



Bulletin #5

Covering period:
09 April – 15 April, 2016

Fiji

TC Winston (20 Feb) and
TC Zena (6 Apr)



The Buksh family of Nadi with the new additions to the family, twin girls born at separate locations, Nadi and Lautoka hospital during Cyclone Winston. (UNICEF Pacific/2016/Sokhin)

82,522		11,246		77		5.4 million	
# people who received medical consultations since the cyclone		# people who received Psychological First Aid since the cyclone		# alerts received through Early Warning Alerts System (EWARS)		Estimated cost (in FJD) of donated medical supplies and resources	

HIGHLIGHTS

- Tropical Cyclone Zena passed without causing significant damage on infrastructures, but three deaths from drowning were reported and more than 12,000 people sheltered in evacuation centres due to extensive flooding in the Western Division.
- The TC Winston [Public Health Risk Assessment](#) was posted on MoHMS website.
- The Zika Action Plan is implemented and the Typhoid Response Plan will be finalized soon.
- Zika-like illness is added to the syndromes tracked by the Early Warning, Alert and Response system (EWARS). Influenza-like illness reported the largest proportion of morbidity and acute fever & rash.
- Verification of Severe Acute Malnutrition (SAM) cases was recently completed on Koro Island. Four SAMS were referred to CWM hospital and 33 MAM cases are currently managed by the dietitian seconded to the island.
- A WHO Training Workshop for Humanitarian Crisis Supply Chain Management will be organized by the Fiji Pharmaceuticals and Biomedical Services centre (FPBS) and partners. Sessions will also be facilitated by WHO DPS staff responsible for procurements.
- Approximately FJD\$ 1 million worth of the donations received for the TC Winston was distributed to 65 facilities across the country in 148 separate distributions. The health facilities with damage to medicines and supplies have been restocked.
- The Damage and Loss calculations for the Post Disaster Needs Assessment (PDNA) were submitted to MoHMS for approval. The Building Back Better (BBB) component is ongoing this week.
- Planning continues for a one-day risk communication workshop for faith-based organizations (FBOs) that will also include women and youth groups.

Priorities, needs and gaps

- Addressing health risks and food security caused by extensive flooding and TC Zena is a priority. The Ministry of Agriculture team conducted a preliminary assessment and crops planted after TC Winston were simply washed away by the floods, which has major implications on food security.
- The Central Division Emergency Operational Centre (EOC) team continues to assess and verify damage to dwellings. The Food cluster continues to distribute food rations and relief supplies to areas affected by recent flooding and TC Winston.
- Bottlenecks were identified in the dispatch of supplies to sub-divisional health facilities due largely to communication/coordination problems. The total distribution of medical supplies remains around 20% against that recently received or donated.
- The prepositioning of supplies to the divisions is not recommended at this time as logistical systems are not in place. A supply storage audit tool is needed.
- Coordination between partners and agencies needs to be strengthened to avoid duplication in ordering supplies from the procurement list from Fiji Pharmaceuticals and Biomedical Services centre (FPBS).
- Accessing funding to implement the Zika Action Plan and Typhoid Response Plan is now a priority.
- Ensuring broad social and infrastructural indicators that have a bearing on health are also pursued vigorously by collaborating/responsible key agencies.
- There has been limited coverage for psychosocial support in the Yasawa Islands and while coverage has recently increased for affected areas in Taveuni.
- Five additional midwives need to be assigned at the CWM Hospital in Suva, and support for supervisory visits by the Divisions is also needed.

Health and Nutrition Cluster action

Coordination

- Analysis of initial results of the indicator-based 4W data will be presented at the next cluster meeting.

Sub-cluster action

Nutrition

- A follow up visit to Koro Island was conducted on 24th – 25th March to verify and assess SAM cases. Initially four SAMs were referred to CWM hospital and 33 MAM cases are managed by the dietitian seconded to the health centre on the island.
- Assistance has been provided on the school lunch feeding programs in Ovalau, Koro and Vanuabalavu.
- Volunteer dietitians and retired nurses are engaged in nutrition assessment & monitoring, distribution of multi-micronutrient powder (MNP), vitamin A, and deworming tablets for the next two to three months.
- Dietitians will continue the outreach activities in conjunction with the Family Health team for the next eight weeks.
- Technical assistance will continue to be provided to the Nutrition Unit of the MoHMS for SAM orientation for three months.
- Five additional retired midwives are assigned to the CWM in Suva. They support for supervisory visits by the Divisions.

- On the 12th of April, a brief for the mobile outreach clinic for the Northern Division was undertaken at Savusavu Hospital, Cakaudrove Province. The Northern mobile outbreak team began their visits on the same day.
- MoHMS will launch the mobile outreach visits for the Western Division in Korovou and Tailevu. Teams in Ra Province were distributed clean delivery kits and ORS.
- The team is planning to expand outreach activities to the Eastern Division, specifically to Vanua Balavu and Koro islands.

Public Health Interventions

- Technical meetings have been conducted with Divisional Emergency Response Teams (DERTs) and other key program partners regarding the implementation of the National Action Plan on Zika and the formulation and implementation of the Typhoid response plan.
- It is anticipated that aspects of the Zika plan requiring immediate action will commence from next week. Of particular note are the risk communication and the Vector surveillance and control components of the plan. The surveillance aspect of Zika virus disease is ongoing. Some focus will be required for the clinical management aspect of the plan which the national clinical services network (CSN) needs to chart out.
- The MoHMS will commence on the 19th of April vaccination of all villagers over two years of age in Qelekuro and Nabulini villages, using Typhoid Vi vaccine, where there is currently an outbreak. A serological survey of all residents of Qelekuro above 15 years old, both male and female will be conducted at the same time.
- A draft framework for typhoid response is available. The Korovou SERT and Central DERT are expected to draw their micro plan from the framework to respond adequately to the typhoid outbreak in the Tailevu subdivision (Qelekuro and Nabulini).
- MoHMS reported five confirmed cases of chikungunya out of 319 samples tested at the Fiji National Public Health Laboratory. The samples were collected between 10th January and 17th March. There have also been four cases of Chikungunya identified by the Institute of Environmental Science and Research Laboratory (ESR) in New Zealand, in returned travellers from Fiji between 20th February and 8th April.
- Additional test kits for dengue RDT and ELISA kits for leptospirosis and dengue were sent to the Fiji Centre for Control of Communicable Diseases, following a request from MoHMS.
- There are now 34 sites reporting to the EWARS with 32 reporting for EPI week 13 (28th March - 3rd April 2016) – 94% completeness with 100% on time. 31 IBS alerts received in Week 13, of which 16 (52%) were verified. Only one EBS alert received. Epi week 14 (4th to 11th of April 2016) has seen the introduction of an additional syndrome: Zika-like illness.

Family Health

- On 12 April 2016, a briefing of mobile outreach clinic for the Northern Division took place in Savusavu Hospital, Cakaudrove Province. The Northern mobile outreach team started their visits as of 12th April.
- MoHMS still to launch the mobile outreach visits for the Western Division in Korovou and Tailevu. Teams in Ra Province provided clean delivery kits and ORS.
- The team is planning to expand outreach activities to the Eastern Division, especially to Vanua Balavu and Koro islands.
- A total of 20 midwives have been deployed to health facilities in Northern, Western, and Eastern divisions to provide relief to the local midwives. These will ensure continued life-saving reproductive health services to the affected communities. Additional support will be received from UNFPA for supervisory visits by the Divisions.

Medical Supplies & Resources

- FJD\$ 5.4 million worth of medicines and medical supplies were received from donors (AmeriCares, AusMAT, Anspec, Direct Relief, FHSSP, NZMAT, OXFAM, Pharmacy Wholesalers, Roche, UNFPA, UNICEF, WHO). Another FJD\$ 500,000 is committed but yet to be received. FPBS manages the inventory, warehouse storage and distribution of these supplies.
- Approximately FJD\$ 1 million worth of the donations was distributed to 65 facilities across the country in 148 separate occasions. All facilities with damage to medicines and supplies have completed restocking. However, the total amount of Medical supplies distributed remains around 20% of that received.
- To increase the distribution of received supplies, FPBS has sent out an offer list to divisions and NGOs involved in the TC Winston response. FPBS will develop a distribution plan based on their input. Gaps are also identified in response to pockets of requests for equipment and appliances.
- FPBS will receive support from a WHO logistics consultant and will host a workshop on Humanitarian Crisis Supply Chain Management Systems in late April.
- FPBS were engaged by the Cluster Secretariat to work with the PDNA team for immediate and long term recovery plans.

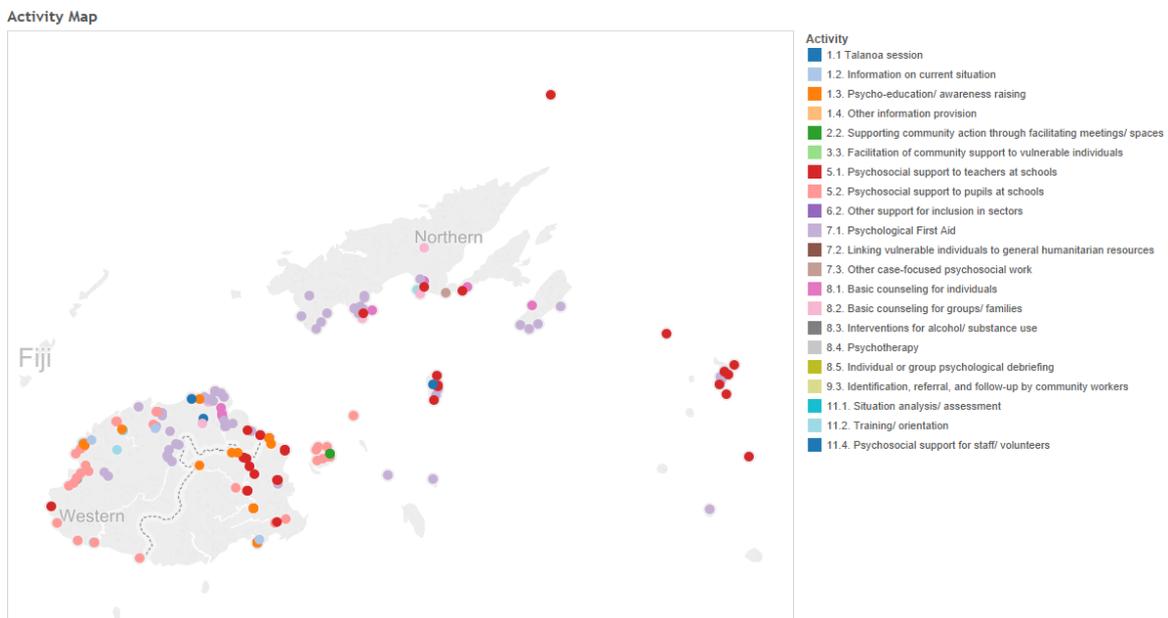
Communications

- A one-day risk communication workshop is planned for faith-based organizations that will include women and youth groups. The purpose is to obtain some feedback and equip leaders with health messages that can be reinforced in local communications. The workshop is planned for early May in Suva and a similar workshop is planned for the Western Division.
- The Sub-Cluster is developing a tool to evaluate the effectiveness of the risk communication efforts, particularly in affected communities. This tool will roll out in the coming weeks and will be used to inform future risk communications activities.
- A special price rate was set by the mobile companies for SMS text messaging as a mode of communication with the public. Vodaphone and Digicel are providing subscriber demographic information so partners can plan targeted messages. OCHA is also working on coordinating the message schedule.
- T-shirts and wristbands with health messages are produced for distribution to affected areas.

Psychosocial Support & Mental Health

- Since TC Winston, 11,246 persons received Psychological First Aid (PFA), and 20,895 received some psychosocial support (PSS) activities of the total targeted population (24,600). At least 39 tikinas have been reached by the teams.
- PFA remains the key intervention by MHPSS partner agencies that include Fiji Red Cross, Empower Pacific and the MoHMS. The Northern Mental Health Team are conducting PFA and PSS in Taveuni this week and Yasawa will be covered later by Western Mental Health team in the next three weeks.
- MHPSS partner agencies have begun to support communities impacted by flooding.
- The Ministry of Education, Heritage and Arts in partnership with UNICEF provided psychosocial support to teachers and students in schools in affected areas.
- Field testing was carried out on books developed at the workshop: "Helping Meet the Psychosocial Needs of Children after Cyclone Winston: Communication to help children move towards Healing and Hope," at Grand Pacific Hotel from the 4th to the 9th of April.

- Simple picture books have been designed for early childhood education that focuses on positive psychosocial messages. The book aims to create a platform for children to talk to their families and friends about their worries and concerns.
- Discussions have focused on including men in psychosocial support activities due to the observed lack of leadership and support to the respective communities.



Highlighted initiative

Psychological First Aid – Training of the Trainers



The Fiji Ministry of Health and Medical Services (MoHMS), in partnership with the World Health Organization (WHO), invited 28 health workers from Central, Eastern, Northern and Western Divisions to engage in a two-day Training of the Trainer (ToT) workshop on Psychological First Aid (PFA) and mental health ‘talanoa sessions’ in Suva.

The health workers identified common mental health issues based on their experience managing mental disorders in their respective stations. The participants demonstrated competency in training health staff in the use of mhGAP, the World Health Organizations mental disorder intervention guide.

The workshop achieved its target to strengthen the Ministry’s psychosocial response to TC Winston by coordinating a wide-reaching map of available workers that can provide support to vulnerable populations and prevent onset of mental health disorders.

Psychological First Aid equips people with the knowledge to be able to:

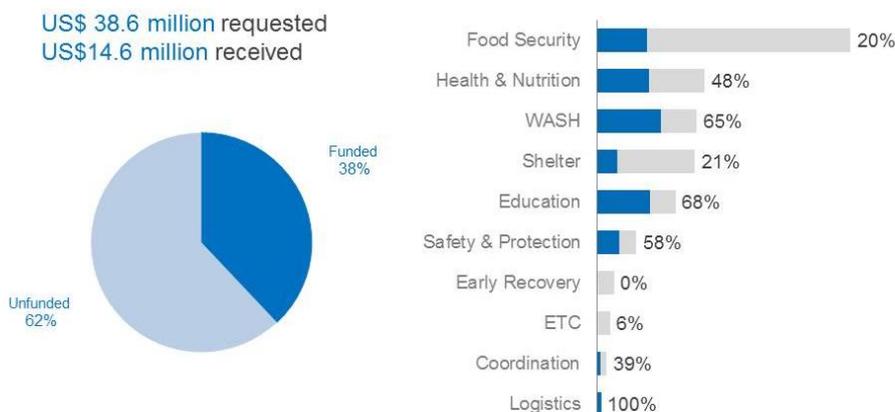
- Contact and engage with affected communities and individuals
- Provide comfort advice on coping and normal reactions to abnormal events
- Gather information on current needs and concerns
- Connect and refer individuals for additional support when required.

In addition to PFA, a talanoa session was a key intervention that involved a general discussion with members of the community on the importance of good mental health and wellbeing. The talanoa sessions also provide an opportunity to distribute key resources, and identify resources persons in the community that can provide further psychosocial support. This support is linked to the referral pathway to more clinical mental health services.

The skills developed in this ToT workshop were observed from initial reports received from the 28 health workers. The reports indicate that over 500 persons received psychosocial support in affected communities. In addition, the trainers were able to train about 350 PFA workers consisting of health staff, community leaders, teachers and volunteers that are likely to make a positive impact in the communities.

Funding status of action plan

The [Flash Appeal](#) for TC Winston Response is 38% funded, with the Health and Nutrition Cluster pledged funds to 48% of the total. The Australian, Canadian, Swedish and US governments, as well as the UN’s [Central Emergency Response Fund](#) (CERF), have contributed US\$12.5 million to its life-saving projects.



More information

See Health and Nutrition Cluster Webpage: http://www.health.gov.fj/?page_id=5254.

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