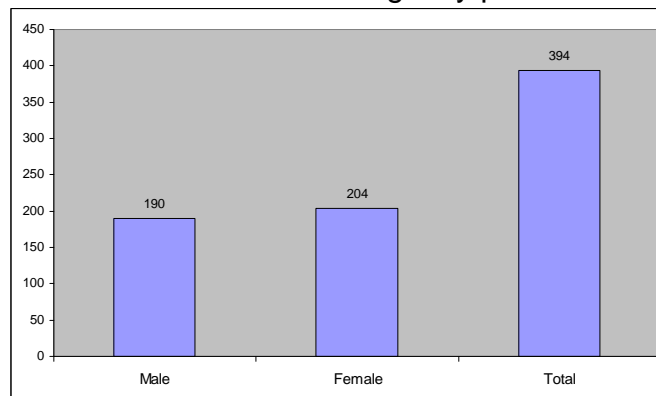


Diarrhea Outbreak of Mid-Western and Far Western Region Monitoring Report of INSEC¹

1. The problem of diarrhea has turned into an epidemic in Jajarkot, Rukum, Surkhet, Kalikot, Salyan, Dailekh, Rolpa, Dolpa and Dang of Mid-Western region and Doti, Bajura, Accham, Dadeldhura, Kanchanpur and Bajhang districts of Far-Western Region. According to statistics recorded by INSEC, a total of 394 people 190 male and 204 female have died due to diarrhea in these regions from April 30 to August 15. Similarly, 124 children have also died due to epidemic during the period. In average over three people have died per day in the epidemic hit districts. According to WHO standard the situation is in emergency phase and in serious trouble.



2. Prime Minister Madhav Kumar Nepal has visited diarrhea affected Jajarkot district on July 19 and pledged that everything will be done to bring the problem under control. Government deployed health teams and appealed to national and international communities for support but lack of coordination marred the efforts. On August 3, Health Minister Uma Kant Chaudhary claimed that the epidemic was already under control but the death toll has kept rising, which only proves government apathy towards the problem. A report of United Nation Office for the coordination of Humanitarian Assistance said according to National Public Health Laboratory, out of 20 samples collected, 8 samples tested positive for *Vibrio Cholerae*².
3. Most of the epidemic hit districts are hardly affected from the decade long armed conflict and some of the infrastructures like health posts and drinking water facilities were destroyed in these areas during the period of Maoist insurgency and these installations are yet to be fully repaired. The government has not been able to effectively monitor the health facilities rendered in these districts.
4. According to Regional Health Directorate, of the 101 posts of doctors in Dailekh, Jajarkot, Rukum, Salyan, Rolpa, Surkhet, Dang and Dolpa

¹ The report is based on monitoring of epidemic-hit districts from Apr 30 to Aug 14, 2009 by INSEC District Representatives

² <http://un.org.np/resources/diarrhoea-outbreak/>

districts of Mid Western Region, only 33 doctors have been working there. Of the four posts of doctors in Jajarkot district currently only one doctor has been working. Similarly, of the 70 posts of doctors in the Far Western Region only 39 doctors have been appointed. The health posts and sub-health posts also did not have sufficient human resource.

5. During a study conducted by International Rescue Committee in 10 VDCs of Jajarkot district, which is hardly hit by the epidemic, 90 percent of the respondents said that they do not go to the health institutions due to various reasons. The report released on June 27, 2009 said, of the total respondents, 10 percent said they do not attend health institutions as they could not find doctors there, 41 percent said they could not get medicine there and 49 percent of them said that they do not go health posts as the health institutions are very far. The response of 90 percent respondents reveals that the health institutions have not been able to provide effective health services.
6. A team from INSEC Mid-Western Regional office carried out field monitoring of Khalanga, Khagenkot, Rokayagaun, Jhapra and Dhime VDCs of Jajarkot district from August 4-9, 2009. During the monitoring visit, locals of these VDCs complained that Deprox Nepal, a local NGO, and some INGOs distributed substandard foods in the areas. Similarly date expired water purifying medicine 'Water-guard' and 'Pyeush' were also found in the district. However due to the weak monitoring mechanism it could not be traced which organization had distributed it. INSEC has collected samples of such goods in presence of locals. The government should immediately carry out investigation to find the cause how such substandard food and date expired medicine reached at the community.
7. Some media carried out news reports that the UN World Food Programme (WFP) and World Health Organization (WHO) denied allegations made by INSEC that rice, edible oils and lentils distributed by WFP have caused the cholera outbreak in the Mid West of Nepal. INSEC has never mentioned the word cholera as stated by WFP and WHO. INSEC has only expressed concern over the substandard food distributed in diarrhea-hit districts of Nepal and demanded investigation on the quality of food distributed by WFP. Many newspapers carried out reports that some animals became sick after they consumed rotten rice dumped by WFP in Dailekh district two years ago.
8. Problems and Shortcomings
 - Absence of health personnel in the health offices and hospitals in remote districts as per the assigned number of position. No effective government system of monitoring the health facilities.

- Lack of state sensitivity and attention towards checking the disease when it showed a sign of being an epidemic.
- Lack of coordination among the authorities involved in the rescue after the spread of the disease. (Returning of the health personnel due to such absence of coordination)
- Failure to dispatch health personnel and medicine in the affected areas and failure of launching awareness program in these areas leading the patients and their families to rely more on unscientific healing systems as shamanism.
- Failure at the part of local administration to monitor the quality of food distributed under Food for Work Programme.
- Failure to give proper attention towards the fact that 60 percent children (under the age of 5 year) suffering from malnutrition in Mid Western and Far Western Region.
- Use of open latrine and lack of awareness among people about sanitation.
- Failure of proper maintenance of drinking water installations destroyed during the period of armed conflict.

9. Suggestions/ Recommendations

- Effective coordination should be established among government agencies, I/NGOs and other volunteers working to tackle the problem
- A system should be introduced to ensure presence of deputed government health workers in all health facilities and a mechanism to monitor them should also be brought.
- A compulsory provision should be brought to end the tendency of the doctors and specialists avoiding duty in the remote districts.
- All political parties also focus on deploying their cadres of village-based networks as volunteers on such epidemic hit cases.
- Massive campaign should be run on preventive aspects of disease, health education and awareness.
- The government should launch sanitation campaign in these districts and make provision for providing clean drinking water.
- High level of caution should be adopted on such potentially vulnerable areas.
- Immediate relief support should be provided to the families and relatives of the deceased.
- Food should be supplied immediately in districts hit by food shortage
- The government should monitor the quality of food distributed by different organizations.

Annex : People died in Mid-Western and Far-Western Region due to diarrhea

District	Male	Female	Total
Achham	7	12	19
Baitadi	2	8	10
Bajhang	3	4	7
Bajura	7	6	13
Dadeldhura		3	3
Dailekh	10	12	22
Dang	2		2
Dolpa	5	3	8
Doti	3	6	9
Jajarkot	105	114	219
Kailai	2	1	3
Kalikot	1		1
Kanchanpur		1	1
Rolpa	1	6	7
Rukum	30	22	52
Salyan	4	1	5
Surkhet	8	5	13
Total	190	204	394

District	Adult	Child	N/A	Total
Achham	12	7		19
Baitadi	6	4		10
Bajhang	5	2		7
Bajura	9	4		13
Dadeldhura	3			3
Dailekh	16	4	2	22
Dang		2		2
Dolpa		8		8
Doti	4	5		9
Jajarkot	147	59	13	219
Kailai		3		3
Kalikot	1			1
Kanchanpur	1			1
Rolpa	5	2		7
Rukum	34	18		52
Salyan	2	3		5
Surkhet	10	3		13
Total	255	124	15	394

District	Brahman	Chhetri	Dalit	Janjati	Sanyasi	Total
Achham		7	12			19
Baitadi	1	5	4			10
Bajhang		3	4			7
Bajura		5	5	3		13
Dadeldhura		1	2			3
Dailekh	5	6	11			22
Dang				1	1	2
Dolpa		4	1	3		8
Doti		2	7			9
Jajarkot	1	105	97	16		219
Kailai		2	1			3
Kalikot			1			1
Kanchanpur		1				1
Rolpa		3	2	2		7
Rukum		15	27	8	2	52
Salyan		2	2	1		5
Surkhet		7	5		1	13
Total	7	168	181	34	4	394



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