WHO/UNFPA assessment report
Gori, Georgia
30 August 2008

Summary

Purpose of the assessment was to get an overview of the health situation and health needs of IDPs in Gori.

Selected findings

The joint assessment team of WHO (Gerald Rockenschaub, David Katcharava) and UNFPA (Maha Muna) visited the kindergarten # 12 with 234 IDPs and the tent camp in Gori, with an estimated 1200 IDPs on 30 August. Interviews were conducted with local health staff from the pediatric policlinic in Gori, with GPs servicing the IDP centers and with representatives from the “health and social programs agency”, with NGOs (Red Cross, IRC) and UN agencies.

IDPs interviewed reported free access to essential health services and medications and the availability of ambulance services for medical emergencies. There were some gaps in provision of psychosocial support, particularly for vulnerable groups, like the elderly and women with young children.

Recommendation:

As local health authorities and functioning local health services are currently coping well with the increased caseload caused by IDPs it is essential that all health interventions are well coordinated with local authorities to ensure an integrated approach with existing systems.

Findings:

According to health authorities and NGOs there are currently 22 IDP collection centers in Gori, many of them in kindergarten facilities, with an estimated total of 4000 IDPs. The number is fluctuating due to efforts by the authorities to relocate IDPs from Tbilisi to Gori.

The C1 Community Assessment Questionnaire was used for selected interviews but due to time constraints only priority concerns were covered.

In a meeting with Vato Surguladze, head of the “health and social programs agency”, he reported an estimate of 4000 IDPs in Gori and 8000 IDPs in Western Georgia. Health challenges stem from the dire living conditions in the kindergarten and tents, primarily skin diseases, psychosocial problems and a gap in supply of special prosthesis for mine victims. Furthermore, transportation to and from villages remains restricted due to insecurity on the roads in Shida Kratli region.

During a visit to the pediatric polyclinic in Gori the Director reported a well coordinated arrangement of health services. Health professionals from the polyclinic visit IDP centers daily on a voluntary basis, after their regular clinic hours, to provide both GP and pediatric services to all IDP centers in and around Gori. The polyclinic is closely collaborating with the local
children’s hospital to cope with the increased pediatric case load, and is supported by UNICEF. Support in terms of transport capacities would facilitate their efforts to serve the various IDP collection centers. The hospital also offers comprehensive reproductive health education and awareness sessions. Services for reproductive health are anticipated to improve with the opening of the new maternity house in Gori. UNFPA is carrying out a mapping and facility assessment on reproductive health to determine and support outstanding needs not met by Ministry of Health, including iodine supplement and availability of family planning supplies.

**Kindergarten # 12**

The collection centre accommodates 234 IDPs (74 families), from the buffer zone and from villages surrounding Tskhinvali. The overall watsan conditions meet basic standards with acceptable toilets and water supply. Cooking facilities are available with daily food distributions organized by the local Red Cross. There is some extra need for mattresses and non-food items (hygiene bags – UNFPA distributed 50 family hygiene bags). We interviewed the GP servicing the centre on a daily basis, and a physician from the ambulance services, who provided treatment for an elderly diabetic woman with hypertension, who was then referred to the local hospital for further treatment. The center is also visited by a pediatrician on a daily basis. The GP reported isolated diarrhea cases, which are reported to the NCDC. The referral system seems well established and following a government decree, health care is provided free of charge to all IDPs, including full delivery care and post-partum feeding. Medications are prescribed by physicians on a special “100 form” and the prescribed medications ordered and delivered via pharmacy and polyclinic, with currently no reported gaps in drugs and medical supplies. There is definitely a need for psychosocial counseling and support, as many IDPs suffer from traumatisation through loss of relatives and friends, as well as the destruction and loss of personal property and livelihoods.

**Tent Camp**

The tent camp located on a sporting ground on the outskirts of Gori has been gradually expanding for 4 days and is currently accommodating around 1200 IDPs (328 families). Overall coordination from the UN side is with UNHCR. Red Cross Italy provides meals with a field kitchen, UNICEF coordinates water supply and IRC is currently constructing latrines and shower facilities. The camp is secured by Georgian police who report no security problems. Several NGOs are planning to support soil improvement measures and trenching to prevent flooding during the upcoming rainy season. There is a need for IEC material on water, sanitation and hygiene which could be supported by UNFPA peer education teams.

Local health authorities, GPs and pediatricians from the local polyclinic visit the camp on a daily basis. They conducted tent to tent visits yesterday, with no major health problems reported (there are some cases of skin diseases, and chronic disease patients). According to the local authorities, there are no pregnant women reported in the camp. Registration is currently underway. A doctor from the pediatric policlinic accompanying the assessment team conducted some clinical follow up visits. According to UNHCR, MSF France intends to provide specialized services, and the WHO team recommended to coordinate with local health authorities. Local health authorities also attended a planned coordination meeting on 1 September to brief UN agencies and NGOs on existing mechanisms for health service provision for IDPs.

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