



வடகிழக்கு மனித உரிமைகள் செயலகம்

North East Secretariat on Human Rights - NESOHR

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### Vanni IDP health situation as at mid October 2008

The enforced shortages of many items that are needed to protect the health and nutrition of the IDPs as well as the non-IDPs in Vanni is an ongoing problem. NESoHR is releasing this report based on interviews held with the local health authorities to bring to light the interconnected needs that have not been met thus endangering the lives and health of the IDPs and non-IDPs.

The overwhelming concerns of the health authorities spoken to were about the potential for a malaria epidemic, malnutrition among the very young, poor shelter resulting in high incidences of snake bites, poor sanitation causing large number of cases of diarrhea presenting at the hospitals, and increased road accidents due to overcrowding. Beyond the specific shortages relating to the specific health issues, fuel shortage worsening the situation is a common thread running across all the concerns raised by the health authorities.



### **Food**

The shortage of four basic food items, rice, flour, lentils and sugar, in Vanni have been publicized by many organizations both local and international that are/were working in Vanni. In recent times the World Food Program had brought some of these supplies into Vanni in large convoys amidst much hurdle in the route taken by the convoys. Sri Lankan Government has also brought in some convoys. Both of these supplies were targeted as relief for the recent IDPs who number around 50,000. The Vanni population is more than 400,000 and the remaining 350,000 people do not benefit from these convoys. Blockade on the supplies for this second group which is commonly sold through the MPCS (Multi Purpose Cooperative Society) shops has continued throughout 2008 and has worsened since the UN and other international agencies were expelled from Vanni by the Sri Lankan government. Indeed Kilinochchi district has received almost no quota for its MPCS shops. Covering the period from January 2008 until end of August 2008, NESoHR has published detailed data on the requirements and quantities received for these four basic food items in two reports, titled,

“*Vanni Displacement Update*” in August and “*Expelling Humanitarian Agencies*” in September. The food received for this second group had been drastically reduced since August. An updated detailed Table of the requirements and the total quantities received of these four basic food items will be published in our end of October monthly report.

### ***Threat of malaria***

Vanni suffered a great deal due to malaria in the 1990’s and it was eradicated within two years of the 2002 ceasefire once the anti malarial spray and other items became readily available. In 2008, the local health authorities were informed by the Anti Malaria Campaign office of Sri Lanka that several Sri Lankan soldiers stationed in Mallavi in the Mullaithivu area were reported to have been infected with malaria. Since then, ten cases have been diagnosed of malaria in the local hospitals.

The high density of IDP population crowded in a small area and lack of proper waste removal are seen by the health authorities as the two basic causes that could cause the spread of malaria. The blockade on anti malarial spray as well as fuel is causing further problems in arresting its spread. There is genuine worry that the situation may return to what existed in the 1990’s if quick action is not taken to prevent its spread by improving the living conditions of the IDPs and by active spraying of anti malarial insecticide around the IDP areas.

### ***Malnutrition***

Even during the mid ceasefire period of 2005, a UNICEF survey found 35% malnutrition among children of Vanni. The high energy biscuits that UNICEF was about to bring into Vanni to correct this was snarled in a controversy created by the Sri Lankan government which resulted in UNICEF abandoning the project. Thiriposa is another long term high nutrition food distributed by the Sri Lankan government for all children under five. This distribution too has stopped in Vanni for more than six months. The last of the Thiriposa stock destined for Vanni in September was also turned back by the Sri Lanka military at Omanthai.

The loss of livelihood of the IDP families makes it beyond their means to buy even a minimum of vegetables and fruits for their children. According to the health authorities the prognosis on malnutrition among children is very bad indeed.

The list of items that have been recently turned back by the Sri Lanka military also include dates, Nestamalt and noodles.

### ***Snake bites***

Large number of the IDP families has setup their shelters by clearing bushes and forests or near highlands next to paddy fields. All of these areas uninhabited until then have a snake population and some of these snakes are very poisonous. The IDPs do not receive any kerosene as part of their relief. Kerosene is needed to provide even a small lighting during the night. They are unable to buy kerosene at the present high price that is created by the shortage. Thus they live and sleep in darkness and are unable ward off poisonous snakes.

Over the last two months nearly 150 cases of snake bites were treated. There were three deaths due to snake bite one of them a 10 year old child. The most common snake bites on IDPs are caused by a species of small black snake called “Kandankaruvan” in Tamil. It is about 2 centimeters in diameter and is less than 50 centimeters in length. Its bite causes respiratory seizure unless treated within 30 minutes. The victims almost always have to be treated in the intensive care unit taking up a scarce resource. IDP victims of cobra bite have also been frequently treated in recent times.

Local health authorities are also concerned that adequate stock of anti venom medication is not available to them. With long delays in receiving all types of medication they fear that their stock may be depleted before it is replenished.

### ***Medicine quota***

Kilinochchi health authorities said that they have received only 75% of the third quarter allocation of medicines although the third quarter ended in September. Also, though a third of the fourth quarter is already over, they are yet to receive any of the fourth quarter allocation. The fourth quarter medicine destined for the Kilinochchi district has been waiting in Vavuniya for one month.

The district health authorities are facing shortages of many drugs. In particular, there is acute shortage of antibiotics and penicillin both common medicines needed to treat injuries. Injuries are common in Vanni not only due to aerial bombing and shelling but also due to increased rate of road accidents resulting from displacement and overcrowding in areas to which IDPs have flocked.

### ***Fuel***

Shortage of fuel is seen as the most problematic item in addressing most of the health issues raised by the health authorities. Spraying anti malarial insecticide, providing clean drinking water to the IDPs, having a small light for the IDP homes at night to look out for poisonous snakes are all restricted due to the stringent fuel restrictions imposed on Vanni.

Health services in Vanni rely of diesel for transportation and electricity both essential services. Kilinochchi health authorities said that they have been receiving 15,000 litres of diesel per month prior to 2008 which was reduced to 5000 litres per month since January 2008. This was further reduced to 2700 since July. Mullaithivu health authorities said that they have been allocated 14,000 litres of diesel per month but they are receiving only 2700 litres per month. In effect the Vanni health services are receiving only 20% of the very minimum diesel allocation they need.

Kerosene is an essential item for life in Vanni. At the very minimum it is needed to provide kerosene lamp light when there is no other lighting available. For the IDPs who have set up shelters by clearing bushes this is the only form of lighting that could ward off poisonous bites. Kilinochchi District Secretariat sources said that for the months of September and October they were granted permits to bring 400,000 litres of kerosene but they received only 190,000 litres for September and 70,000 litres for October. In effect it has received only 30% of allocation for these two months for the entire population of more than 200,000 people in

the district. Indeed kerosene is used not only for lighting but by fishermen for running their boats, by farmers for crop cultivation and by schools and offices for running electricity generators. Mullaithivu District Secretariat estimates their total requirement of kerosene to be 1,150,000 litres (lighting for 55,000 families – 550,000 litres; farming – 200,000 litres; fishing – 200,000 litres and schools and offices – 200,000 litres). Yet the Sri Lanka military permitted only 400,000 litres less than 50% of the district requirement.

The type of embargo on fuel, medicine, food and other items are sophisticated thus hiding the cruelty behind it. Restricted amounts are let in and when some pressure is exerted on the Sri Lanka government it allows an increased flow that is again reduced in due course. Another aspect is how health and other relevant authorities in Colombo can truthfully claim that they have given permission to transport the requested amount. But either at the Defense ministry level or at the Joint military head quarters level in Vavuniya these items is blocked. Thus the desperate Vanni health authorities and District Secretarits are passed from desk to desk by the Sri Lankan authorities saying that all is well with quota permit and transportation of the essential items mentioned.

### ***Shelters, drinking water and toilets***

Though some shelters have been provided to the IDP families by the international agencies like UN and the ICRC, this is woefully inadequate. In a needs assessment report the Kilinochchi and Mullaithivu district secretariats estimated further 20,000 families need a very basic shelter made of pipes and thatched roof costing just LKR 40,000 each. The secretariats have also estimated 5230 temporary toilets are needed. Due to blockade of cement these cannot be built in the standard method and the Vanni health authorities have approved a toilet with toilets basin set on wooden floor and drums sunk into ground as pits. Unless immediate action is taken Vanni health authorities fear it may be too late to save the IDP population from epidemics.