

# International Medical Health Organization (IMHO)

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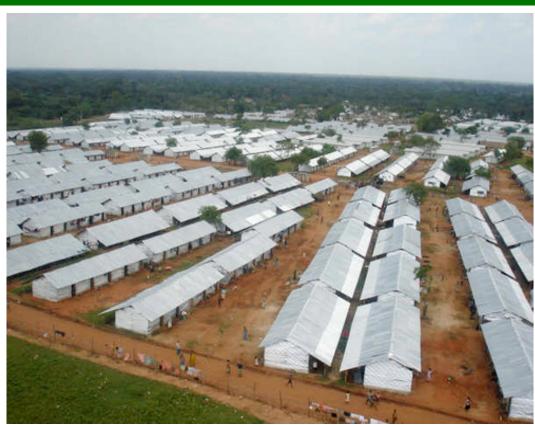
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### The Latest on IDPs in Sri Lanka

As of July 17, the UN Office for Coordination of Humanitarian Affairs (OCHA) reported that nearly 282,000 IDPs were still residing in temporary camps in the Northern Province, including approximately 221,000 people in Manik Farms IDP camp. In the last few weeks, several thousand of these IDPs have since been resettled elsewhere, although the majority still remain. Camp populations continue to fluctuate as a result of IDP departures, as well as IDP transfers within existing camps and to newly constructed sites in response to overcrowding concerns.

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In July, the UN Children's Fund (UNICEF) released the results of a May rapid assessment of the nutritional and health status of more than 1,000 children under five years of age and 84 pregnant women in the Manik Farms IDP camp. According to survey results, 41.9% of children had diarrheal diseases, 61.9% of children suffered from acute respiratory infections, and 6% had lower respiratory tract infections.

From April to June, the World Health Organization (WHO) reported 68 admissions for meningitis and encephalitis from IDP sites to the medical ward of the Vavuniya General Hospital. Of the 68 admissions, the WHO reported 34 deaths, representing a case fatality rate of 50%.

The following text is taken from a July 13, 2009 report by Doctors Without Borders/Medecins Sans Frontieres (MSF), one of IMHO's partners that we have supported: "Working in conjunction with the Sri Lankan Ministry of Health, Doctors Without Borders/Médecins Sans Frontières (MSF) medical teams in Vavuniya District in Sri Lanka's northeast have performed more than 5,000 surgeries over the last five months, most to treat conflict-related injuries. Activities are currently focused on post-operative care, including minor surgery, dressings, and physical therapy, as well as hospitalizations for displaced persons.

There are many pregnant women and many children who are developing complications from respiratory illnesses, malnutrition, and diarrhea . . . [f]ewer patients are arriving at the hospitals, but their numbers still exceed bed capacity. The total number of patients at the 450-bed hospital in Vavuniya has stabilized in recent weeks at approximately 1,200. MSF is working with Ministry of Health staff in the Vavuniya and Pompaimadu hospitals, as well as in an MSF hospital located across from the Manik Farm camps.

Surgery and post-operative care for the wounded still constituted most of June's activities, with nearly 1,200 surgeries performed on war-related injuries and thousands of wounds dressed . . .

At the MSF hospital located across from the Manik Farm camps, staff has hospitalized 600 patients since its opening on May 22. Most are displaced persons, referred either by Ministry of Health staff working in the camps or by other hospitals that have run out of space. They arrive and leave in ambulances, accompanied by a member of the security forces. "The primary causes of hospitalization are old wounds and respiratory and skin infections," says Marie-Noëlle Rodrigue, MSF's emergency operations manager . . .

Some displaced persons may require hospitalization for several days to several weeks. They include, for example, paralyzed and permanently disabled individuals who are treated at the Ministry of Health's Ayurvedic hospital in Pompaimadu. MSF's physical therapists help them regain some mobility so that they can move around with the crutches and wheelchairs provided by Handicap International.

Some of the wounded and ill are burn survivors, struggling to return to normal life. 'I remember one woman whose face was ravaged - you couldn't tell her age,' a nurse recalls, 'and she was with her eight-year-old daughter, the only one of her four children to survive. The child helped her in every aspect of her daily life. The woman would just disappear into herself for periods; it was the only way to escape the pain, in spite of the medication. She had to undergo several skin grafts after being wounded by multiple bomb explosions. I also remember a seven-year-old boy who no longer spoke and hadn't eaten practically anything for two months, since his father died. He was severely malnourished and did regain weight while he was hospitalized. But he never said a word right up until the time he left.'"

IMHO continues to receive up-to-date information about the ongoing needs of the IDPs and remains committed to serving this vulnerable population in whatever capacity is most appropriate.

# **Nutrition Remains a Top Priority for IMHO**



One of the most basic and critically important needs of those in marginalized areas is that of proper nutrition. As such, IMHO is committed to supporting the basic nutritional needs of those that are malnourished, especially for women, children, and the elderly. Poor incomegenerating opportunities and high food prices have resulted in significant malnutrition among both children and adults throughout Sri Lanak. The ongoing nutrition programs IMHO sponsors in Sri Lanka constitute one of IMHO's main efforts. One such beneficiary is the Point Pedro Sri Ramakrishina Sarada Sevashrama, for which a children's feeding program continues. Students in Point Pedro (*above*) benefit from milk and other nutrition to which they otherwise lack proper access or resources. You can see more photos (from July 2009) on our website here under the 'Maternal & Child Health' tab: <a href="http://theimho.org/projects/basic-welfare">http://theimho.org/projects/basic-welfare</a>

# Rehabilitation Unit in Mannar Taking Shape

As many as 30,000 individuals in the north and east of Sri Lanka have lost one or more limbs as a consequence of the recently concluded civil war. These individuals are otherwise healthy and, if fitted with the appropriate prosthesis after undergoing the required rehabilitation, can become fully functioning members of society within a relatively short time. IMHO has taken on the responsibility of coordinating support for this project to acquire equipment for the provision of rehabilitation services through the Mannar District General Hospital. An intensive and supervised rehabilitation program is required prior to fitting patients with a prosthesis. The rehabilitation equipment will also be used to provide services to those who have suffered physical trauma such as fractures and spinal cord

services to those who have suffered physical trauma such as fractures and spinal cord injuries in order to allow them to make the transition to non-assisted living.

Once the limbless have undergone the required rehabilitation program, they will be fitted with the prosthesis through the efforts of two relief organizations (*Caritas* and *Friend in Need*) who have agreed to supply the required prosthetic limbs. As such, the immediate and urgent requirement is for the equipment necessary to commence rehabilitation services delivered by the team in the Mannar District Hospital. The rehabilitation center is composed of a doctor, 1 nurse, 1 physiotherapist and 6 physiotherapist assistants. These services will be provided to the current caseload at the hospital of 450 patients including 89 amputees. It is anticipated that the ultimate caseload of patients requiring some kind of prosthesis/rehabilitation services is much larger.



This project is estimated to cost US\$90,000, which will help get these unfortunate individuals back on their feet and become fully functioning members of society again. IMHO has already transferred \$13,350 for 2 traction machines and 1 traction bed. A team of surgeons started fitting patients with lower limb prostheses on July 11th, and completed the first phase by July 22nd, benefiting 122 patients. Physiotherapy is now vital for these prostheses to function well.

## **Past IMHO Events**

\*\*\*New York Uyir Kappom Contributes to Relief Efforts, Helps Amputees\*\*\*

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situation in Sri Lanka and their continued humanitarian needs. The event took place at the South Beach Psych Center in Staten Island, with more than 65 families taking part. In total, about \$7,300 was raised that night. These funds, along with those collected from the Texas Chapter's fundraising efforts, will be used to buy 1 traction bed and 2 traction machines to provide physical therapy for amputees at Mannar General Hospital. An update on IMHO projects was presented at the event. Artists from Canada, including Dushy Gnanapiragasam, Meera Sitsabaiesan, Rasiah Rasaratnam, and Eugeine Vincent did a multimedia presentation regarding the human suffering of those affected by the recent crisis and those still interned at the camps across the North. It was a beautiful and moving presentation focused around the universal concept of humanity, a bond which connects us all. Thanks to all who planned and supported this terrific event!

### \*\*\*Ohio Chapter Contributes to IDP Relief\*\*\*

The Ohio Chapter of IMHO held an event on Saturday, July 25th in Cincinnati. Approximately 100 people joined us for the event and listened to a few presentations, including video presentation, on the ongoing IDP situation in Sri Lanka and IMHO's efforts in response. A simple dinner was also served. So far about \$3,000 was collected, although further donations will of course be gladly accepted.

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

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 atrisk 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)

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