

Kenya Situation Report #6

24 January 2008

Update

The four teams composed of DHMT and partners travelled to the various IDP Camps in the district to carry out Initial Rapid Assessment (IRA). Camps visited include Burnt Forest area camps, Munyaka PCEA, ASK Show ground, and Turbo in Lugari district. The latter was included in the Uasin Gishu District assessment due to its proximity.

Field visits

The following is an overview of the situation in the 2 IDP camps assessed by the teams comprising of DHMT, WHO and partners.

Turbo IDP Camp

Situated 33km from Eldoret Town on the border of Uasin Gishu and Lugari Districts

Water:

- Piped Water supply available and the camp has two storage tanks. But this is not adequate as evidenced by the long queues waiting to draw water.
- As a result, a large section of the people in the camp draws and consumes untreated water from a nearby stream.

Sanitation;

- Camp has 14 pit latrines, two of them already full. It was also observed that the latrines are situated at the far end of the camp, making it difficult for the IDPs to access them particularly at night.
- Most of the toilets do not have doors, which force some of the people relieve themselves in the nearby bushes. Human fecal waste was evident along the stream where people draw water.

Health profile, risk and status.

- Health services are provided to the IDPs through a static clinic in the camp operated by KRCS. There is also a National Youth Service (NYS) dispensary adjacent to the camp and a Rural Demonstration Health Unit 3km away. Access to the latter is hindered by difficult terrain and insecurity. This facility has most of the basic health care services though facing certain shortages (eg. Antibiotics and analgesics).
- Team was informed of drastic reduction since the crisis started of utilization of the services by the local community due to insecurity.
- As an indication of the insecurity in the area, it was noted that space in the wards was used by the health staff to store their personal belongings

Munyaka PCEA Camp

There are approximately 3000 residents, 1000 living in the Church Hall and the rest in nearby buildings. Of these, 1005 are children under 5 years and women comprise 24,7%.

Water and Sanitation

- Camp has running piped water but no storage tanks.
- Less than 25% of the households in the camp have containers to store water
- There are 10 functional pit latrines 4 of which are reserved for women. Two of the latrines are almost full. The toilets are cleaned twice a day.
- No bathing rooms exist.
- Inadequate water at household level and lack of soap were reported as the two biggest handicaps to hand washing after defecation.

Nutrition

- KRCS supplies infant and young child feeds, Food and Non-Food Items.
- Lacking fuel to cook, residents use dry maize stalks and inadequately cooked food is reported to be rejected by the children.
- Nutritional assessment has not been done in this camp.

Health profile, risks and status

- The camp has no regular health services, the sick being transported to Uasin Gishu District Hospital more than 4km away. Transporting the sick are said to cost up to KShs. 3,000, a difficult sum for people who have lost all they owned.
- A nurse aid who is also an IDP and who maintains a First Aid Kit in the camp reported the 3 most prevalent health concerns in the camp to be diarrhoea in children, malaria and acute respiratory infections.
- There are patients with chronic illnesses such as asthma, hypertension and diabetes without any medication in the camp. 3 HIV/AIDS patients previously on ARVs are also in the camp without drugs.
- Team was shown a six year old girl in the camp who was sexually assaulted by her father who has since disappeared. Following the incident, the girl's mother is severely traumatised and has ceased to talk.
- No counselling services available in the camp.
- Uasin Gishu District hospital, the referral hospital for the camp has shortage of drugs (antibiotics-paediatric and adult, analgesics, drugs for chronic illnesses), laboratory reagents and supplies, theatre materials and consumables such as cotton wool, gauze, strapping, detergents and disinfectants.
- No change has been noted in the utilization of services in the hospital since the crisis started.
- After discussion with the Medical Officer in-charge of the hospital, outreach teams will be sent to the camp starting next week.

For further information

<http://www.afro.who.int/>

<http://www.who.int/hac/>