

Doctors For You
Bihar Flood Response 2017
West Champaran district



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1. BACKGROUND

Bihar is one of the most flood prone states in India with annual floods being a regular feature. Every year the state faces recurrent flood in the flood plains of the river Ganges and Kosi, Gandak and other smaller river sub-basins. This year the state has witnessed the first wave of flood, heavy downpour since the first week of August and at its peak on 13th August 2017 engulfed almost the entire North and East of Bihar. According to Disaster management department Bihar, around 1.71 crores people have been hit by floods in 21 districts and 8394 villages affected in the state.

Araria, West Champaran, Sitamarhi, Madhubani, Katihar, Kisanganj, East Champaran, Supaul, Purnea and Madhepura districts were the worst affected.

According to Disaster management department Bihar, forty two deaths reported in West Champaran district.¹

Doctors For You started the response in Bihar after getting permission from the district magistrate of West Champaran on 30th of August 2017 and completed on 19th September.

Although there was need of support and more days to stay but because of lack of funding we closed our response activities on 19th September. As Gaunaha, Majhauriya and Narkatiyaganj were worst affected blocks by the catastrophic flood.

We were trying to cover most of the affected blocks of the district; hence DFY started its response from Gaunaha block. The major focus was on pregnant women, Lactating mothers and one to 5 years children.

After getting information that there are two deaths and so many cases of Diarrhoea in Lachhnauta turkoliya village of Gaunaha block. Then members of the DFY team moved the village and started a quick response to save the life of community. DFY distributed ORS solution and chlorine tablet on same day and from next day started decontamination of hand pumps with the help of volunteers from missionaries and local in the village.

Needs Assessment

After preliminary field visits by Doctors For You team along with Sent Xavier team on 30th and 31st August 2017 at Gaunaha ,Lauriya,Majhauriya and Narkatiyaganj the following areas in public health were identified that required urgent attention:

- Maternal and Ante Natal Care
- Nutrition
- Water and Sanitation Hygiene

Discussions were held with the District magistrate, Block development officer, Medical officers and local level partners and collaborations were decided

Team members of Doctors For You:

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2. Dr. Mridul Deka
3. Dr. Roopali Agrawal
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5. Mr. Ashrendra Kumar

6. Mr. Chandan Prasad
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8. Mr. Ranjeet Kumar
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Area of Intervention: Gaunaha, Narkatiyaganj, Majhauriya and Lauriya Blocks of West Champaran District

Villages visited for medical camp and Active case finding of Diarrhoea:

Background:

Post flood, waterborne diseases are very common in the flood affected villages. Among these diseases, diarrhoea has the biggest burden. In west Champaran, Bihar there were many villages affected by diarrhoea. Malnutrition, poor hygiene, spread through person to person, water contaminated with human faeces, these factors/reasons aggravated the spread of diarrhoea. On 3rd September, it was reported that there were two deaths because of diarrhoea in the Lachhnauta village of Gaunaha block in the west Champaran. In Simra Brit of Majhauriyablock, it was seen that diarrhoea spreaded among family members and relatives within the village.

Key measures taken for prevention and treatment of Diarrhoea

- ORS distribution: DFY distributed sufficient number of ORS sachets to the patients of diarrhoea. Traditional healers were also involved in treatment in Lachhnautaturkoliya.
- Decontamination of hand pump and distribution of chlorine tablets: For safe drinking water DFY distributed chlorine tablets and decontaminated the hand pumps with the help of local volunteers. We also orient the community how to use the chlorine tablet and process of hand pump decontamination.
- Soap distribution for hand hygiene: We distributed soap for hand washing.
- Orientation for lactating mother for below 7 months children: Special focus on exclusive breast feeding till completion of 6 months to a child

Hence, the intervention aimed to intervene in a holistic way for prevention and treatment of diarrhoea.

District	Block	Village visited	Diarrhoea cases found in villages	Cases of Diarrhoea	ORS distributed	Handpump decontaminated(Out of)	Chlorine tab. distributed
West Champaran	Gaunaha	Rampurwa farm,Bhitiharwa ashram,Mauje Madhopur, Belwa Musahar tola, Belwa bahuari, Lachhnauta Turkolia,Sonbarsa, Haridi,Pipra and Murali bharahawa,Math majhariya	Lachhnauta, Haridi	86	20 sachets per patient for acute diarrhoea patient and for others 10 sachets	265(around 930)	20tablets per patient
	Majhauriya	Badhaya tola,Mahanwarampurwa,Faras musahartoli,thabaiya,Shyampur,Dhangartoli,Dudhamathiya,Nautankhurd,Bakharia Simri brit	Simri brit,faras musahartoli	24	20 sachets per patient in two days	101(520)	20tablets per patient
	Lauriya	Parsa Dhangar toil,Khap tola,siswaniadhangartoli,Sirkahiya	Dhangar toli	6	10 sachets per patients	15(20)	10 tablets per patient
	Narkatiyaganj	Majhariya, Narkatiyaganj	Majhariya	8	10 sachets per patients	0	10 tablets per patient

Priority Interventions:

1. Ante natal care check-up(ANC check-up)
2. Multi vitamin supplementation for lactating mothers
3. Vitamin A supplementation for 1 to 5 years children
4. Deworming:Albendazole for 2 to 5 years
5. Decontamination of handpumps with bleaching solution
6. ORS distribution
7. Chlorine tablet distribution
8. Soap distribution for hand washing
9. Wash awareness camp
10. Active case finding of cases in diarrhoeal outbreak
11. Active collaboration with Government health machinery and Missionaries in the district

Updates regarding beneficiaries:Activity accomplished during flood response

Sr.No.	Activity	No. of beneficiaries/Services provided
1	ANC check-up for high risk pregnancies	264
2	Lactating Mothers	400+432*
3	Vitamin A supplementation	5125
4	Deworming with tab.Albendazole	5000
5	Handpumps decontamination	425
6	Chlorine tablets distribution	12000
7	ORS distribution	5500 Sachets
8	Delivery Kits	50
9	Soap distribution	5500
10	No. of health camps conducted	23

***432 Multivitamin distributed by local NGO Fakirana sister society and KR (Multivitamin given by Doctors for you)**

Limitations/Challenges

- Initially it was very difficult to start the response because of delay in getting official permission then we decide to start our response after permission of District magistrate of the district
- Delay in response was painful because ultimately community was suffering
- Could not get external assistance(Funding) because of official letter by state government
- Physical access to few most affected villages because of lack of connectivity
- Prevention and management of diarrhoea was very limited from government side especially they could help in terms of sprinkling of bleaching solution on stagnant water bodies and nearby hand pumps

Things went well

- Got permission(Orally) from the District magistrate of west Champaran to start our response in Gaunaha and Majhauriya block of the district
- Got local level support in terms of most affected site selections and mobilization of the community from the missionaries working there
- Volunteers from villagers were helped a lot in decontamination of handpumps in diarrhoea affected villages

Lessons Learnt: (based on limitations and things went well)

- District level data of causality due to flood was underreported ,according to locals from Gaunaha block the no. of deaths in the block was more than 100 Therefore, need for better reporting compiling data from the local level and through different agencies.
- Locals were not resilient as per their vulnerability,require regular mock drill and capacity building by the government to make them resilient
- Government should go for evacuation as they have early warning from Nepal government and NDRF team was also there 3 days before from the flood occurred
- People living near the river need proper permanent relocation at safer place otherwise they will remain exposed to flood always,As community living near the river are excluded and poor
- Having an emergency medical response team with well equiped ambulance especially for pregnant lady and new born is important for preventing health challenges among preganant and newborn children.Availavity of nutritional supplement like multivitamin and Iron folic acid especially for pregnant and lactating mother and food materials according to their culture is also required
- Over all medical response is required including phycho social care of affected population
- Raised hand pumps required in flood prone area
- Need better preparedness in terms of vector borne and water born diseases As for example for water born diseases, it is important that awareness among community about how to decontaminate water bodies and chlorination for safe drinking water.
- Prior collaboration Of NGOs, departments, etc with Government is crucial for any intervention in the field during emergency
- Some of the blocks as for example majhauriya block of the district which was affected the most by the flood are areas that got flooded after 10 years ,In terms of

preparedness they were most vulnerable as they were even not aware about the hazard which can lead to major disaster.Hence it required capacity building of the people in holistic manner

Few pictures from field:



Fig:1.ANC check up of third trimester women at Rampurwa farm at Gaunaha block



Fig:2.Vitamin A supplementation,Albendazole and soap distribution among children at Rampurwa Gaunaha



Fig:3.Children waiting for Vitamin A and Albendazole at Bhitriahwa Gandhi ashram of Gaunaha Block



Fig: 4.Dairrhoea patient at Lachhnauta turkolia village of Gaunaha block



Fig:5.Decontamination of handpump at Lachhnauta turkolia village at Gaunaha



Fig:6.Albendazole for children at Mauje Madhour of Gaunaha block



Fig:7.Diarrhoea patient at turkolia village at Gaunaha



Fig:8.Washing hand after getting soap from our camp

Fig:7.Use of Multi vitamin and PNC counselling to lactating mother