

Each week, the World Health Organization Health Action in Crises in Geneva produces information highlights on the health aspects of selected humanitarian crises. Drawing on the various WHO programmes, contributions cover activities from field and country offices and the support provided by WHO regional offices and Headquarters. The mandate of the WHO Departments specifically concerned with Emergency and Humanitarian Action in Crises is to increase the effectiveness of the WHO contribution to crisis preparedness and response, transition and recovery. This note, which is not exhaustive, is designed for internal use and does not reflect any official position of the WHO Secretariat.

WEST AFRICA FLOODS



- ⇒ The UN has allocated US \$ 3.5 mn emergency response humanitarian assistance to Mali (\$ 1 mn), Ghana (\$ 2.5 mn) and Togo (\$1.4 mn). The grants are from the UN Central Emergency Response Fund (CERF) created in 2006 by the Office for the Coordination of Humanitarian Affairs.
- ⇒ In Ghana, the Flash Appeal requests a total amount of US\$9,913,136. As Health sector lead, WHO is seeking US\$400,000.
- ⇒ In Burkina Faso, a Flash Appeal is under preparation to assist the Government in responding to 93 000 flood-affected people, including 28 000 displaced.

Assessments and Events

- As of October 2007, floods have affected around 800 000, displaced over 44 000 and killed approximately 210 people in 14 countries: Benin, Burkina Faso, Cote d'Ivoire, Ghana, Guinea, Liberia, Mali, Mauritania, Niger, Nigeria, Sierra Leone, Senegal, The Gambia and Togo.
- In *Niger*, the weekly incidence rate of malaria has climbed above average: 353 cases per 100 000 compared to 159 cases at the same week in 2006.
- Across the region, the floods have brought unprecedented stress upon the health services just before the meningitis season. This year, this is expected to be especially severe, coinciding with the anticipated peak in the disease's 10-12 year cycle.

Actions

- Emergency response efforts by respective governments are being assisted by civil society, local community efforts, inter-governmental agencies and UN agencies. WHO is supporting the appeals for mobilization of funds.
- In *Burkina Faso*, the WHO Country Office has procured non-food items for distribution including tents, mosquito nets and jerry cans. WHO is working with UNICEF in respect of water and sanitation activities and malaria.
- In *Ghana*, WHO, UNICEF, and UNFPA will provide comprehensive health sector support for flood victims in the three Northern regions (Upper East, Upper West, Northern) and parts of Western and Volta Regions.
- In *Togo*, WHO donated to the MoH essential drugs and medical supplies for distribution to flood-affected districts. WHO is also working with the MoH in boosting the capacity for government to respond to increased needs for water borne disease prevention and monitoring measures.
- In *Mali*, WHO donated essential drugs to the MoH.
- In *Niger*, the WHO Country Office is assisting the MoH in the establishment of working groups to address improved treatment, prevention and logistics for the increasing rates of malaria.
- So far, WHO's activities have been supported by internal funds, from the Regional Office and Geneva.

SUDAN



Assessments and events:

- In Darfur, thousands of civilians were displaced following recent attacks (October 4-8) on the towns of Haskanita and Muhajaria. The deteriorating security in the region will further limit civilian access to health care.

Actions:

- High-level discussions/meetings to strengthen cooperation were held in Khartoum and Juba between WHO, the Government of National Unity (GoNU) and the Government of South Sudan (GoSS).
- In collaboration with the Federal MoH, WHO conducted a mission in Kutum, *North Darfur*, to respond to the reported cases of Leishmaniasis cutaneous. A training workshop was conducted for 3 days targeting 35 medical staff.
- In *east Sudan*, WHO supported the SMOH in the establishment of 10 cholera treatment centres by providing essential drugs and NFI logistical support.
- In *South Darfur*, WHO is working on chlorination of water at household level, safe storage of water for domestic use and information campaigns to lower the risk of water borne illness.
- In *South Kordofan*, WHO continues to work in IDP sites in Kuada with the Secretariat of health to provide health education to the population emphasizing hygiene and environmental sanitation for the prevention of AWD.
- Contributions for WHO's emergency activities in Sudan were received from ECHO, Ireland, Finland, the CERF and the Common Humanitarian Funds.

UGANDA FLOODS



Assessments and Events

- Health risks remain high. Improving access to health care is a priority. There are reports of several deaths due to pneumonia.
- Aid is progressively making its way to flood-affected communities. Humanitarian agencies are deploying daily operations in the Teso sub-region. Physical access constraints continue to present the largest obstacle to operations. OCHA reports immediate relief work is to be further assisted with three helicopters and one aeroplane becoming operational this week.

Actions

- WHO, on behalf of the health cluster, has mapped existing health centres in five districts of the Teso sub-region. Of a total of 124 health centres (92 governmental and 32 non-governmental), 116 are currently functional.
- WHO is now assisting health centres conduct inventories of available drugs and other supplies.
- Contingency planning against water-borne diseases continues. Cholera kits have been pre-positioned in all five districts and additional kits can be mobilized out of Gulu and Kampala if needs arise in other affected districts.
- Contributions for WHO's work in Uganda, funds were received from Sweden, Italy, the UK and the USA.

HORN OF AFRICA



Assessments and Events

- In *Somalia*, dozens of new cases of diarrhoea are reported from different districts in the Central South zone. In the district of Mogadishu, seven people are reported to have died from AWD. Elsewhere in Somalia, an estimated 50 000 people who fled violence in Mogadishu continue to struggle with inadequate food, poor shelter and poor sanitation in two towns in Galgadud region of central Somalia.
- In *Ethiopia*, human security in the Somali region continues to be a concern across all sectors. From protection to health. OCHA advises that humanitarian work needs to scale-up urgently with new initiatives. The Government has shown support in starting the implementation of activities in health, nutrition and emergency food assistance. Nationally, AWD is still a concern. There were 5823 cases in August and 2040 cases and 43 deaths (CFR 2.1%) in September, based on 80% completeness of reporting.
- In *Eritrea*, a MoH team investigated and confirmed the report of cholera outbreak in the Bada health centre in the temporary security zone. By mid day of 03 October, a total of 107 cases and 3 deaths (CFR 2.8%) had been reported.

Actions

- In *Somalia*, the WHO Country Office has assisted with the set up and supply of Cholera Treatment Centres in at-risk communities. WHO has pre-positioned 13 cholera kits in high risk districts.
- In *Ethiopia*, due to the persisting AWD epidemic, WHO still maintains seven consultants in the flood-affected districts. Emergency preparedness and stocks are in place in the highest risk areas.
- In *Eritrea*, WHO provided an epidemiologist to the MoH team investigating cholera at the Bada health centre. WHO provided additional technical support in control of the outbreak.
- WHO activities are supported by the CERF, Canada, Italy, Norway, Sweden, the United States and Finland for Somalia and by the CERF and the local Humanitarian Response Fund in Ethiopia.

DEMOCRATIC REPUBLIC OF THE CONGO



Assessments and events:

- In *North Kivu*, heightened insecurity in Masisi and Rutshuru districts is causing further displacement of civilians and reducing humanitarian access to the area.
- In the southern province of *Katanga*, reports have been received of cholera from the town of Lubumbashi and the surrounding area. There are unconfirmed reports of over 100 deaths due to AWD since 30 September.
- In the north-eastern district of *Ituri*, WHO confirms 31 cases of cholera and two deaths in the town of Tchomia, 62 km east of Bunia.

Actions:

- In *Kasai Occidental*, the MoH is continuing to respond to Ebola haemorrhagic fever with the support of a wide range of international partners.
- In the district of *Ituri*, WHO Country Office team members are coordinating efforts to control cholera and plague with the MoH, MSF and other health partners. A workshop on plague control was conducted by WHO on 10 October.
- WHO's emergency activities are supported by Finland, the CERF and the Country's Pooled Fund.

IRAQ



More information is available at:
www.emro.who.int/iraq/information_publications.htm#cholera_sitrep

Assessments and Events

- In *Baghdad*, as at 06 October, 4 cholera cases including one death are reported.
- In Basra, a second cholera case was confirmed bringing the number of cases to 2 from 2 districts.
- The first case of cholera in *Dahuk* was confirmed by laboratory test on 04 October.
- In *Dyala*, on 04 October, MoH reported 2 laboratory confirmed cases of cholera. Another 42 suspected cholera cases are reported.
- In *Tikrit*, from 11 September to 03 October, 2012 diarrhoea cases were reported.
- OCHA reports a shortage of potable water in the province of Missan, some 380 km south of Baghdad. Reportedly, there are over 790 000 people who are forced to utilize untreated water from the Tigris river.

Actions

- The WHO Country Office is fully engaged in assisting the Government of Iraq in responding to cholera. A team of cholera specialists, epidemiologists, sanitary engineers and other WHO staff are coordinating with the government, UN agencies including UNICEF and UNDP and NGO and community partners.
- The team provides technical support to health authorities and works to identify the source of the outbreak, including inspecting water sources, informing government officials, briefing media and identifying the urgent needs of the water quality laboratories.
- WHO has prepared and distributed case management guidelines for all hospitals and public health centres in all governorates. In addition, information campaigns on good hygiene practices and water handling are on T.V., radio and group work discussions.
- WHO's emergency activities are funded by Japan and the UNDG Iraq Trust Fund.

INTER-AGENCY ISSUES

- **Clusters.**
 - **Emergency Shelter Cluster.** A workshop will be held in Stuttgart, Germany from 13 - 22 October 2007. Another workshop will take place in Bangkok, Thailand, from 15-19 October.
 - **Global Cluster Leads,** IASC Partners and IASC Policy Focal Points will meet in Geneva on 16 and 17 October in preparation for Cluster-Donor workshop (Geneva, 30 October) and IASC Working Group (Rome, 5-7 November).
 - The next **Cluster/Sector Lead Training Workshop** will take place in Montreux, Switzerland, from 15-19 October 2007.
 - A one-day workshop for **Donors and Global Cluster Leads** will take place in Geneva on 30 October 2007.
 - The **Global Health Cluster** will meet face to face in Geneva from 14-16 November.
- **Western Sahara.** The Head of the United Nations Mission for the Referendum in Western Sahara (MINURSO) will brief the humanitarian community in Geneva on 15 October.
- **Chad.** A meeting on the findings of the recent multi-donor mission to Chad will take place in Geneva on 15 October.
- On 19 October, the **UN Executive Committee on Humanitarian Affairs** will discuss Chad/Central African Republic and the occupied Palestinian territory.
- **Afghanistan.** On 17 October, the IASC Weekly meeting in Geneva will update on recent missions to Afghanistan.
- On the occasion of **World Food Day**, the Humanitarian Working Group in Geneva will discuss on 17 October the principles on the Right to Food and FAO operations.
- **Gender and Humanitarian Action.** The annual face to face meeting of the IASC Sub-Working Group will be held in Geneva on 18 and 19 October 2007. On 10 October, the Gender SWG updated the IASC Weekly meeting.
- **CERF.** The next inter-agency meeting on the Central Humanitarian Response Fund will be held on 19 October.
- **UNDAC.** The United Nations Disaster Assessment and Coordination Asia-Pacific Induction Course 2007 is taking place in Christchurch, New Zealand, from 14 to 26 October 2007.
- **Consolidated Appeals Process.** The IASC CAP Sub-Working Group will meet again on 25 October.
- The **Global Symposium +5 'Information for Humanitarian Action'** will take place in Geneva from 24-26 October 2007.
- The next **Emergency Team Leadership Programme (ETLP)** will take place in Villars, Switzerland, from 28 October to 2 November 2007.
- A High-Level Meeting on **Humanitarian Preparedness for an Influenza Pandemic**, organized by UNSIC and the IFRC, will be held in Geneva on 29 October 2007.
Preparations are ongoing for the next **IASC Working Group** in Rome in November 2007.

SPECIAL EVENTS

Vaccines for Meningitis. On 09 October, the WHO Regional Office for Africa called a meeting - *Partners of the Fight Against Meningitis* - supporting an appeal for mobilization of funds and other relevant resources to ensure that vaccinations are secured for meningococcal meningitis across much of sub-Saharan Africa. The meeting was held in Burkina Faso's capital Ouagadougou and was attended by the Minister of State and Minister of Health and key UN and NGO partners.

WHO and Merlin are organizing a new course **Analysing Disrupted Health Systems in Countries in Crises**, that will be held in Tunisia, from 22 November to 1 December. The deadline for applications is 15 October.

http://www.who.int/hac/techguidance/training/analysing_health_systems

Please send any comments and corrections to crises@who.int

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Health Action in Crises

WHO is working with partners to address the health aspects of crises in more than 40 countries. Check the Health Action in Crises Web site for more details: <http://www.who.int/hac/>