



FMTs treating injured in tent in Gorkha hospital



**4.2 Million
AFFECTED**



**88 482
DISPLACED**



**21 925
INJURED**



**8659
DEATHS**

KEY HIGHLIGHTS

- The repeated earthquakes and aftershocks since 25 April 2015 have had a major public health consequences, with a total 1085 health facilities (402 completely and 683 partially) damaged.
- A total of 2088 people have undergone major surgeries and 26 160 have received psychosocial support in the highly affected 14 districts.
- Nepal's Ministry of Health and Population (MOHP) identifies 429 patients in Bhaktapur, Kathmandu and Lalitpur who require longer term treatment support.
- 42 Foreign Medical teams (FMTs) are operating in the country with a total 802 persons including 264 doctors and 236 nurses.
- Currently there are over 100 beds available for patients requiring ongoing rehabilitation or nursing care within the Kathmandu valley.

SITUATION OVERVIEW

Situation update

- According to Camp Coordination and Camp Management Cluster a total of 88 482 people have remained displaced in 373 sites in 12 of the 14 highly affected districts (information on displacement from Dolakha and Rasuwa is still awaited).
- As of 26 May (13:00 local time), the Government confirmed that 500 717 houses were destroyed and 269 190 are partially damaged. The total number of casualties now stands at 8659 (4771 female; 3887 male; 1 unidentified) and 384 people are missing.
- The consequences for health infrastructure and public health have been significant, with a total 1085 health facilities (402 completely and 683 partially) damaged in the earthquakes. The majority of the damaged facilities are the primary health care centers, village health posts and birthing centers.
- MOHP identifies 429 patients in Bhaktapur, Kathmandu and Lalitpur who require longer term treatment support and more than 250 who need longer term rehabilitation support. The need in other districts is being identified by MOHP jointly with Injury Rehabilitation sub cluster.
- MOHP has intensified disease surveillance monitoring in each of the 14 highly affected districts. Since the first quake there has been no confirmation of disease outbreaks in the affected districts. All affected districts have increased their vigilance and enhanced surveillance for the prevention and control of potential disease outbreaks. Rumor verification and rapid response teams are already in action.

- Health Emergency Operation Center (HEOC) on 22 May 2015 reported that a total of 103 686 people have received medical attention, including 2088 have undergone major surgeries and 26 160 that have received psychosocial support in highly affected 14 districts, the details given in the table below:

Major surgeries and psychosocial counselling					
Districts	Served on 21th May		Cumulative		Earthquake injured persons treated as of 15 May 2015*
	Major surgeries	Psychosocial counselling	Major surgeries	Psychosocial counselling	
Bhaktapur	4	0	479	14	23 054
Dhading	0	29	14	657	1753
Dolakha	NA	NA	131	22	1002
Gorkha	0	0	49	19468	3941
Kathmandu	33	NA	NA	NA	19657
Kavre	11	NA	565	NA	11754
Lalitpur	8	NA	653	NA	2987
Makwanpur	0	0	0	0	2886
Nuwakot	0	NA	135	NA	5400
Okhaldhunga	0	0	5	10	1046
Ramechhap	0	0	0	0	4612
Rasuwa	0	0	3	0	1109
Sindhuli	0	351	0	5323	3274
Sindhupalchok	3	46	54	666	21211
Total	59	426	2088	26 160	103 686

Note: * The number of injured persons treated as reported from districts from 16 May 2015 onwards might also include patients other than earthquake injured so 15 May is taken as a cut-off point.

Source: MOHP Situation Update 22 May 2015.

- A total of 141 registered foreign medical teams (FMTs) have been deployed over the last month to work in the earthquake-affected districts. Currently there are 42 FMTs operating in Nepal. The teams consist of 802 persons including 264 doctors and 236 nurses.
- 130 Health Cluster partners are currently working in the 14 most affected districts and are collaborating with Ministry of Health and Population (MoHP) to reach remote VDCs and to provide critical health care in previously unreached areas.

Public health concerns

- Population displacement, crowding, limited quantities of safe water, inadequate hygiene and toilet facilities, and unsafe practices in handling and preparing food are all associated with disease transmission. There is a risk of increase in communicable diseases, including diarrhoea, respiratory infections and mosquito-borne diseases particularly with the rainy season approaching soon.

Health needs, priorities and gaps

- The continuing needs for the health cluster include the management of post trauma cases, restoration of disrupted primary health care services, rehabilitation support to patients who were discharged from the hospital and preparation for the upcoming rainy season.
- There is heightened concern about the risk of outbreaks of communicable diseases, including water-borne diseases, vector-borne diseases and acute respiratory infections, in areas of overcrowding and where water, hygiene and sanitation (WASH) systems have been disrupted.
- There is concern of potential disruption to some patients' treatment for tuberculosis (TB) and other chronic diseases with many treatment centres being damaged in the

earthquakes.

- Effective communication through community engagement, promotion of hygiene, sanitation and desired behaviours for prevention of diseases needs to be in place as soon as possible.

WHO action

- On 24 May 2014, WHO organized an orientation session to the district support team on various aspects of ongoing response coordination including the cluster mechanism, logistic management, flow of information from district to the central level and the vice versa.
- WHO in collaboration with World Food Programme (WFP), UNICEF, UNFPA and International Organization for Migration (IOM) has started assembling the Medical Camp Kit (MCK) from Bharatpur hub with the aim of resuming temporary health facilities in priority areas of the affected districts.
 - The MCK is a complete package of temporary tented facilities with essential equipment and supplies to begin primary health care services in areas where the health facilities have been completely destroyed.
 - WHO together with the MOHP has completed a joint prioritization exercise with the aim to help the Government of Nepal, WHO and health partners to prioritize health needs below the district level, target interventions, and improve the monitoring of the health response following the earthquakes. VDCs are ranked in priority order according to health needs.
 - In the first phase, ten of 50 MCKs will be installed by the first week of June 2015. A phased scale-up of support will then follow, with broader geographic distribution and more permanent structures established overlapping with the early recovery efforts.
- Orientation packages are being prepared for health volunteers to support their communication on prevention of communicable diseases of high concern such as acute, watery diarrhea. The key health messages will soon be tested and rolled out in 14 priority districts.
- Reproductive Health (RH) sub-cluster has been supporting OHP in identifying the needs in the affected districts. A one page checklist on reproductive health according to the Minimal Service Package (MISP) has been developed and uploaded on the Health Emergency Operation center (HEOC) website. The checklist will provide guidance to partners, including the Foreign Medical Teams to provide RH services as per the MISP standard.
- Mental health and psychosocial need mapping is being done for each district and the tool for the screening of mental health patients is being finalized.
- Injury rehabilitation sub-cluster assessed that currently there are over 100 beds available for patients requiring ongoing rehabilitation or nursing care within the Kathmandu valley.
- Injury Rehabilitation sub-cluster is working on a simple flow chart to help tertiary hospitals identify an appropriate facility for each patient based on his/her needs.
- WHO jointly with Department of Water Supply and Sewerage (DWSS) has been conducting water quality monitoring in highly affected districts. As a precautionary measure for possible contamination in water supply system, bleaching powder is being distributed to the affected districts.
- WHO delivered 5000 sets of hygiene kits to the highly affected districts as per the distribution plan.

Funding and Donor

Funding requirements: The first Strategic Objective of the UN Flash Appeal is to prevent outbreaks of communicable diseases and provide immediate access to health services. The

Information

Health Cluster component of the Flash Appeal plans to respond to the most urgent health needs of 4.2 million people. The funding requirements for the Health Cluster amount to US\$ 42 million including US\$ 11.8 million for WHO. As of 26 May 2015, the health component of the flash appeal is 21.4% funded.

Funding partners: WHO's humanitarian response to the Nepal earthquake has received support from the following contributors: Australia, Estonia, Finland, Norway, the Russian Federation, and UN Central Emergency Response Fund. Recently, the Royal Government of Thailand pledged US\$ 1 million to WHO for Nepal earthquake 2015 response.

Background of the crises

A 7.8 magnitude earthquake struck Nepal on 25 April 2015 (11:56am local time), with the epicenter at Barpak Village Development Committee (VDC) in Gorkha district – some 81 km northwest of the capital city, Kathmandu. There were continued aftershocks throughout Nepal, with one shock reaching a magnitude of 6.7 on 26 April at 12:54am local time. With the severe devastation of the earthquake, the Government of Nepal declared an emergency in the worst affected districts and requested for international humanitarian support on 26 April 2015.

A preliminary estimate indicates that more than 80% of houses in the 14 most affected districts¹ are severely damaged, creating huge mounds of rubble and debris impeding life-saving operations and access to affected areas. More than 25 hospitals and more than 900 smaller facilities, predominantly village health posts which supply basic medicines and other routine services in remote communities outside the Kathmandu valley, were completely or partly damaged in the earthquake.

A strong aftershock measuring 7.3 magnitude struck on 12 May at 12:50 local time. The epicenter was southeast of Kodari (Sindhupalchok District), 76 km northeast of Kathmandu – an area already affected by the 25 April quake. The initial quake was followed by several aftershocks including a 5.6 magnitude.

Contacts

1. Dr Frank Paulin
Acting WHO Representative to Nepal
Mobile: 9801010008
Email: paulinf@who.int
2. Dr Roderico Ofrin
Nepal Earthquake Response Coordinator
Email: ofrinr@who.int

¹ Bhaktapur, Dhading, Dolakha, Gorkha, Kathmandu, Kavre, Lalitpur, Makwanpur, Nuwakot, Okhaldhunga, Ramechhap, Rasuwa, Sindhuli and Sindhupalchok