

IMHO: July 2009 Update on Sri Lanka Efforts & IDPs

International Medical Health Organization (IMHO) <coordinator@theimho.org> Thu, Jul 16, 2009 at 5:30 PM
Reply-To: coordinator@theimho.org



International Medical Health Organization (IMHO)

Issue: #5

July 2009

In This Issue

[Report on IDP Children](#)

[Sanitation & Water Threats Loom](#)

[Upcoming IMHO Events](#)

[Past IMHO Events](#)



Quick Links: *Recent Reports*

[Update on IDP Children: July 2009](#)

[USAID Report on IDPs: July 2009](#)

[Vanni Psychosocial Report: March 2009](#)

[Badulla Estate Health Report: March 2009](#)

Report on IDP Children in Northern Sri Lanka

The struggle to survive continues in Northeast Sri Lanka, even months after the violence officially came to an end, as hundreds of thousands of Internally Displaced Persons (IDPs) who have endured incredible hardship remain confined to overcrowded internment camps. According to the UN Office for the Coordination of Humanitarian Affairs (OCHA), 279,208 IDPs remain in 40 camps in the northern districts of Jaffna,

Join Our List

[Join Our Mailing List!](#)

Quick Links: *IMHO* Website Popular Pages

[Homepage](#)

[2009 Crisis Homepage
\(including photo
galleries\)](#)

[Blog](#)

[Donate](#)

[Recent Events](#)

Mannar, Trincomalee, and Vavuniya, nearly all of whom are residing in the Vavuniya District camps. Of those, an approximate **120,000 are children**, and an incredible 55,000 are estimated to be under 10 years of age.

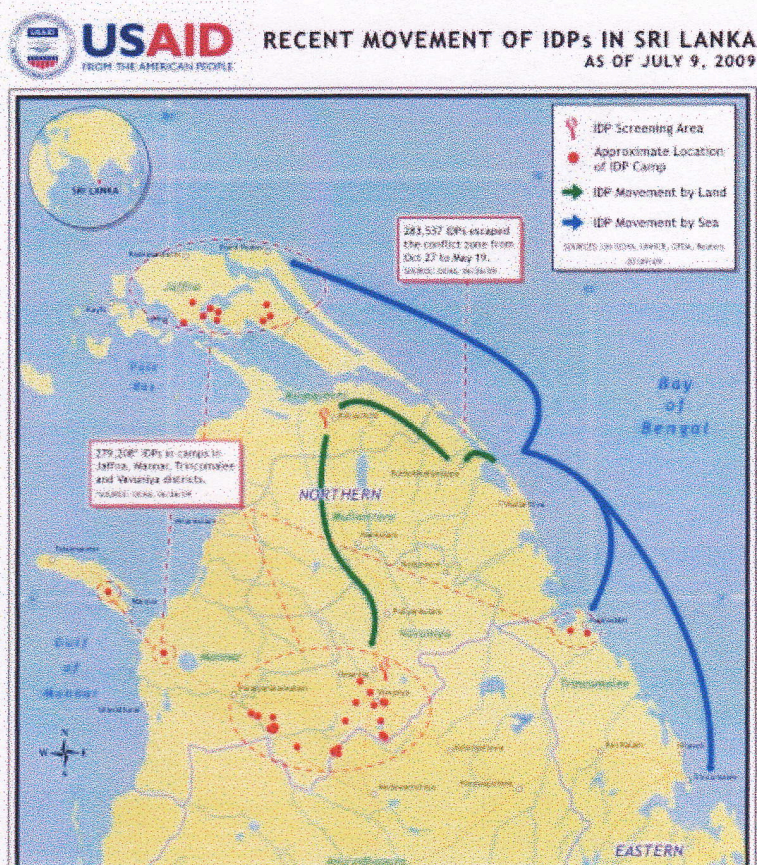
Conditions in the camps remain poor, despite the commitment of and progress made by many local and international aid & relief agencies. Children in particular remain disproportionately at-risk with an estimated **44% severely malnourished**. As many as **5,000** children had limbs amputated during the approximate 5-month ordeal from January through May 2009 on account of shelling and other attacks. As of July 9th, UNICEF had identified more than **2,000 vulnerable IDP children**, including orphans, unaccompanied minors, and children separated from families. It is believed approximately 1,000 of these children are now orphans.

Prior to this most recent crisis beginning in December 2008/January 2009, the UN Security Council's "Report of the Secretary General on Children" highlighted other vulnerabilities of children in Sri Lanka over the last few years. It stated, "[t]he killing and maiming of children also remains worrisome, especially in the context of the fighting and attacks which have a direct impact on the civilian population in affected areas of Sri Lanka. . . [T]he provision of humanitarian assistance to affected children in the conflict zones is increasingly difficult." These realities set the tone for the suffering and hardship that thousands of innocent children would be forced to endure throughout this recent humanitarian crisis.

According to UNHCR assessments released on July 7th, "IDPs have identified overcrowded camp conditions, insufficient access to health care services, and lack of information on separated family members as key concerns." An earlier report released in mid-June by HRW stated, "Conditions in the camps are inadequate. Virtually all camps are overcrowded, some holding twice the number recommended by the United Nations High Commissioner for Refugees. Food distribution is chaotic. . . and sanitation facilities are inadequate. Camp residents do not have access to proper medical services and communicable diseases have broken out in the camps." Those within the camps are not allowed to leave, with the exceptions of a few thousand elderly and disabled persons who have already made their way out. Many (including most of the international aid community) believe that it will likely take several years to relocate and rehabilitate these persons, a great number of whom have been repeatedly displaced over the years. Several UN agencies have observed that the lack of freedom of movement for the IDPs remains a major issue of concern, as current restrictions limit the ability of IDPs to work, attend school, or even visit family and friends.

The UN and international aid agencies are now reporting that all IDPs in all camps have adequate access to water supplies, but much progress is still needed when it comes to proper drainage, sanitation, hygiene, and hygiene/health education. Another persistent concern outlined by USAID and other groups is that of alleviating overcrowding for which there has only been marginal progress so far.

Cognizant of these harsh realities, IMHO remains committed to addressing these needs to the best of our ability.



If you would like to read USAID's most recent report on the status of IDPs living in the camps across Northern Sri Lanka, please click [HERE](#).

Sanitation, Drainage, & the Threat of Water-Borne and Communicable Diseases

While conditions in the IDP camps in Northern Sri Lanka have improved in recent weeks, including easing of overcrowding, access to water, and availability of healthcare, there is still a long list of needs to be met as the

people struggle. Long lines for food are a regular occurrence, as are long lines for toilets. Improper sanitation and drainage persist as key areas of need. The rough estimate of toilets available per person is 1:100, which is an abysmally low figure. Furthermore, the proximity of these toilets to the areas in which people are living is a constant cause for concern. This is exacerbated by the early arrival of the monsoon rain, which now poses a health threat. IMHO is helping to provide toilets in order to ease this problem as a matter of proper health and hygiene.

The IRIN (Integrated Regional Information Networks), which is part of the UN Office for the Coordination of Humanitarian Affairs but reports independently, reported that many health experts have warned that "the arrival of monsoon rains in July could increase the risk of waterborne diseases for tens of thousands of internally displaced persons (IDPs) in camps in northern Sri Lanka." With such high concentrations of people in the areas of the Manick Farm camps in Vavuniya, the risk of waterborne diseases becoming a problem with the rains is always a possibility, according to Médecins Sans Frontières (Doctors Without Borders). MSF runs a field hospital in Vavuniya District where more than 23 of the IDP camps are located, housing 260,000 IDPs.

The IRIN report continues, "The monsoon rains last about four months, and even though the World Health Organization (WHO) says no large disease outbreaks have been reported, the risk factors for malaria and diarrhea have increased. WHO said the Ministry of Health had taken precautions to deal with a possible malaria outbreak, with proper surveillance mechanisms at all camps. Until 19 June, only 29 cases of malaria had been reported, but health officials initiated a high alert when two cases were reported on 18 June from zone 4 in Menik Farm.

Field staff have been deployed to all hospitals and healthcare units assisting IDPs by the Regional Malaria Office for the Vavuniya District from 8 June. 'This is an alarming situation considering the very small number of malaria cases reported from the entire country in the recent past,' the WHO update said. 'An active surveillance for malaria is . . . [ongoing].'

Until 18 June, 1,060 cases of dysentery and more than 5,000 cases of diarrhea had been reported from the camps, it said. 'There is a serious threat of waterborne diseases because of so many people living so close together,' one humanitarian official said, highlighting the risk posed by improper disposal of solid waste and rubbish in the camps.

According to OCHA on 27 June, the greatest needs were specialist doctors. 'IDP health workers, paid by the government of Sri Lanka, are working in the IDP sites. Thirty-seven new doctors are expected to be appointed at the Vavuniya District within a week. However, a shortage of

specialists remain,' OCHA confirmed. . .

The greatest disease outbreak reported so far was chickenpox, with more than 12,000 cases, but those numbers had since been decreasing, the UN reported. The number of new cases reported is steadily declining and admissions to hospitals are 40-50 patients per day, OCHA confirmed on 19 June. 'In Vavuniya, the number of Hepatitis A cases is also declining. A total of 2,139 cases were reported as at 12 June,' the report added. Medical officers working with the displaced suspect that most of the chickenpox patients contracted the disease before they arrived in camps."

Upcoming IMHO Events

*****Ohio: Uyir Kappom Fundraiser for IDP Relief*****

WHAT: Please join us for a presentation by visiting physician Dr. Jude, update on IMHO's efforts, and simple dinner.

WHEN: Saturday, July 25, 2009, 6:00-9:00pm

WHERE: 9306 Towne Square Ave., Cincinnati, OH 45242

WHY: To raise funds for emergency relief & nutrition for IDPs in the Vanni

If you plan on attending or would like more information, please contact Thavam (937.654.3211) or Malathy (513.793.0804).

*****Los Angeles: G-VO Concert for IDP Relief*****

WHAT: CD Release Party for G-Vo (Rajeev Nandakumaran) with proceeds benefiting IMHO

WHEN: Saturday, August 22nd; Doors open at 6:00pm

WHERE: Ambassador Auditorium, Pasadena, 131 S. St. John Ave.,
Pasadena, CA 91105

WHY: To bring together those deeply concerned about the humanitarian situation of the IDPs in Sri Lanka

HOW: Tickets are \$10/general admission and \$25/VIP. Tickets available pre-sale and at the door. Donations encouraged. For tickets, please contact Walavan (818.599.3570), Andrew (818.486.1787), or Sanjeev (626.533.6611).

Past IMHO Events

*****New Jersey Arangetram*****

On Sunday, June 14, 2009 at Grover Middle School in West Windsor,

New Jersey, eighth grade student Sankavi Rajaram held her Aragentram while also raising funds for IMHO's health efforts in Sri Lanka. Sankavi has been studying Bharatha Natyam for nine years, since the age of five. She performed to a full auditorium of about 500 people. Dr. Raguraj, IMHO President, gave a brief update about IMHO and the current situation during the event. There was also an IMHO display and presentation of "awareness of the displaced people" done by Sothi Ratnam from Boston. This display corner was intended to make people aware of the recent displacement of hundreds of thousands of innocent civilians and to bring attention to their vast needs. These art displays were inspired by her own family's history and attachment to a place where so many have suffered, yet the love of the land runs so deep.

Sankavi's performance was dedicated especially to the displaced people in the Vanni. Over \$5,000 was collected and then donated to the IMHO fund for displaced people. This event is a perfect example of a creative way in which one individual can turn a life milestone or personal/family event into a charitable fundraiser to support those in such great need. Consider helping to raise funds for IMHO at *your* next birthday party, your anniversary, your wedding, etc. and help the IDPs and others in need.



Texas Chapter Contributes to IDP Relief

The Texas Chapter of IMHO has thus far contributed nearly \$13,000 to IMHO for IDP relief efforts in Sri Lanka. Donations collected from the recent memorial remembrance event on July 11, 2009 in Dallas, Texas, which was organized by the Ilankai Tamil Sangam-DFW and Metroplex Tamil Sangam, provided over \$5,000 to support such efforts. Texas State Coordinator Dr. S. Nanthakumar made a presentation on behalf of IMHO at this event and gave an update on the ongoing IDP situation. Previously, donations from supporters, members, and friends of Ilankai

Tamil Sangam in Houston, Beaumont, and Austin amounted to about \$7,500 for this cause. The Sri Meenakshi Temple Society in Pearland, Texas in particular donated \$1,000 to benefit the Texas IDP Fund for IMHO. The state coordinator and IMHO would like to thank all friends and volunteers who helped raise the funds for this humanitarian relief for the IDPs relief efforts and to those who enrolled in our monthly giving program.

**Be the
Difference.
Save a Life
with just
\$15/month.
DONATE
TODAY!**

Donate

During this crucial time in Sri Lanka and around the world, as we face monumental challenges in providing better access to quality medical and health care for those most at-risk segments of society, we need YOUR HELP now more than ever. With **just \$15/month** you can meet the nutritional needs of 1 IDP (internal refugee). Please consider making a donation to IMHO today. You can **donate online via PayPal as a one-time or recurring donation** (the amount & frequency of which are up to you).

You can also **donate via mail** by sending a check made out to "IMHO" to the following address:

**IMHO Treasurer
PO Box 61265
Staten Island, New York 10306
United States**

All donations are tax-deductible (tax ID code #59-3779465)

Forward email

 **SafeUnsubscribe®**

This email was sent to gtbuie@gmail.com by coordinator@theimho.org.

[Update Profile/Email Address](#) | Instant removal with [SafeUnsubscribe™](#) | [Privacy Policy](#).

Email Marketing by



International Medical Health Organization (IMHO) | PO Box 61265 | Staten Island | NY | 10306