

EHA's Nepal Earthquake Relief 2015

8th May 2015



UPDATE ON POST EARTHQUAKE SCENARIO

The 25th April 2015 massive earthquake reported casualties increased to atleast 7904 deaths and 16,434 injured as of date.

284,455 houses have now been confirmed destroyed and another 234,102 damaged.

Nepal has a total population of 28 million approximately. About 8 million population were affected due to the earthquake. Atleast 2 million people needing tents, water, food and medicines over the next 3 months (Source: UN).

According to OCHA assessment cell's initial estimates, based on Government data, the highest rates of destruction and damage to housing are reported in Sindhupalchowk, Gorkha, Nuwakot, Ramechhap and Dhading. Estimates may increase as more areas are being reached. In Sindhupalchowk, the level of damage is said to significantly increase with altitude. Almost all houses made of stone and mud plaster, typical at higher altitudes, were destroyed and many families are still living outside their homes in makeshift shelters.

The Government and humanitarian partners have by now reached all the affected districts and are refining information on needs of affected people, particularly in remote and hard-to-reach areas.

EHA's Nepal Earthquake Relief 2015

8th May 2015

EHA'S RESPONSE UPDATE & REPOSITIONING BASED ON THE ACUTE NEED



(The above map with red borders showing medical camps conducted post 25th April 2015 earthquake in Nepal.)

1. HEALTH

Update

Earthquake victims claimed they have paid large sums for treatment to private hospitals despite the government order two days after the disaster that no fee should be charged.

There is a need to support assisted discharge for earthquake injured patients who need post-operation follow-up and rehabilitation.

The Health Emergency Operation Center established a hospital-based, post-earthquake surveillance system in public and private hospitals in 14 districts. This surveillance system currently covers 67 hospitals. A total of 249 surgeries have been performed to date in 51 hospitals in 5 districts (Bhaktapur, Dolakha, Kathmandu Lalitpur, Makawanpur).

Action plan

The first medical emergency team reached Sindhupalchowk on 27th April 2015. The initiative was taken by local doctors from various networks and institutions like TLM, HCF, NCMDA and DRCC.



EHA's Nepal Earthquake Relief 2015

8th May 2015

EHA arrived Nepal on 27th April 2015 with the twin objectives- 1) to assess the need and 2) to explore partnership with the local initiative for adding strength to the ongoing medical response with medical teams & medical supplies.

Following this EHA mobilized 15 member team (9 doctors and 6 others) at various times from EHA Delhi, Landour Community Hospital, Duncan Hospital, CMC Ludhiana and St. John's Medical College. The teams are still available in the field while a new medical team is arriving Nepal from CMC Vellore.

The medical teams reached more than 25 Village Development Committee (VDC) areas that covered about 100 villages under 10 districts during last 2 weeks. About 2000 victims benefited from the camps.

Rapidly declining medical needs: Emergency medical needs is declining with almost 2 weeks apart from the earthquake, many medical teams arrived during the past weeks and the local health department able to reach out equally.

EHA along with its partners are re-looking at the possibilities of having Satellite Rural Clinics with a medical team positioned at a central location in highly affected districts like Sindhupalchowk and Dhading for a week or so. This possibly would help victims travelling down from uphill tracking for 2-8 hours depending on the areas.

EHA has dispatched Medical Tents (30 people capacity) to Dhading area for another local partner (Penny) who has been working there covering people from the unreachable villages (8-10 hours tracking distance). It has been reported that more than 30000 people are stuck there with bare minimum food and shelter. 2 doctors were positioned there since 30th April 2015 till date.

EHA provided 30000 water purifying tablets overall.

Initial supplies of medicines already dispatched to Nepal for replenishing existing stock procured by the local partners. The procurement was made as per the list provided by the local partners.

The local partner is finding it extremely difficult to get the villagers down to the tent arranged for them with the medical team and food.

Due to active government action many referral cases awaiting surgical interventions were managed by health departments. However, the satellite team would also look out for referral cases to be sent to the Advanced Medical Posts in TLM, Anandaban or Duncan Hospital, Raxaul.



EHA's Nepal Earthquake Relief 2015

8th May 2015

2. SHELTER

Update

Huge quantities of tarpaulins are needed to cover the unreachable areas. The humanitarian organizations have reported attempts to sell them tarpaulins at 3 or 4 times the usual price. Currently tarpaulins are in short supply in Nepal.

Action Plan

EHA has initially supplied plastic sheets (50 metres) and 50 tarpaulin sheets for villagers in Re under Dhading district. EHA also mobilized additional supply of tarpaulins with the help of local business communities in Raxual.

EHA is procuring 5000 tarpaulin sheets initially to meet the need with priorities to villages unreachable. 2000 tents are prioritized for the identified leprosy families affected by the earthquake. The target is to purchase 10000 tarpaulins.



3. FOOD

Update

More than 3.5 million people are estimated to be in need of food assistance. Of them, an estimated 1.4 million most affected people have been prioritized for immediate food assistance.

Action Plan

EHA has mobilized 250 packets of food and basic hygiene kits for villages affected in Dhading district. Besides, EHA also mobilized additional supply of food with the help of local business communities in Raxual.

EHA is targeting to provide another 750 more basic food packets specifically for villages in Sindhupalchowk district.

However, EHA is additionally mobilizing 600,000 soft biscuits channelizing through World Vision International to Nepal.



4. PSYCHOSOCIAL CARE

Update

This is a huge need across the affected districts. Nepal has some existing network of psychosocial care program specially meant for afflicted women during the civil unrest.

EHA's Nepal Earthquake Relief 2015

8th May 2015

WHO is assessing the need for intervention through physical rehabilitation and mental health psychosocial care.

Action Plan

EHA will train 20 master trainers through a 3 days ToT through its local partners. The Trainers in turn would train 100 care providers across target districts. The follow up program should cover atleast 500 earthquake victims.

5. EDUCATION

Update

4389 schools have been damaged in 41 affected districts which includes 12483 class rooms. 950,000 children will not be able to return to school unless urgent action is taken to provide temporary learning space.

The Government plans to set up 12000 temporary learning centers in places where schools have been destroyed.

Action Plan

EHA plans to support local partners for starting Play Centers for children (recreational) in relief shelters where schools are affected heavily.

The Play Centers would have fun materials for children that includes drawing & painting kits, toys, game kits and snack/biscuits etc.



EHA's Nepal Earthquake Relief 2015

8th May 2015

Coordination mechanism

Under the flagship of The Leprosy Mission (TLM) Hospital, Anandaban, HCF, NCMDA and DRCC in close coordination with EHA will have a Relief Coordination Team (RCT) in place in Kathmandu for smooth implementation of relief program. The Nepal Relief Coordination Team (NRCT-consisting of all partners) will have the following team with their roles-

1. NRCT partners:
 1. Dr. Samundra Rana as the Relief Coordinator from Nepal partners as decided by the team on 30th April 2015 at Shaligram Hotel, Jawalakhel, Kathmandu, Nepal. She will oversee and coordinate matters related to medical as well as general relief matters closely working with the local participating partners and EHA.
 2. The local partners will depute/identify a Field Relief Coordinator, reporting to Relief Coordinators Nepal and EHA on daily basis from the field based on the assignments given from day to day.
2. EHA: Mr. Shem Raomai as the Relief Coordinator from EHA, based in Kathmandu, will closely work with EHA-DMMU team in Delhi and Dr. Samundra Rana to ensure overall relief operation and matters related to EHA's contribution that includes daily updates, weekly reporting on program and finance feeding the Project Director of EHA's Nepal Earthquake Relief 2015, based in Delhi for relevant support and approval.

Mr Shem also coordinate with a larger network- TF & CBM partners including UMN, INF and HRDC etc with the main objective to ensure avoid duplication of resources.

3. Both coordinators will update the NRCT-EHA jointly on mid-weekly basis on the plans and activities.
4. A common Relief office as the Relief Secretariat with basic facilities would be located in Kathmandu with assistance from local partner. This can also accommodate as transit camp for relief teams.
5. The overall objective of the RCT will be to ensure smooth and timely implementation of the intended relief program.

Relief Coordination Team meeting on 6th May 2015 @6.30pm

1. Dr. Indra Napit, Med Dir of TLM Anandaban Hospital
2. Ms. Manju Karmacharya, UNFEA & HCF
3. Mr. Jiwan Subedi, EU & DRCC
4. Dr. Arun K. Bupha, Gen Surgeon & UMHT
5. Dr. Tul Bahadur Pun, Orthopedic Surgeon, UMHT
6. Mr. Ian Chadrel, INF
7. Doctors from St. Johns (Dr. Aditya, Dr. Dharamvir & Dr. Dwayne)
8. Dr. Samundra Rana, Relief Coordinator for local partners, HCF
9. Dr. Ashish Karthak, NCMDA
10. EHA (Peniel, Shem & Nygel).

EHA's Nepal Earthquake Relief 2015

8th May 2015



(From left: Ms. Manju Karmacharya, UNFEA & HCF, Mr. Jiwan Subedi, EU & DRCC, Dr. Indra Napit, Med Dir of TLM Anandaban Hospital, Dr. Arun K. Bupha, Gen Surgeon & UMHT, Dr. Tul Bahadur Pun, Orthopedic Surgeon, UMHT, Mr. Ian Chadrel, INF – not in the picture and EHA team with doctors from St. Johns Hospital. Meeting arranged by Dr. Samundra Rana, Relief Coordinator for local partners and HCF and Dr. Ashish Karthak, NCMDA).