

Solomon Islands Flash Floods

Health Situation Report No. 5

13 May 2014



This Situation Report is issued by the World Health Organization-Solomon Islands Country Office and highlights the health update related to the flash floods in Solomon Islands on 3-5 April 2014. This covers the period 24 April to 11 May 2014. Data provided is based on the information gathered within the reporting period.



National Surveillance Coordinator Cynthia Joshua trains Nurse Rose from Turarana in Early Warning Disease Surveillance. Photo: WHO/ARonsse



WHO staff continue to strengthen and expand the Early Warning Alert and Response Network (EWARN), travelling to remote areas of GP, often only accessible by boat. Photo: WHO/ARonsse

Highlights

- An application has been prepared and submitted for the Central Emergency Response Fund (CERF). This is a stand-by fund established by the United Nations to enable more timely and reliable humanitarian assistance to victims of disasters and complex emergencies.
- Diarrhoea cases continue to increase in Honiara City Council (HCC) and Guadalcanal Province (GP) and influenza-like-illnesses (ILI) have increased in some areas of both HCC and GP.
- Dengue mosquito surveys are being conducted in 15 high transmission areas of HCC and GP to help determine the effectiveness of current vector control measures as well as providing clues on the current endemic vector/disease dynamic.
- The National Maternal Child and Adolescent Health Services is preparing to launch a Measles campaign in HCC and GP.
- An additional 28 beds have been added to the National Referral Hospital (NRH) in Honiara over the past week, increasing the total bed capacity to 330 beds.

UPDATES ON THE RESPONSE

CENTRAL EMERGENCY REPOSE FUND (CERF)

An application has been prepared and submitted for the CERF. This is a stand-by fund established by the United Nations to enable more timely and reliable humanitarian assistance to victims of disasters and complex emergencies.

To implement the recent Honiara/Guadalcanal Flash Floods Humanitarian Action Plan (HAP), programmatic and financial gaps had to be filled through the mobilization of resources and the development and submission of requests for funding, one of which was the CERF application.

The application encompassed the funding requests from the clusters and relevant UN agencies, including WHO, the lead agency of the Health and Nutrition cluster in the context of Pacific Humanitarian Team. It emphasized the deterioration of the situation and demonstrated that the interventions proposed for funding are lifesaving or time critical.

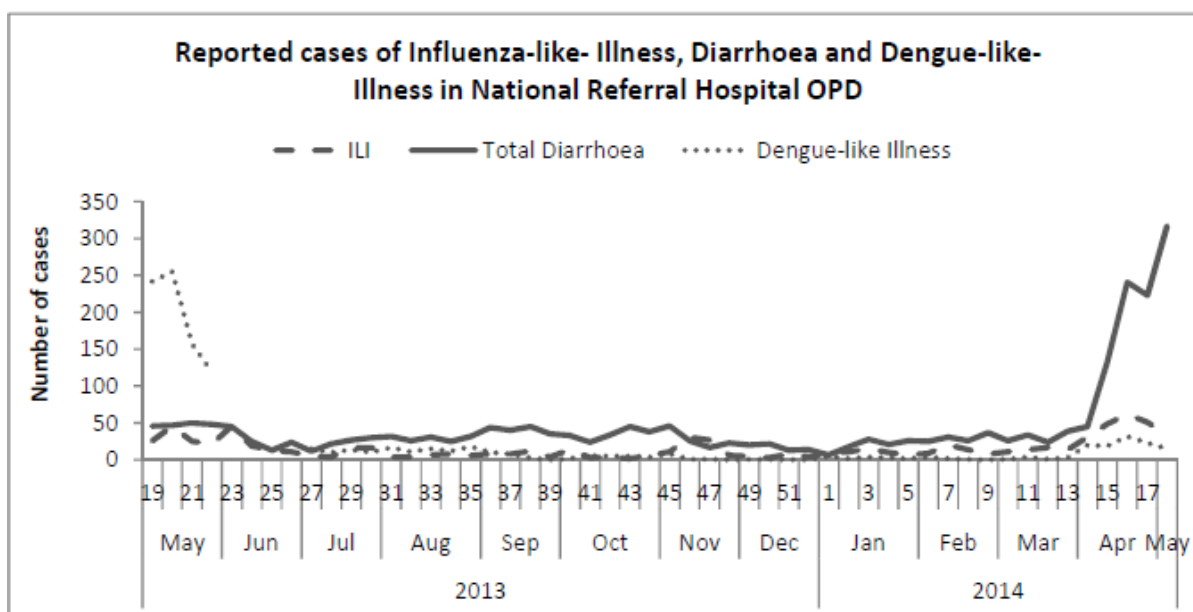
The CERF application has been through an extensive process of formal and informal iterations between the CERF secretariat and applying agencies to ensure that all agency projects fit into the CERF lifesaving criteria and are in line with the CERF rules, terms and conditions. The latest draft was submitted on Saturday 10 May and the application process is reaching its final stage.

DISEASE SURVEILLANCE

MHMS and WHO continues to manage the post-disaster early warning alert and response network (EWARN) throughout HCC and GP. The network was established to quickly identify and respond to disease outbreaks. The number of sentinel sites continues to grow with west GP completely covered. There are currently 16 sentinel sites in HCC and GP reporting data on eight diseases and syndromes on a weekly basis.

In HCC, the number of diarrhoea cases continues to increase despite a small drop at NRH one week ago. The number of watery diarrhoea cases remains stable in Kukum. The number of cases of ILI has increased in Naha and Kukum. The number of cases of malaria is above the number of cases collected last year in May in Naha, Kukum and Rove.

In Guadalcanal Province, the number of watery diarrhoea cases is still increasing in Good Samaritan Hospital and in Visale. The number of ILI cases has doubled in the last 2 weeks in Totongo and Tinaghulu.



NUTRITION

A full nutrition assessment of the transition centres was put on hold due to the relocation of the flood-affected population, closing down of the transition centres (TC) and the intense joint assessment to encourage people to return to their communities.

WHO conducted a one day training on MUAC (middle upper arm circumference) - a tool to assess malnutrition. Trained volunteers will now work with the Ministry of Health and Medical Services (MHMS) Measles campaign and assess the MUAC of each child vaccinated.



Volunteers are trained to use malnutrition assessment tools at a WHO lead training seminar.

Photo: WHO/KSmith

UNICEF and WHO are working together to prepare a Nutrition Assessment in the affected communities of HCC and GP. This is planned to commence in two weeks and will involve a questionnaire as well as anthropometric data collection to assess malnutrition.

WHO is working with MHMS and UNICEF to prepare guidelines, protocols and training on malnutrition at NRH. UNICEF plans to conduct a 6 month pilot for the assessment and treatment of malnutrition at both the clinical and community level.

VECTOR CONTROL

The Vector Borne Disease Control Program (VBDCP) continues conducting 'mosquito fogging' operations in Honiara and in some areas of GP in response to the increased numbers of dengue cases that have been recorded. Precautionary fogging is also being applied at the major TCs.

VBDCP staff and MHMS Health Promotion Department have been reminding the public that mosquito fogging operations are not harmful to humans; they 'knock-down' adult dengue mosquitoes that may be carrying the dengue virus.

Dengue mosquito surveys are being conducted in 15 high transmission areas of HCC and GP to help determine the effectiveness of current vector control measures, as well as providing clues on the current endemic vector/disease dynamic.

The distribution of long-lasting insecticidal bed nets have been completed in HCC and GP.



WHO Entomologist and Malaria Technical Officer Matthew Shortus instructs the Vector Borne Disease Control Program staff on mosquito fogging.

Photo: WHO/SKC

GOVERNMENT RESPONSE (HEALTH)

The National Health Promotion Division (HPD), Honiara Health Services HPD and Guadalcanal Health Services HPD, supported by partners, continue to extend their program and coverage to the affected communities in HCC and GP. This includes the NRH Emergency Department where the cases of diarrhoea and ILI continue to rise.

National Maternal Child and Adolescent Health Services is preparing to launch a Measles campaign in HCC and GP.

The Reproductive Health Division, with the support of partners, is planning a Minimum Initial Service Package for Reproductive Health (MISP).



The National Health Promotion Division has extended its activities to the Emergency Department at the National Referral Hospital, where the cases of diarrhoea and influenza-like-illness continues to rise. Photo: WHO/SKC

HONIARA CITY COUNCIL (HCC)

The Honiara City Health Services, with the support of partners, continues to deliver services at the remaining TCs. However, an increase of people attending the health facilities has shifted the focus from the TCs to the health facilities.

The NRH Emergency Department continues to implement its triage system and has scaled up sanitation measures at the Emergency Department, including the installation of two porta-loos.

An additional 28 beds have been added to NRH in the past week, increasing the Hospital bed capacity to 330 beds.

GUADALCANAL PROVINCE (GP)

As of May 8, the Guadalcanal Health Emergency Operation Centre has further extended the coverage of their mobile health teams to hard-to-reach areas of Guadalcanal.

WHO RESPONSE

The World Health Organization supports the MHMS at the central and provincial levels to coordinate the health response to this emergency.

WHO technical specialists have been working with the various departments of the MHMS in the areas of preventive and curative services, health cluster coordination, public health, vector control, nutrition, maternal and child health, strengthening surveillance systems, water and sanitation, conducting risk assessments, and health promotion

WHO continues to collaborate closely with development partners and the donor community to support the MHMS in both the initial response as well as health system recovery stages.

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