two for suspected cases of Measles and one for suspected Dengue Fever from DHQ Hospital. Two cases of AWD became positive for Vibrio Cholera Inaba from NIH sent in previous week, one from Sheikhabad Camp and other case from Ghazikot village. Total 4 cases of Measles detected during 2 alerts response from field, one suspected case of Dengue Fever became negative from RDT WHO Visited to DHQ Hospital, BHU Sandesar, and BHU for alert response and disease surveillance. Decrease in reported cases of Diarrhoea and increase of ARI cases from DEWS reporting sites as compared to previous weeks.

Malakand: WHO conducted coordination meeting with EDO-H and EPI coordinator district Malakand regarding upcoming POLIO campaign arrangements in the District. WHO held coordination meeting with acting DSM-PPHI regarding false type B alerts from BHUs. WHO visited BHU Gunyar, BHU Kharki Dheri, BHU Haryan kot, BHU Garay, CD Saadullah Khan, CH Malakand and DHQ Batkhela. Data with OPD registers of these facilities were checked. Weekly data submitted by all 25 targeted health facilities (in a total of 41 facilities). WHO received and responded 5 Measles alerts. WHO responded 5 system generated alerts (3 of bloody diarrhoea and 2 of typhoid fever). None of these was a confirmed alert. Dengue awareness campaign arranged for the automobile workshops mechanics at Batkhela Bazaar. WHO conducted Dengue awareness sessions at Liaquat Paramedical Institute and at Rehman Paramedical Institute Malakand. WHO conducted eDEWS refresher training done for BHU Zngal Patay, Dargai.

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 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. WHO received and responded 3 alerts (AWD).

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 5 health facilities AHQ Ghalanai, RHC Yakaghund & BHU Yousaf Khel, BHU Lakaro, BHU Momad gat. WHO conducted coordination meeting with Agency Surgeon regarding progress of civil work on WHO warehouse. WHO provided 5000 detol soap, 400 hygiene kits, jerry canes & Aqua tabs at AHQ Ghalanai. WHO held coordination meeting with MS AHQ Ghalanai regarding proper utilization of environmental supplies. WHO received and responded to system generated alerts for bloody diarrhoea & typhoid fever. WHO provided on job training of BHU Momad gat staff on maintaining Measles line-listing.

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.

Logistic:

The following supplies were supplied from WHO KP warehouse to:

NOWSHERA	<u>LASOONA ORGANIZATION JALOZAI NOWSHERA</u> 300 Fuji soap (250gms), 2520 Dettol bath soap, 2 Hth chlorine 5kg bucket, 1 lime powder 5kg, <u>(MERLIN JALOZAI CAMP NOWSHERA)</u> 2160 Dettol Soap, 1000 Hygiene kits, 300 Meglumine Antimonite Injection. (CAMP ORG JALOZAI NOWSHERA) 1440 Dettol Soap. <u>EHSAR FOUNDATION DTC PABBI (NOWSHERA)</u> 1 DDT Kit without Ringers, 5000 Aqua tabs, 400 IEC Materials.	
DOH(H) DHQ (H) BUNER	5000 Dettol soap, 500 jerry cans, 1Multipurpose trolley, 1800 IEC materials.	
DOH(H) DHQ (H) MARDAN	5000 Dettol soap, 500 jerry cans, 1Multipurpose trolley, 1800 IEC materials.	
DOH(H) DHQ(H) HARIPUR	5000 Dettol soap .2400 IEC Materials, 1Multipurpose Trolley.	
DOH(H) DHQ(H) MANSHERA	5000 Dettol soap .2400 IEC Materials.	
DOH(H) DHQ(H) ABBOTTABAB	5000 Dettol soap .2400 IEC Materials.	
AHQ (H) KHYBER AGENCY.	600 Hygiene kits, 500 jerry cans,	
DOH (H) DHQ (H) D.I KHAN.	300 Hygiene kits, 300 jerry cans.	
HANGU TOGH SARAI CAMP	500 Hygiene kits, 500 jerry cans.2 EHK	
MATNI HOSPITAL PESHAWAR	1 Anesthesia equipment, 1 Autoclave large size, 1 Defibrillator cu-er , 4 M3 vital signs Monitor, 1 Plazma Freezer, 1 Sterilizers ,1 ultra sound machine + ups+printer.	

DOH (H) DHQ(H) KOHAT	300 Hygiene kits, 200 Jerry cans.
GHALANI MOHMAND AGENCY	400 Hygiene kits, 100 Antiviral Disinfectants, 5000 Dettol Soap 100gm, 300 Jerry cans.
DGHS PESHAWAR	500 Gelofusine.

WHO EHA KPK SitRep