

**HEALTH and NUTRITION SECTOR UPDATE
DADAAB REFUGEE CAMPS
5th November to 11th November, 2011
Epidemiological week 45
Update No. 17**

1. Highlights

- Despite the insecurity a mass campaign of oral polio vaccine in all under fives was conducted in all camps from the 12th to the 17th November (13th to the 18th in Hagadera). The campaign including supervision was supported by the Ministry of Health. Malezi Bora finished in all camps on the 11th of November. Malezei Bora and polio campaigns outcomes will be reported next week
- Continued reduction in number of measles cases reported with only 13 cases having rash onset in week 45. However there are concerns that there will be a resurgence of measles as the reception centres are closed and the high vaccine coverage previously achieved amongst new arrivals cannot be maintained.
- Cholera cases continue to increase in all camps. Many are being managed as outpatients. A request has been made through IOM to support additional supplies needed for cholera case management especially ORS, Ringers lactate and zinc sulphate.
- The situation in Ifo 2 remains serious but progress is being made by KRC. A ten-tent field hospital has been set up in section Q of Ifo 2 West. Outpatients and outpatient therapeutic feeding started from this site on the 18th of November. A perimeter fence will be built this week and some inpatient services and maternity, including night time services, will start soon after. It is expected that the KRC can start OTP from the former MSF clinic next week after MSF formalise use of their two facilities with KRC. A mass MUAC screening of under-fives is planned to start on the 21st. Seventy seven community health workers have been recruited and training will begin on the 22nd. (initial training will focus on hygiene promotion, MUAC screening and referral and mortality surveillance). The situation in Ifo 2 is mitigated by the fact that many refugees are seeking health and nutrition services in Dagahaley and Ifo. GIZ currently has 3600 children in OTP and Dagahely 3500 with many being from Ifo 2. The severity of malnutrition in Ifo 2 is shown by the fact that Ifo stabilization centre currently has 58

children admitted with 54 from Ifo 2 and Dagahely has 200 children admitted with 40% from Ifo 2.

- Some improvement in the mortality rates in Kambioos but they remain above the emergency threshold. Efforts are focusing on increasing numbers of qualified staff, coverage and quality of outpatient therapeutic feeding; access to health services for new arrivals; expanding hygiene promotion, community based management of diarrhoea and increasing latrine coverage. There are over 600 new arrivals in Kambioos who do not receive any official assistance. Advocacy with the GoK to reopen the reception centres and registration needs to continue.
- Reception centers and registration remain closed; relocation to Kambioos and Ifo 2 remains suspended.

i. Total population of registered refugees as of 30th October¹

Hagadera	Dagahaley	Ifo	Ifo 2	Kambioos	Total
140, 775	124,780	123, 085	71,734	10,483	470,857

ii. Number of new arrivals during the reporting period: No new arrivals registered as registration has been suspended

2. Reception Centre data

The reception centers have been closed during this reporting week

¹ The health statistics are generated based on the population of registered refugees

3. Mortality

Crude Mortality	Hagadera		Dagahaley		Ifo		Kambioos	
	Last month	This week						
Number of deaths /1000/month	0.2	0.5	0.3	0.3	0.3	0.1	NA	3.9 (1.3/10,000/day)
U5 mortality	Hagadera		Dagahaley		Ifo		Kambioos	
	Last month	This week						
Number of U5 deaths /1000/month	0.6	2.0	1.0	0.9	1.2	0.7	NA	10.7 (3.5/10,000/day)
Maternal mortality	Hagadera		Dagahaley		Ifo		Kambioos	
	Last month	This week						
Number of maternal deaths	00	0.0	0.0	0.0	1.0	0.0	NA	0.0

Comment: the crude and under five mortality rates in Kambioos have slightly decreased but they remain above the emergency threshold. A number of measures have been taken to address this (see page 1). Mortality data still not available from Ifo 2. Steps are being taken with Kenyan Red Cross to establish community surveillance in sentinel sites. The mortality rates in Hagadera have also increased. The majority of deaths were in children under five with 38% associated with watery diarrhea and 38% associated with lower respiratory tract infection. A training in community based management of diarrhea will be done this week in Hagadera. Mortality surveillance in Ifo and Dagahaley needs to be reviewed. The reported mortality rate is much lower than usual. Hospital deaths are being captured but very few community deaths. This is possibility related to a breakdown in community surveillance associated with reduced supervision at health post level.

4. Diseases of epidemic importance

i. Total number of cases of diseases of outbreak potential

	AWD	Bloody diarrhea	Meningitis	Measles	Malaria	AFP
Hagadera	419	1	0	4	1	0
Dagahaley	660	30	0	7	0	0
Ifo	30	6	0	3	0	0
Kambioos	106	4	0	5	0	0
Ifo 2	89	3	0	0	0	0

Comment: the number of cases of acute watery diarrhea is very high except in Ifo and Ifo 2. Some of this may be related to cholera. The majority of cases are in children under aged five. WASH agencies are planning to scale up hygiene promotion in response to the acute watery diarrhoea/ cholera outbreak. There has also been an increase in the number of cases of bloody diarrhea/ dysentery in Hagadera and Dagahaley. Due to the insecurity it has not been possible for Dagahaley to take stool cultures. Stool cultures have been taken from some cases in Hagadera.

Cholera cases continue (Figure 1). A total of 158 cholera cases line listed since August, using a limited case definition. Ten cases confirmed by stool culture as of November 11th. The cases have increased recently partly due to use of the expanded case definition. The onset of the rains and faecal contamination of surface water has likely contributed to the increased cases. The majority of cases are in under fives with very few cases in adults. Outbreak control meetings are occurring at least weekly in Ifo, Hagadera (also for Kambioos) and Dagahaley. Plans to improve the response include:

1. Continue to expand community based management of watery diarrhoea especially in Kambioos and Hagadera with support of UNICEF and MoH
2. Increase the number of hygiene promoters in all camps to acceptable levels (target 1 per 700)
3. Engage religious leaders, community leaders and health committee members in the outbreak control teams at camp level.
4. Increase water quantity in Ifo 2 west
5. Continue to monitor infection prevention measures in cholera treatment centres using checklist.
6. Establishment of a daytime cholera treatment unit in Kambioos

Measles cases continue to decrease following the mass measles campaign in September (Figure 2). No deaths occurring during the reporting week. Total of 1408 measles cases line listed since January 2011. 13 cases had rash onset this week.

Indoor residual spraying for **malaria** prevention by Mentor continues in ifo 2 west. Kambios spraying also started this week.

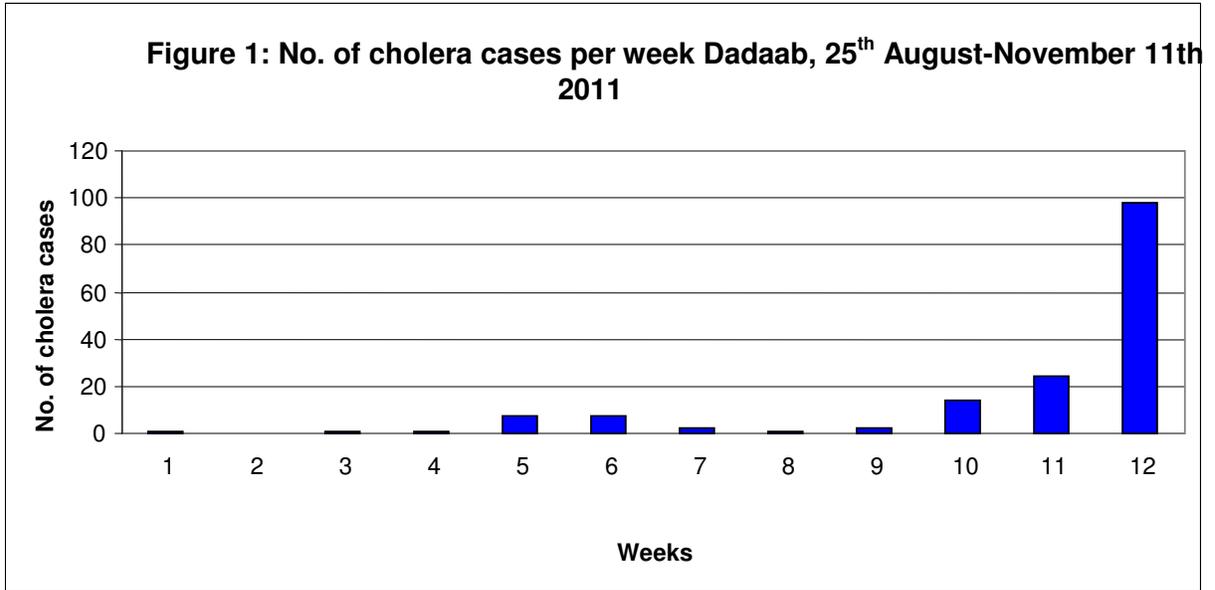
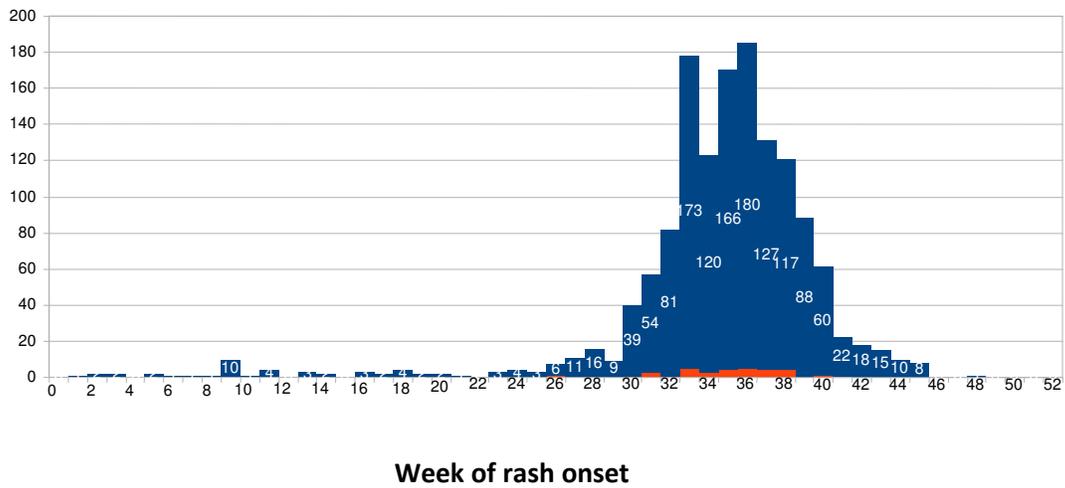


Figure 2 - Number of cases of measles per week Dadaab 2011



7. Key services statistics

	Hagadera	Dagahaley	Ifo	Kambioos	Ifo 2
Average number of outpatient consultations per day	515	421	235	116	302
Average number of daily new admissions	55	67	32	N/A no inpatient facility	N/A no inpatient facility
Average number of consultation per clinicians per day	103	38	47	0 as no full time trained clinicians in Kambioos	60
% of deliveries occurring in a health facility	91%	51%	92%	Not available	Not available
Number of new admissions to SFP	165	0	0	111	0
Number of new admissions to CTC	149	252	289	162	210
Average number of liters water per person per day	9l/p/d (outskirts)	15l/p/d (outskirts)	12.4l/p/d	18.8 l/p/d	9 liters (Ifo 2 West); 14 litres Ifo 2 east

Comment: There is a reduction in access to health services in Ifo. The average number of consultations per day is much lower than the other camps with a similar population. The number of admissions is also much lower. However admissions to OTP are high with many cases coming from Ifo 2. GIZ should explore ways to review the functioning of the health posts and conduct supervision. Ifo 2 West has markedly reduced water quantity available per persons per day. This is associated with difficulties of trucking water to sections of the camps due to the poor road conditions. Solutions are being sought by Oxfam. MSF Swiss needs to determine why there is a reduction in deliveries occurring at the hospital.

8. Services for survivors of sexual violence

	Hagadera	Dagahaley	Ifo	Kambioos	Ifo 2
Number of survivors of sexual violence seen	2	1	0	0	0
Number seen within 72 hours	1	0	0	0	0
Number who received appropriate care according to time seen	2	1	0	0	0

Comment:

9. Nutrition

i. Standard food ration being provided

New arrivals	New arrivals currently not being received or officially assisted
Registered refugees	General food distribution: 565 grams/person providing 2100 kcal/day for 30 or 31 days
Blanket feeding	Blanket feeding with CSB plus to all under fives continues.

Comment:

Kambioos refugees will continue to collect their ration from Hagadera. The last day of the food distribution cycle has been dedicated to Kambioos refugees. IOM will provide transport to and from Hagadera via bus. Information will be disseminated to community leaders.

Unsolicited donations of milk products continue to arrive in Dadaab including a large consignment of 10,000 litres of UHT (long life) milk. There are concerns about this being used as a breast milk substitute (even if the distribution is targeted to older children and adults experience from other settings has shown that it will be given to infants and young children). Furthermore milk is a very good culture medium for bacteria and the poor hygienic conditions in the camps mean the risk of bacterial contamination and subsequent diarrhoeal illness is very high. UNHCR will meet with WFP, UNICEF and DRA to decide how to best manage this.

10. Health facilities

	Hagadera	Dagahaley	Ifo	Kambioos	Ifo 2 East and West
Health and Nutrition agency	IRC	MSF Swiss	GIZ	IRC IMC will take over as of 1 st January 2012	Kenyan Red Cross
Hospitals	1 Fully functional includes stabilization centre	1 Fully functional includes stabilization centre	1 Fully functional includes stabilization centre	0 Refer to Hagadera – transport available 24 hours	0 Refer to Ifo – transport available during daytime establishing night time transport this week
Health posts	4 *only incentive staff	5 *only four opened with national and incentive staff)	6 *only incentive staff)	1 temporary clinic *incentive staff with national staff supervision)	2 temporary clinics *national staff) No SFP, ANC yet
CHWs	138 (1 per 1099) *Includes 10 seconded to Kambioos	104 (1 per 1200)	140 (1 per 880)	48 (1 per 209) *includes ten from Hagadera	40 (1 per 1793) *not yet trained
Hygiene promoters	67 (1 per 2143)	84 (1 per 1523)	77 (1 per 1646)	0	Ifo 2 East 6 (1 per 4595) Ifo 2 West 43 (1 per 865)

Comment: Health posts services in established camps have been severely curtailed except in Dagahaley. This has affected the access to and quality of services including reproductive health services at health post level. The number of community health workers needs to be expanded in Ifo 2. The numbers of hygiene promoters in all camps need to be increased, especially in Kambioos and Ifo 2 East.

11. Key activities

- Malaria case management training planned for the 22nd to the 24th in Dadaab. This will be conducted by the MoH with the support of Mentor Initiative for health services in the refugee camps and the surrounding host community.

For further information, please kindly contact:

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