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Immediate post-flood recovery activity - Brief guidance note

(PH division, Directorate of Health Services, version updated 19.8.2018)

Depending upon the severity of flood the 14 districts of Kerala are grouped under three categories.

Category 1 Highly affected :

- 1. Water logging for more than five days
- 2. More than fifty percent of Panchayath. Municipality area affected

Category :2 Moderately affected :

- 1. Water logging for three to five days
- 2. 30-50 percent of panchayaths/Municipality areas

Category :3 Mildly affected :

- 1. Water logging for less than three days
- 2. Less than 30 percents

District Under Category One(highly affected)

- 1. Wayanad
- 2. Pathanamthitta
- 3. Idukki
- 4. Alappuzha
- 5. Ernakulam
- 6. Trissur
- 7. Palakkad
- 8. Malappuram

Moderately Affected

- 1. Kozhikkode
- 2. Kottayam
- 3. Kannur

Mildly Affected

- 1. Thiruvananthapuram
- 2. Kollam
- 3. Kasaragod

In the most affected districts the cleaning process must be completed intensively within a period of maximum seven days or earlier.

- Moderately affected districts do the same within five days or earlier.
- Mildly affected districts do the same within three days or earlier.
- Activities should be done under the leadership of elected members, voluntary organizations, ASHA workers, Anganwadi workers, Youth clubs, Public and Health workers.

Aim- Providing health advice regarding

- The cleaning -up process
- Short- and longer-term risks to health from flood contamination.
- Practical advice to people re-entering their homes, clean-up workers and deployed personnel.
- To prevent health-related 'secondary disasters'

Important basic points . - Tips for avoiding 'secondary disaster' like evnts

- People should not return home before it is safe (structure, electrical, cooking gas, etc). *Communicate the same to LSG authorities/ rescue and revenue officials* for coordination
- Remember threats to food and water safety** from contamination of supplies and surfaces by flood waters –
- Maintain hygienic and sanitary precautions until the clean-up is complete.
- Ensure electrical safety with the help of electricians before switching on electricity main switches/ household appliances
- Watch out for hidden reptiles- snakes, etc inside homes/ shelves, storage spaces etc
- All to please comply with technical guidance of Health Department officials.

Disseminate preventive health messages:---

- o Good hand hygiene practices- soap and water handwash, hand sanitisers etc
- o 20 minute boiling of drinking-water, even if bottled or super-chlorinated
- o Super-chlorination of water sources- wells, tanks See below **
- o Safe food preparation techniques- do not mix left overs with fresh food
- Early treatment-seeking behaviour in case of fever- especially for very young, very old, and pregnant/co-morbidity-patients
- o Personal protection mosquito- repellant creams, coils, 'dhoopams' etc
- Enhanced vector control interventions, adapted to the local context.

Generator use caution

• Be aware of risk of carbon monoxide poisoning cases where generators are continuously used .This can be avoided by ensuring proper ventilation , and not placing the generators in closed spaces

Basic Safety points related to cleaning -up activities.--

- Householders should try to wear appropriate gloves and foot protection while cleaning dirty areas.
- Clean-up crews should in general wear essential protective measures, like waterproof gum- boots, hard hats, goggles and heavy duty gloves.
- Bleach Solution/ DCS- (Disinfectant Cleaning Solution) may be used for all general cleaning and decontamination processes, -(floors, walls, ceilings, wood and plastic furniture, household articles, etc, *but not any electrical device*) This is to be done preferably after preliminary removal of mud, silt, debris etc-Preparation method --see below**
- Clean-up workers should be advised TT vaccine if their vaccination status is not up to date.
- Wounds, burns, cuts and injuries should be treated immediately by washing, and application of common antiseptic ointments, even if minor. Any worsening(redness, pain , swelling, pus) to be shown to a doctor /nurse/ health worker

✓ Preparation of DCS bleach solution-

--150 gms Bleaching powder, and 2-3 tsp common soap powder or washing soda(alakku kaaram) for every 10 litres.

Place the required quantities in a bucket, add small quantity of water, mix well into a smooth paste, add the full quantity of water, mix well, wait 5-10 minutes for sedimentation, the supernatant liquid is now ready for use

✓ Super-chlorination of wells/ tanks /underground sumps

- Bleaching powder 5 grams (one teaspoon) for every 1000 liters of the estimated volume of the well/tank/sump to be added after making a paste of the required total quantity, and diluting, and sedimenting as above
- This process to be repeated two times per week, eg Wednesdays and Saturdays for 2 months
- ✓ Water safety for Drinking water and Water for washing utensils, vegetables etc --Methods for Water Chlorination
- o Using Chlorine tablets-- One chlorine tablet (500mg) for Twenty litres water
- OR One 12.5 gram tablet for 500 litres
- OR One 25 gram tablet for 1000 litres
- Using Liquid Chlorine--_20 ml of liquid chlorine for 1000 litres water (usage of liquid chlorine. This should be done under strict supervision of trained health staff.

Cleaning of outdoor premises, compound etc adjacent to buildings, residences

- This should initially include collection and safe disposal of solid wastes, biological wastes like carcasses of animals, rotting vegetation etc.
- Fly breeding may be further discouraged and a certain degree of sanitation achieved by scattering a "Sanitising Mixture" prepared by mixing Lime powder and Bleaching powder in the ratio 4:1 (eg 1 Kg lime powder +250 Gm Bleaching powder)

Ground level <u>Guiding and Supervising Teams</u>

- Each team to consist of 3-5 members-- eg --ASHA worker*, Arogya Sena member* ,Elected ward member, NGO volunteer, Health Staff (* *mandatory*)
- Each team responsible for supervising the activity in 100 houses, based on a microplan prepared by the area health staff (Each team can subdivide responsibility among themselves in watertight documented manner)

- One HS/HI/PHNS/PHN will be coordinating 10 teams each
- The supply of bleaching powder for chlorination will be done by the team along with the awareness dissemination to the householders
- Home visiting team should carry sufficient Doxycycline tablets for giving to those who have not yet taken Doxy prophylaxis
- Vector control activities also should include additionally in supervision from 7th day of activities.
- During the house visits, the team will also enquire details about any one with Fever/ Fever + rash / Diarrhoea in the house. Report it into PHC MO in writing.
- Overall supervision should be done by the PHC MO

Acute mental stress/ distress

- Usually temporary, mostly self limited in a reasonable time.
- Post-flood psychological assistance to be provided by psychologists and/or trained personnel.
- People should be encouraged to seek assistance if psychological symptoms aggravate or persist.
- The mental health of responders and health care personnel should be considered, those expressing distress to be helped by counsellors/ psychologists.
- Camp officials/ field staff should inform the MO if they come across any person who was taking medicines for psychiatric issues.
- Anticipate long-term mental health issues (such as depression or post-traumatic stress disorder) monitored in affected communities.
- Prompt restoration of communities and social structure of the affected residents/ communities is important in the context of prevention of long-term mental health outcomes of disasters.

District public health team – DMO,DPM and all district level programme officers should supervise the activities and should report regularly.

For any clarifications or any related advice, please call Health Department NHM 24 -hour helpline DISHA on 0471-2552056, (or 1056 toll free)

For the updated version check website daily: <u>www.dhs.kerala.gov.in/public</u>health