



AUSTRALIAN AID INTERNATIONAL



Australian Aid International (AAI)
In Partnership with The Hunar Foundation
Public Healthcare Project in Response to the
Pakistan Floods
Sindh Province– Thatta District
FLOOD RESPONSE REPORT
November 2010



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1.0 OPERATIONS

Australian Aid International (AAI) and the Hunar Foundation along with local partner organisations are conducting a public health recovery program in the Thatta District, Sindh Province as a response to the severe flooding that has occurred in August and September 2010.

The Thatta District was assessed as one of the most affected and needy areas devastated by the flooding which destroyed large areas of the country. AAI has been conducting outreach mobile medical clinics integrated with Water, Sanitation and Hygiene (WASH) initiatives to restore water and sanitation infrastructure in villages affected by the flood.

The aims of the response are to support existing government institutions and to provide assistance to local health and community workers. These aims are being achieved through the provision of outreach and mobile medical clinics and WASH initiatives.

Locations for health activities have been assigned by the Executive District Officer (EDO) Health, Thatta District, in key regions where local medical professionals have been unavailable or overwhelmed, and with the intent to reduce loads on secondary healthcare facilities. Secondary healthcare facilities in the district are some of the most under resourced and under serviced in the country. The level of healthcare in these facilities is particularly low and local populations have lost confidence in receiving adequate levels of care within the local systems.

AAI and The Hunar Foundations are also developing the capabilities and capacity of local healthcare staff so that they can provide sustainable healthcare management within the community, thus minimising the need for outside intervention in the future. AAI and The Hunar Foundations strategic public health plan in conjunction with the United Nations Health and WASH Cluster is to continue operations in Thatta for an initial 3 month period.



Bridge to Sha Ali Shae village destroyed by the floods reducing access of the local community to services

2.0 OBJECTIVES

AAI and The Hunar Foundation Objectives

1. Increase access for vulnerable populations affected by the floods, targeting women and children, to curative and preventative healthcare services. Particular emphasis has been placed on early warning surveillance for diseases and capacity building of local healthcare workers in international disaster/refugee medicine.
2. Improve WASH at the village level through the provision of safe water supply activities, cultural appropriate latrine and bathroom construction, and hygiene and health promotion to community members – particularly women and children.

This report covers the period of November 2010 in which AAI and The Hunar Foundation conducted an emergency public health response in the Thatta District.

Map of Sindh Province indicating AAIs Area of Operations



2.1 Objective 1 - Curative and Preventative Healthcare Services

AAI and The Hunar Foundation conducted outreach and mobile healthcare clinics in collaboration with local partners utilising combined logistical, transport and personnel resources to conduct the healthcare clinics. During the month of November, 14 clinics were conducted with a total 755 patient consultations provided to local individuals.

AAI and The Hunar Foundation are identifying severely ill community members who have had limited access to regular government healthcare services and are providing curative healthcare. AAI is targeting children, pregnant and lactating women, the elderly, vulnerable groups and their families.

The most severe cases are treated and referred, if appropriate, however, AAI is placing more emphasis on preventative healthcare. Preventative health services include maternal and child healthcare activities as well as health promotional activities.



AAI have also partnered with Doctors Worldwide to provide healthcare services to needy populations

AAI project nurse, Emma Childs treating an infant with a severe respiratory infection

Capacity Building of Local Partners

AAI is training local partners in International Disaster Medical Management. The training of healthcare and community volunteers has focused on improving clinical, health promotional and organizational skills. The key areas of capacity building include:

Clinical skills/knowledge: Teaching and mentoring was conducted during patient consultations. Standard disease definitions were emphasized and reference was made to the Health Department Standard Treatment Guidelines and Integrated Management of Childhood Illness (IMCI) Guidelines. Local staff and partners conducted patient consultations under the supervision of the AAI healthcare team.

AAI Health Coordinator has conducted teaching and training with local nursing staff to increase knowledge in patient diagnosis and treatment as well as pharmacy education.

AAI has been working closely with community health volunteers to increase their capacity at AAI clinics. Community health volunteers assisted with patient registration, clinical observations and translation.

Reference tools/ resources: Local volunteers were trained in pharmacy management. AAI is developing pharmacy education quick reference charts so that all members are providing the same information to patients at clinics when dispensing medications. This is also a quick reference tool for any new volunteers, whom AAI supervises, as well as community volunteers.

Epidemiological Surveillance: Local staff are being skilled in data collection and surveillance as it is a main objective of every AAI clinic. Volunteers are also being trained in data analysis as well as response and control of infectious disease outbreaks.



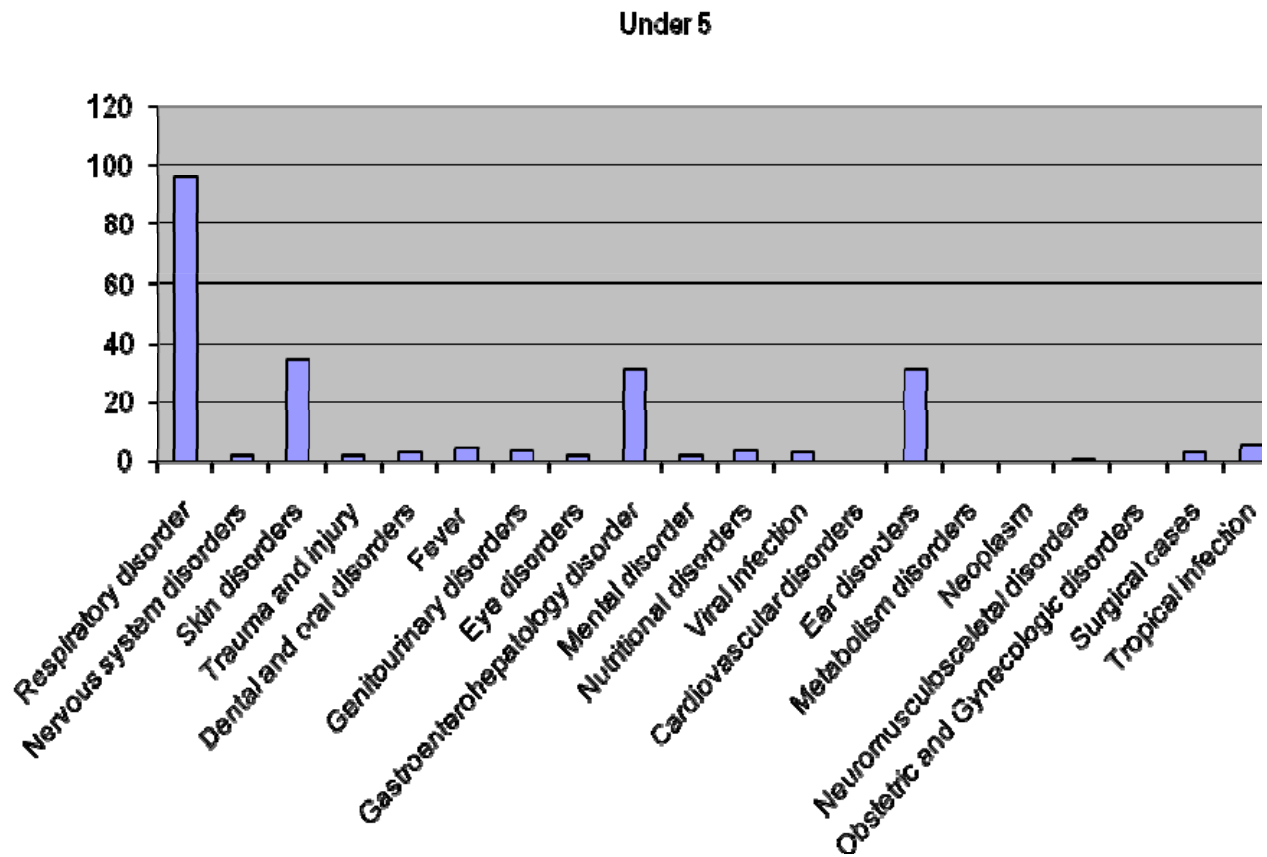
AAI local nursing staff assessing patients prior to consultations with the doctors



AAI project nurse teaching local healthcare staff about skin conditions

2.1.1 Health Surveillance Data

Figure 1. Clinic Diagnoses for November 2010 in Thatta, **Under 5 years** (n=233)



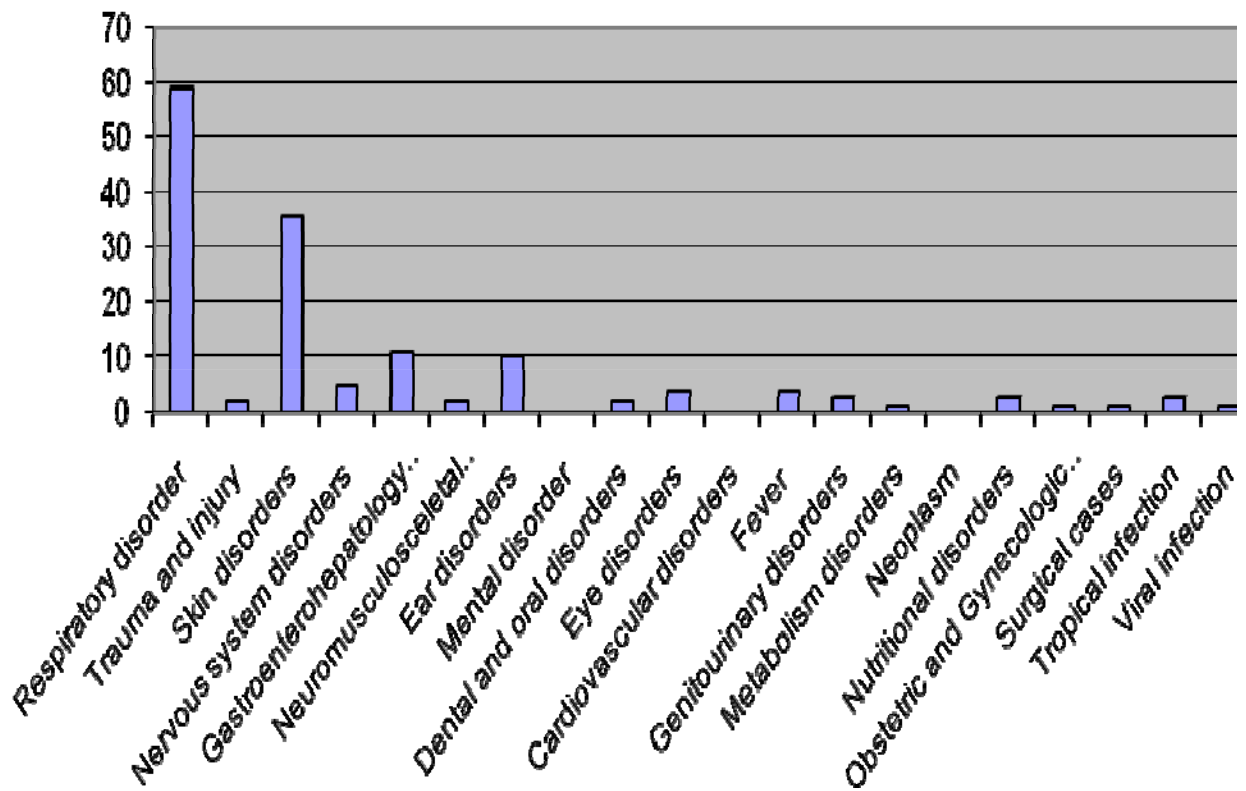
A total of 233 presentations in the 0-5 age group were seen in the month of November. Respiratory tract infections accounted for 42% of presentations, skin disorders accounted for 15% of presentations, gastroenterohepatology disorders accounted for 14% of presentations and ear infections accounted for 14% of presentations.



Mother and child waiting for consultation at a AAI outreach clinic

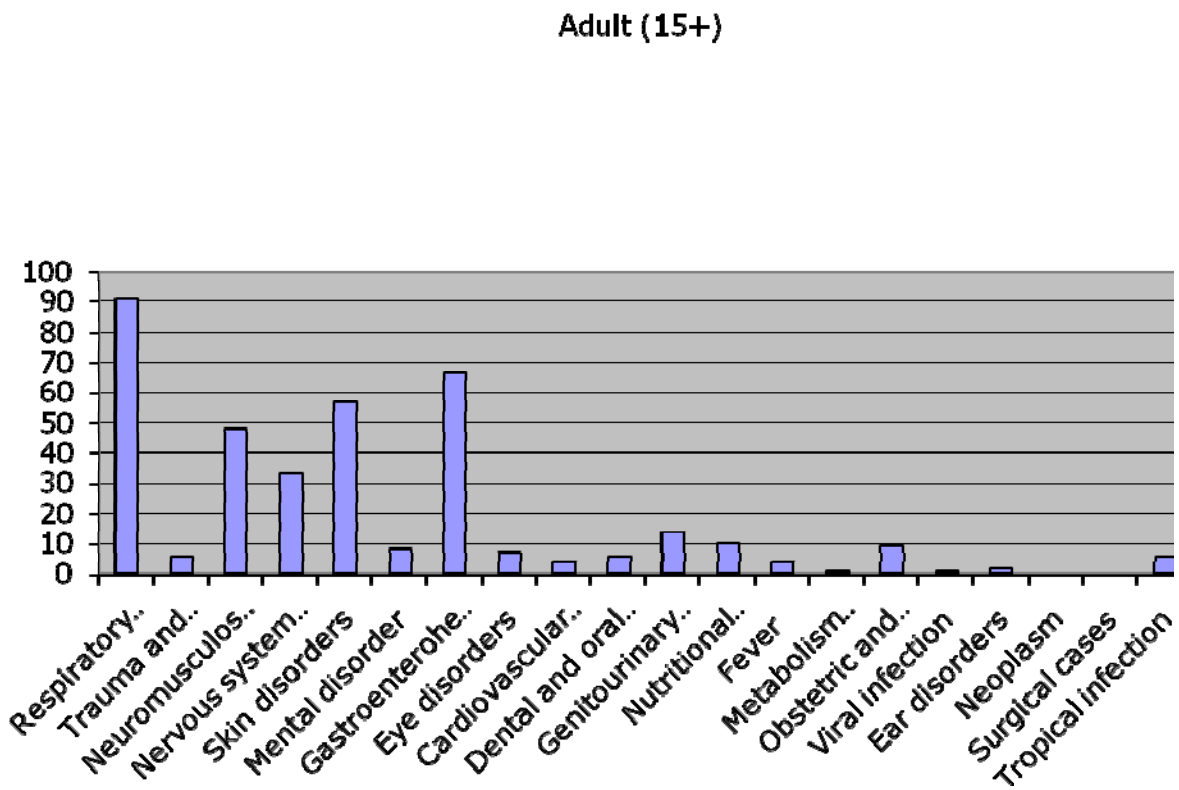
Figure 2. Clinic Diagnoses for November 2010 in Thatta, **Age 5-15 years** (n=148)

5 < 15



A total of 148 presentations in the age group 5-15 years were seen in the month of November. Respiratory tract infections accounted for 40% of presentations and skin disorders accounted for 24% of presentations.

Figure 3: Clinic Diagnosis for November Thatta, Age over 15 years (n = 374)



A total of 374 presentations in this age group 15+ were seen in the month of November. Respiratory disorders accounted for 24% of presentations, gastroenterohepatology accounted for 18% of presentations and skin disorders accounted for 16% of presentations.



Dr Rizwan from AAI's partner organisation conducts patient consultations at an outreach clinic

2.1.1 Pharmacy & Medical Supply

AAI and The Hunar Foundation have kindly received the necessary medical supplies for the outreach and mobile medical clinics from the Murshid Hospital in Karachi, Doctors Worldwide and long term international partner - Direct Relief International (DRI). AAI is most grateful for these very generous contributions of medical supplies that have allowed AAI to conduct healthcare activities. These supplies allow the most common conditions to be treated without referral to higher levels of healthcare; thus reducing the load on an already suffering existing healthcare system.

Due to minimal knowledge of medical treatment in the local population, AAI spends significant time with each patient to ensure that medical regimes are understood and those patients use the free medicine provided as directed. Patient education is a very important component of AAI's healthcare initiatives.

AAI received a significant medical and equipment donation, worth many tens of thousands of dollars, from long-term international partner organisation, Direct Relief International (DRI). These supplies will significantly aid in the delivery of primary health care to AAI's beneficiary population. Another shipment of supplies from DRI will be available to AAI in early December 2010. The Murshid Hospital will facilitate this shipment through customs. These supplies will improve the lives of many thousands of beneficiaries who have received little or no assistance from any organisation since the flooding occurred.

AAI is treating a large number of skin diseases at healthcare clinics, which is causing a shortage on specific medications. AAI's Health Coordinator, Penny Sizer, attended a health cluster meeting conducted by the local health district and the WHO and these coordinating bodies are aware of the situation. Unfortunately, the WHO has not been able to support AAI with any additional medications to date. The AAI Health Coordinator will continue to pursue this matter at the next health cluster meeting.



AAI Health Coordinator, Penny Sizer conducting patient triage prior to medical consultations



Dr Rizwan from AAI's partner organisations conducting patient consultations at an outreach clinic

2.2 Objective 2 – WASH Initiatives

AAI have commenced a significantly funded WASH project in partnership with the Gottfried Thoma - PTC Employee Benevolent Trust Islamabad. The first phase of the project has now been completed which included verifying WASH assessments and sourcing local contractors, organising material supplies and training local partners in community participation methodologies and hygiene promotion.

This project will significantly assist communities in the transition to recovery through the repair of damaged and destroyed village infrastructure.

The key results of the project will include:

- Selected returnees will have access to improved or safe drinking water through the repair of water points, installation of water storage tanks, shallow water hand pumps and provision of chlorine, buckets and jerry cans. This component will be 60% of the direct project activities.



Current drinking water sources in villages that AAI will rehabilitate to provide safe drinking water to communities

- Selected returnees will be provided with provided with access to sanitation facilities (latrines, bathing and hand washing points where appropriate). This component will be 20% of the direct project activities.

- Selected returnees will be provided with appropriate messages on improved and safe drinking water and appropriate hygiene practices, such as hand washing, through the provision of Information, Communication and Education (IEC) and interactive group sessions. Family hygiene kits will be distributed to the most in need families. This component will be 20% of the of the direct project activities.



One example of a poor quality polluted water source that affected communities are currently drinking untreated water from.

3.0 PARTNER ACKNOWLEDGEMENT

AAI continues to have the very generous support of many Pakistan nationals and local organisations and international partners. AAI wishes to acknowledge that the relief recovery operations have been a combined effort with both financial and human resource support from AAI partners.

AAI would like to recognize the contribution from the following individuals and organizations:

The Hunar Foundation – www.thehunarfoundation - For the strategic local partnership alliance and overall program support, including administrative, financial and staffing support.

Direct Relief International – www.directrelief.org – Long term international partner that provide AAI with essential medical supplies and equipment which allows AAI to conduct just affective healthcare interventions.

Gottfried Thoma – PTC Employee Benevolent Trust Islamabad – For the generous financial contribution to AAIs WASH program in support of affected population of the September 10 Pakistan Flood Crisis.

Sustainability (Future Growth) – www.sustainability.net.au - For assisting AAI with country representation in Pakistan and for fund raising support.

The Uquali Family - For the support within the Thatta District with local and cultural assistance and advise.

The Murshid Hospital – www.murshid.org – (Courtesy Pakistan Medical Association and Direct Relief International) - For the provision of medical supplies and financial support for the many thousands of patients attended to at AAI outreach and mobile medical clinics and for the support of healthcare staff.

Search and Relief Services (SARS) –Thatta – For the provision of community volunteers, local transport and general support of AAI's public health program in the Thatta District.

Doctors Worldwide - www.doctorsworldwide.org - For the generous provision of a medical officer to conduct patient curative and preventative services at the outreach and mobile medical clinics.

End statement

AAI Project Manager
Pakistan