

Highlights

- The development partners' forum held on 15 June and led by the Federal Minister of Health and WHO Representative in Pakistan focused on the health challenges and gaps in the current NWFP crisis. The main issues discussed included:

- the continuing influx of internally displaced persons (IDPs) and resulting pressure on existing health infrastructure in host districts,
- the resumption of services in health facilities,
- gaps in the health delivery system, and
- emergency response to increasing security incidences such as bomb blasts.

- Representatives from donor and UN agencies, officials from the federal and provincial health ministries, including the EDOs Health in NWFP attended the meeting.

- Health Cluster partners gathered on 16 June in Islamabad to map out a US\$ 3.25 million grant from DFID to strengthen primary health care services and referral hospitals.

- Provincial health authorities in Swat, Lower Dir, Buner and Shangla report that 27 of the 238 health facilities in crisis-affected areas were completely damaged and 59 partially damaged. Overall, 86 health facilities require rehabilitation and reconstruction.

- The NWFP Health Department is strengthening hospitals by increasing funds available for medicines, building up Accident & Emergency Departments in Teaching Hospitals and further reinforcing human resource and supplies for emergency services.



Save the Children started distribution of 1,000 baby kits among displaced families with newborns and infants on 11 June 2009. Above photo shows a young girl being treated by the doctor at Save the Children health clinic set up for IDP families living in the host communities in Minai village, Swabi.

IDPs Profile

As of 16 June, 4 188 466 IDPs are living outside the camps and 260 852 in the province's 27 camps. [Data from the Provincial Relief Commissionerate Emergency Response Unit, NWFP].

The total displaced population includes:

- 500 000 children under five,
- 600 000 women of childbearing age,
- 64 000 pregnant women,
- 6000 will deliver during the month of June, of which 900 are expected to require emergency obstetric care.

COORDINATION

WHO, UNICEF, UNFPA and 19 non-government organizations NGOs constitute the Health Cluster in Pakistan.

On 16 June, Health Cluster partners in Islamabad gathered to map-out a US\$ 3.25 million grant from DFID. Partners narrowed down their interventions from 6 to 2 areas: provision of primary health care services and strengthening of referral hospitals.

During the Provincial Health Cluster Meeting held on 11 June in Peshawar, partners discussed gaps, issues and constraints in the delivery of health services. A common concern raised was the shortage of medicines, health workforce and financial resources. The Director of Health Services reported that the Emergency Response Unit has received funds and that all EDOs will shortly receive enough resources to cover immediate needs. The Department of Health is in process to arrange staff from tertiary care hospitals.

Who, does what, where?

- The map Who, Does, What, Where updated as of 18 June is enclosed.

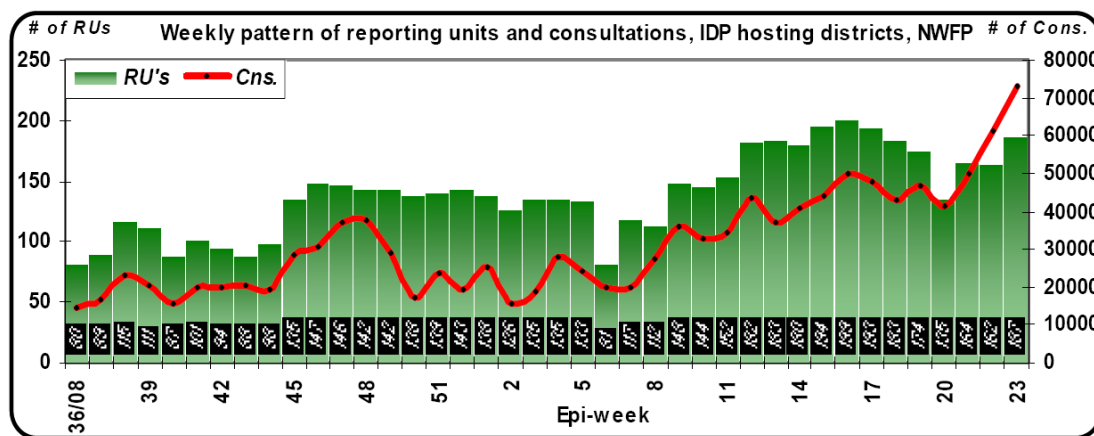
HEALTH ASSESSMENT

Disease surveillance

The total number of consultations has increased from 41 113 during week 20 to 72 829 during week 23. This is a result of the massive IDPs influx to hosting districts and in camps during the recent weeks.

Nineteen fixed health facilities in IDP camps, 12 mobile health clinics and 156 public health facilities in IDP-hosting districts shared the weekly reports in time for this week.

Due to the security situation, agencies in Lower Dir and Malakand have not provided any report for the last 4 weeks. Below is the pattern of DEWS reporting since week 36 of 2008 from IDP-hosting districts in NWFP.



Acute diarrhoeal disease (AWD) continues to be a challenge in IDP camps. High proportions of weekly consultations for acute diarrhoea were recorded in Jalozaï (4, 6 & 7), Palosa I, Mazdoorabad, Yar Hussain and Shah Mansoor camps. Although the proportion of consultations for acute diarrhoea remains high in Benazir Complex, Jalozaï 1, 3, Palosa 2 and Sheikh Yasin camps, the proportion has dropped compared to the previous weeks. In the rest of the camps, the proportion remained within the usual range.

The risk of diarrhoeal diseases outbreak in camps as well as in host communities remains very high with the fast approaching monsoon season. Health and WASH partners are jointly working to establish treatment centres in camps. Oral rehydration treatment ORT corners have already been established in the camps and diarrhoea treatment centres are also being established. As part of the AWD preparedness and response plan, capacity of the DHQ hospitals as the referral facilities for the severe AWD cases is being strengthened.

Causes on consultations	Consultations	Percentage
Acute diarrhoea	8783	12
Acute jaundice syndrome	25	-
Bloody diarrhoea	926	1
Respiratory tract infection		
Lower respiratory tract infection	2248	3
Upper respiratory tract infection	11630	16
Suspected malaria	997	1
Scabies	3105	4
Unexplained fever	3355	5

Needs assessment

Generally, critical environmental health needs include:

- ensuring safe water supplies
- provision of basic sanitation facilities,
- improvement of infection control systems in IDPs hosting districts health facilities;
- sustaining hygiene promotion efforts.

Poor hygiene practices and random open defecation are the greatest health risks facing IDPs. Sustained participatory community hygiene promotion campaigns should be vigorously pursued in all IDP camps.

Locations	Gaps	Comments
Yar Hussain camp in Swabi	2 desert coolers	For the new health facility
Jalala, Mardan.Merlin BHU	1 Tent	To be used for the waiting room
DHQ Mardan	Supplies for DTC	Urgently needed

FILLING GAPS

UNFPA continues to provide comprehensive reproductive health services in IDP camps and hosting districts. Last week, 9 child deliveries were conducted at UNFPA supported service delivery points in Pabbi, Jalozaï and Palosa IDP camps.

The medical consultations carried out by the **Pakistani Red Crescent Society (PRCS)** in 5 IDP sites (Sher Mansur in Swabi district; Rangmala and Pokhut in Malakand district and Khungi and Degree college in Lower Dir district) continue with ICRC support.

ICRC teams have carried out health assessments in the Swat and Upper Dir. In Swat, the overall humanitarian situation is dire, access to health care for the remaining population Mingora city is difficult. The ICRC team has evacuated six injured from Mingora to Peshawar. In Upper Dir, the population also suffers from an acute lack of access to primary and referral health care.

Save the Children emergency health programmes have now directly reached 7030 people through a combination of mobile clinics and support to government facilities in areas where there are large numbers of displaced families in Mardan and Swabi. Essential medical supplies are provided in the health facilities. Three health teams have been set up for out-patient dispensary services from midday until late in the evening at the following government facilities: Rural Health Center Amber/Kunda; Civil Hospital in Kalu Khan; and Civil Dispensary at Col. Sher Khan Village in district Swabi. Additionally, two mobile health teams are operating in Mardan providing out-patient services and life-saving drugs. The health teams have reached 1860 IDPs over the past three days.

On June 10, local health authorities asked Save the Children to support two additional Rural Health Centres in Toru and Shahbaz Gari in Mardan district.

Merlin continued health care provision for IDPs living in camps and with host communities in 3 districts - Nowshera, Mardan and Peshawar. Last week, its medical teams provided around 15,000 consultations. Merlin started the establishment of its fourth 24/7 static clinic in Jalozaï camp. In collaboration with WHO, Merlin is establishing an AWD treatment ward in DHQ hospital Mardan.

International Medical Corps (IMC) established a second basic health care facility in Yar Hussain camp and is providing services 24 hours a day, 7 days a week.

The Health Department in NWFP started strengthening hospitals by increasing medicine funds for emergencies in hospitals, strengthening of Accident & Emergency Departments in Teaching Hospitals and further strengthening of emergency services is currently worked on through human resource and supplies.

The NWFP Government was provided with essential medicine packages (who provided it? better not use passive form) for camps and primary health care facilities including BHU, RHC, THQ and DHQ. Medical

supplies for the month of June were provided to Merlin for Kacha Gari and Jalozaï 1, 2 & 3.

A cholera kit was provided to DHQ Mardan in response to the acute watery diarrhoea preparedness plan. One cholera kit is a complete treatment package for 100 severe cases and 500 mild cases.

Web links:

- **WHO HQ:** <http://www.who.int/hac/crises/pak/en/index.html>
- **Health Cluster Pakistan:** <http://www.whopak.org/idps>
- **Provincial Relief Commissionerate:** <http://www.helpidp.org>
- **Pakistan MoH:** <http://www.health.gov.pk>
- **WHO EMRO:** <http://www.emro.who.int/eha/pakistan>

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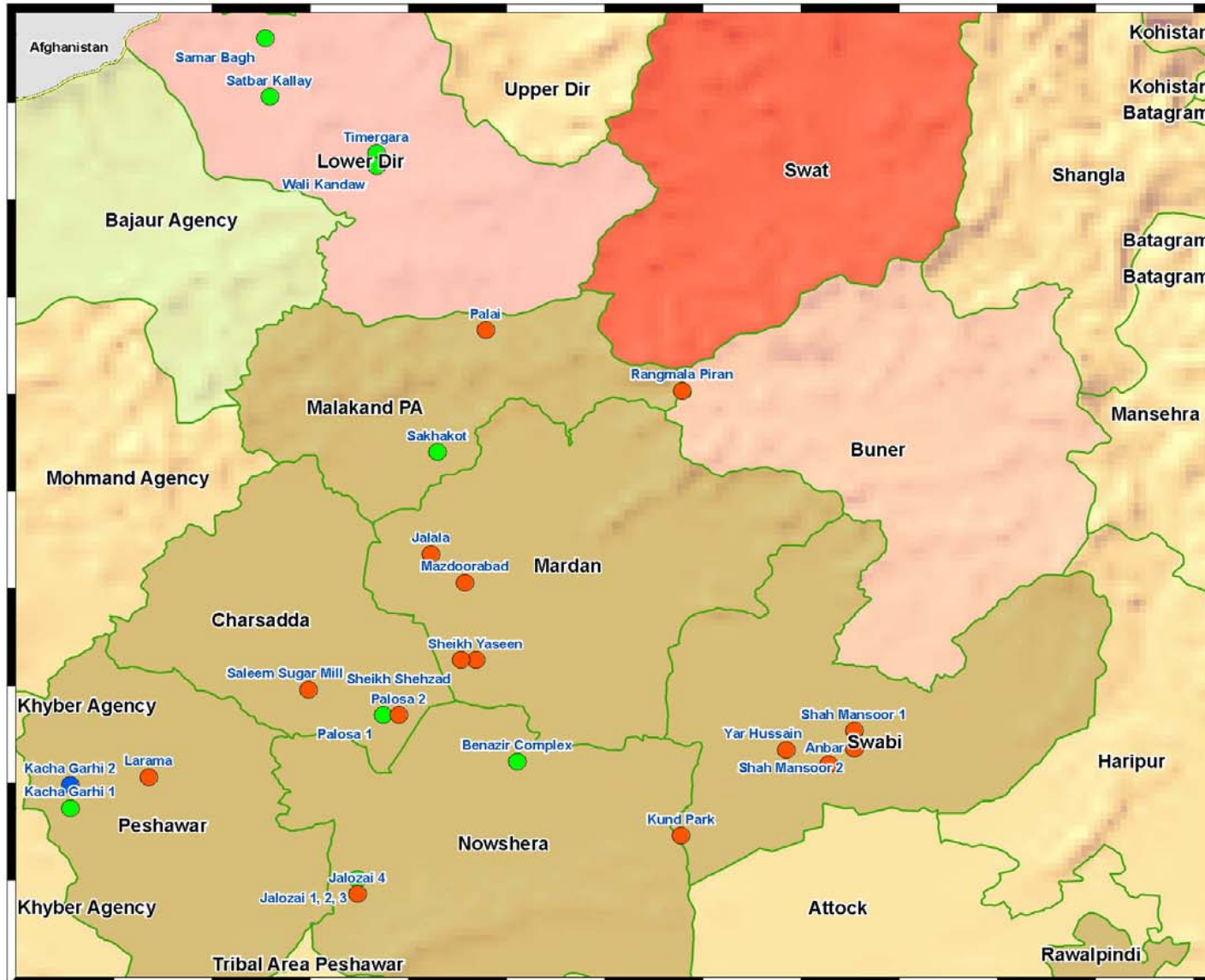
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Acronyms

AWD: Acute Watery Diarrhoea
BHU: Basic Health Unit
CD: Civil Dispensary
CERD: Centre for Excellence for Rural Development
DART: Disaster Assistance Response Team
DEWS: Disease Early Warning System
DHQ: District Head Quarter
DTC: Diarrhea Treatment Centre
DSM; District Support Manager
EMRO; Eastern Mediterranean Regional Office
ERU: Emergency Response Unit
FP: Family Planning
IEHK: Inter-agency Emergency Health Kit
HRDS: Human Resource Development Society
HTH: High test Hypochlorite
INGOs: International Governmental Organizations
LHV: Lady Health Visitor
LHW: Lady Health Worker
LSS: Logistic Support System
MCHC: Maternal Child and Health Centre
MEHK: Mini Emergency Health Kit
NIH: National Institute of Health
MNCH: Maternal, Neonatal and Child Health
NWFP: North West Frontier Province
MSU: Mobile Service Unit
OFDA: Office of Foreign Disaster Assistance
ORS: Oral Rehydration Salt
PHRP: Pakistan Humanitarian Response Plan
PIPOS: Pakistan Institute of Orthotics and Prosthetics Sciences,
PPE: Personal Protective Equipment
PPHI: People's Primary Healthcare Initiative
PRC: Provincial Relief Commissionerate
PWDs: Persons With Disabilities
RH: Reproductive Health
RHC: Rural Health Center
THQ: Tehsil Headquarter
WMO: Women Medical Officer

Pakistan: Who is doing What and Where (health sector)- North West Frontier Province



Sr	District	Name of IDP camp	Persons	NGO working in health sector
1	Charsadda	Palosa 1	2744	IMC, UNICEF, National Programs, WHO
2	Charsadda	Palosa 2	3867	Relief International, National Programs, UNICEF, WHO
3	Charsadda	Saleem Sugar Mill	2039	PPH, National Programs, WHO
4	Lower Dir	Samir Bagh	3861	AKHSHAI, National Programs, WHO
5	Lower Dir	Timergara	3357	UNFPA, National Programs, WHO
6	Lower Dir	Timergara	4853	PRCS/ICRC, National Programs, AKHSHAI, WHO
7	Lower Dir	Wali Kandaw	2857	National Programs, WHO
8	Malakand	Sakhkot	874	National Programs, UNICEF, WHO
9	Malakand	Palai	1173	National Programs, WHO
10	Malakand	Rangmala Piran	6525	National Programs, WHO
11	Mardan	Jalala	7229	Merin, PPH, Samir Umeed Islam, Rehman Medical Trust, Umrah Welfare Trust, WHO
12	Mardan	Mazdoorabad	4540	National Programs, CERD, MSF-B, UNICEF, WHO
13	Mardan	Sheikh Yaseen	10226	National Programs, PPH, FATA mobiles, WHO
14	Mardan	Sheikh Shehzad	8153	National Programs, Merin, Frontier Foundation, Umrah Welfare Trust, WHO
15	Nowshera	Benazir Complex	2550	PRCS, UNICEF, National Programs, WHO
16	Nowshera	Jalozai 1, 2, 3	49591	Merin, UNICEF, National Programs, CAMP, WHO
17	Nowshera	Jalozai 4	27103	Merin, UNICEF, PPH/UNFPA, WHO
18	Peshawar	Kacha Garhi 1	8550	Merin, National Programs, UNICEF, Health Society, WHO
19	Peshawar	Kacha Garhi 2	5466	Merin, National Programs, UNICEF, CERD, WHO
20	Peshawar	Larama	4276	PPH, National Programs, WHO
21	Swabi	Shah Mansoor 1	12754	PRCS, National Programs, WHO
22	Swabi	Shah Mansoor 2	8350	PRCS, National Programs, WHO
23	Swabi	Anbar	2500	PPH, National Programs, Liaison Medical Trust, Umrah Welfare Trust, WHO
24	Swabi	Yar Hussain	31903	PPH, IMC, National Programs, WHO
25	Swabi	Kund Park	4900	Mobile, PPH

Sr	District	IDP/Other	Mobile Clinics	Partners
1	Mardan	2,043,072	26	Merin, NCHD, Islamic Relief, Dakh Punjab, WHO, UNICEF, CORF, PPH
2	Swabi	607,046	5	Save the Children, Ayub Medical Complex, ARC, IMC, UNICEF, CERD
3	Charsadda	219,402	2	IMC, WHO
4	Lower Dir	51,889		
5	Nowshera	196,940	2	Merin, Liaison Med. UNFPA, WHO
6	Peshawar	450,089	4	PPH, MSF, WHO
7	Mansehra/Attock/Dir	46,219	1	Church World Service, WHO
TOTAL		3,679,668	40	

Legend

- Bajaur/ Mohmand
- Bajaur/ Mohmand/ Swat
- Swat/ Buner/ Dir
- District boundary
- Other Districts
- IDP Hosting Districts
- Military Operation in process
- Military Operation in some areas
- Military Operation completed
- Neighbour country