STRENGTHENING PRIMARY HEALTH CARE SERVICES FOR CONFLICT AFFECTED COMMUNITIES

IOM primary health care services in Sri Lanka involves emergency humanitarian action, post-conflict health systems recovery, and migration health management. Since the end of the conflict between the government and the LTTE in May 2009, IOM Sri Lanka in partnership with the Ministry of Health (MOH), has provided emergency health care services to over 285,000 conflict displaced people in Northern Sri Lanka. IOM also plays a role in supporting MOH for primary health care related interventions in areas of return and in IDP (Internally Displaced Persons) camps.

CURATIVE CARE SERVICES

1. IOM has constructed, equipped, and supplied 13 of the 18 Primary Health Care Centres (PHCCs) covering all zones in Menik Farm for the conflict displaced community of 285,000, in the immediate aftermath of war. IOM having made a Memorandum of understanding with the MOH, Sri Lanka resourced each center with two medical officers, nurse, dispenser and IOM trained health volunteersA total of 213,578 patients have been treated as of 15th Dec, 2010 in IOM’s PHCCs. Further, IOM PHCCS also provided room for related vital services such as MCH and NRP programs by UNFPA and UNICEF to be conducted within the same premises.

2. Has provided more than USD 200,000 worth of medical supplies, equipment, and pharmaceuticals in coordination with MOH, as well as 10 large power generators to supply electricity to clinics and hospitals for Primary Health Care activities in Menik Farm and areas of return. These generated powered health care centers needing 24hr un-interrupted electricity especially needing maintenance of cold chain for vaccines and other drugs.

3. Continues to provide 16 ambulances on 24-hour on-call basis in both IDP camps and return areas, facilitating the transfer of over 18,019 emergency cases hitherto. IOM also facilitated over 309 ambulance missions to escort convoys for returnees. Each ambulance involved in assisted safe return was employed with paramedical staff who would act promptly in an emergency in remote resettlement areas.

4. Rehabilitated 2 referral hospitals in the Mullativu (Mallavi) and Kilinochchi (Mulankaville) districts to immediately serve the needs of the returned population, enabling the treatment of over 18,100 patients since November 2009.

5. Supports 4 mobile medical clinics and ambulance services in Mannar district treating 20,259 patients (Manthai West including Adampan, Musali, and Madu) under directive of RDHS Mannar and Provincial Authorities.
PREVENTIVE CARE / HEALTH PROMOTION

1. IOM supported MOH in responding to Dengue outbreaks in Menik Farm, Vavuniya, and Jaffna districts through multiple interventions:
   a) Providing vector control equipment (e.g. 8 fogging machines, 25 sprayers) to be used in the Menik farm and returnee areas
   b) Providing hematology test equipment for hospitals,
   c) Organizing community awareness campaigns and environmental cleanups, establishing waste management systems with the Dengue Taskforce,
   d) Training 90 doctors and 25 nurses in dengue surveillance, diagnosis, and clinical management, and
   e) Supporting the Dengue Taskforce with vehicles for fogging and entomological surveillance, monitoring and human resources.

2. Supported MOH in organizing health promotion dramas and a community based disease surveillance mechanism across all IDP camps.

3. A medical waste management assessment / intervention in PHCCS in Menik Farm with strict adherence to universal precautions

4. IOM provided assistance in Mumps outbreak in Menik Farm:
   - Public health campaign covering all zones of Menik Farm
   - Transport facilitation facilities for IDP patients to reach infectious disease Hospitals
   - Renovation of isolation facilities closer to Menik Farm
   - Allocating health volunteers to do house visits in educating patients and families on outbreak.

“Promoting Healthy camps, Health lifestyles” Health promotion programs are an important component in promoting positive behaviors for the prevention of major communicable diseases. Camp based health promotion programs were organized by the Ministry of Health with support of IOM and with other agencies such as UNICEF and WHO. An essential feature of IOM-MOH health promotion program in IDP camps were the training of IDP community health volunteers who developed health promotion drams and songs under the guidance of field level public health staff. The play featured is on vector control at household level and the gender roles with respect to responsibilities in health action.

“Mosquito on wheels! Curbing the spread of dengue one message at a time...”. The Epidemic in 2010 was one of the worst on recorded history of Sri Lanka. As of August 31st, 2010, 192 people died and more than 26,824 were infected. Control measures at IDP camps mainly relied on source reduction, proper waste management, reduction of Potential breeding sites such as surface drainage channels, roadside gully traps. Larvicides were applied whenever immediate elimination of breeding sources was not feasible, Space spaying of insecticides was also carried out with assistance from IOM. The photo shows efforts by IOM and MoH in community health education programs. This campaign was targeting children and was done by converting a mobile vehicle to a portable ‘mosquito trap!’ Camp committee were established, clinic management for health staff on DH/DHF were also carried out.
IOM SRI LANKA
Emergency Health Program at a glance...

REHABILITATIVE CARE AND MENTAL HEALTH

1. IOM built a temporary rehabilitation centre in Menik Farm for consultation, follow up interventions, and workshops for those with war injuries and disabilities. The rehabilitation centre is managed by the Ministry of Health together with other disability sector partners. IOM could support 3 successful limb programs under the shelter of this centre successfully. As a part of the rehabilitation program IOM in partnership with UNHCR and MOH distributed mattresses and wheelchairs in IDP beneficiaries with disability. WHO and IOM supported the Ministry of Social Services and Social Welfare in a rapid disability map of IDPs.

2. IOM is assisting MOH with an artificial limb-fitting programme for more than 1100 beneficiaries from IDP camps and areas of return with Indian Government collaboration.

3. Partly-funded 3 Psychosocial Centres in Mallaw, Mullativu, Natanakandal in Killinochchi and Nadunkerny in Vavuniya-North district. These centers largely targeted children in resettlement areas where such facilities enhancing psychosocial services were scarce.

4. Also supported a two-day Mental Health Training for 15 medical officers and 50 counselors.

5. Converted 3 PHCCs into 3 Community Centers for Psychosocial Activities, which are being utilized for people with psychosocial and mental health needs by MOH and other NGOs.

6. Facilitated programs with MOH to organize excursions for children and families in IDP camps to visit other towns and engage with children in other districts.

7. Provided transport to patients with spinal cord injuries, those who have undergone cataract surgeries, and disabled patients from return areas and Menik Farm.

Examples of partnership projects: IOM works closely with WHO and MOH in undertaking joint needs assessments, providing weekly medical updates, and contributing to developing a database on health system needs at Provincial level. It assisted Medicines Sans Frontiers (MSF) in transporting patients and UNICEF in providing the cold chain at PHCC level for vaccination campaigns. IOM collaborated with local NGOs in providing 3 medical mobile clinics and ambulances to cover returnee populations in the Mannar District; assisted Help Age International with transport of elderly IDPs undergoing surgery and supported development of Psychosocial Centres/ mentoring programs for a MOH - Corporate Social Responsibility consortium. In partnership with MOH, Indian Government and Jaipur Foot Prosthetic Limb Programme, IOM supported a prosthetic/authorptics care program at the IOM built rehabilitation centre. IOM also facilitated training on medical emergencies for 34 Terre des Hommes (TDH) staff, 48 Population Services Lanka (PSL) Staff and over 200 health volunteers in the Northern Province.
TECHNICAL CAPACITY BUILDING AND SUPPORT TO MINISTRY OF HEALTH

1. Built a 50-bed MOH health staff quarters in Menic Farm IDP camps as part of a broader human resources for health in crisis strategy for the health sector.

2. IOM provided capacity-building programs to all zones in Menik farm training 30 health volunteers in each totaling to 210. Prevention of communicable diseases, disease surveillance & outbreak response were the objectives in each training.

3. IOM in partnership with MOH has conducted more than 10 training programs and 4 workshops during the past 18 months, involving over 200 health staff working with IDPs and returnees. Examples of workshops include:
   a. Strengthening disease surveillance and communicable disease prevention for medical officers and nursing staff serving at IDP camps,
   b. Primary trauma care training for medical officers assigned to IDP and returnee areas of the north,
   c. Training on child mental health for doctors and counselors working in the field of mental health,
   d. Planning for primary health care development in North (including assisting MOH pilot a health record) and,
   e. Standard operational procedures on disaster preparedness and response workshop series.
   f. Training of trainers for participants from MOH, Ministry of Social Services, CGR in psychosocial counseling of war-affected in preparation for release and rehabilitation
   g. Clinical management of dengue patients for Medical officers and Nursing staff at Vavuniya

4. Trained more than 210 health volunteers and NGO volunteers in basic trauma care and disease surveillance activities.

5. Technical support to MOH at central and provincial level, in the form of 7 public health consultants.

6. Providing essential transportation for medical officers, consultants, and public health staff in Menik Farm conflict affected areas.

7. Assist provincial authorities to prepare health database of all basic clinical needs and human resources.

8. Provides meals for all health staff at Menik Farm since November, 2010.

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