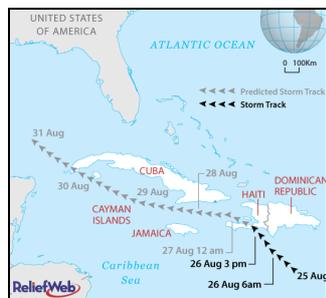


Each week, the World Health Organization Health Action in Crises in Geneva produces information highlights on critical health-related activities in countries where there are humanitarian crises. Drawing on the various WHO programmes, contributions cover activities from field and country offices and the 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.

HURRICANE GUSTAV



More information is available at www.paho.org/English/DD/PED/gustav0908.htm

- ⇒ In *Haiti*, UN and NGO capacity has been stretched by hurricane Gustav as most pre-positioned relief items have now been distributed to affected people in the South and South West departments.
- ⇒ UN agencies are considering an appeal under the CERF rapid response window to address the needs occasioned by Cyclone Gustav.
- ⇒ In *Cuba*, The Resident Coordinator is calling a meeting with donors and NGOs on 4 September to share information. OCHA is ready to help prepare a CERF application and an emergency cash grant.

Assessments and Events

- Hurricane Gustav passed over Cuba after killing at least 86 people in the Dominican Republic, Haiti and Jamaica.
- *Haiti's* President announced that the country is facing a catastrophe after being hit by three storms in less than 21 days. Fay, Gustav and Hanna have killed more than 200 people and affected tens of thousands. At least 15 000 families are displaced of whom 6790 have found refuge in shelters. Only limited humanitarian assistance has reached affected populations so far but assessments have begun.
- In *Cuba*, the latest figures indicate that 250 000 people were evacuated, including more than 77 000 in Havana, 25 000 in Southern Matanzas and up to 148 000 in Pinar del Río province. Thanks to effective preventive measures no casualties are reported. More than 90 000 houses were damaged and agricultural lands were devastated. Up to 80% of Pinar del Río is without power and health facilities are reporting damage.
- In the *Dominican Republic*, eight people were killed and more than 6200 people were evacuated. Currently, 50 communities are still isolated.
- In *Jamaica*, 12 deaths are reported in 72 affected communities. More than 800 people are in shelters. Flooding is disrupting the water supply. All health systems are functioning, although two hospitals remain without electricity and three report damages.

Actions

- The WHO/PAHO Emergency Operation Centre in Barbados has been activated.
- The health regional response on standby includes four disaster specialists, three SUMA (Supply Management System) experts and two epidemiologists.
- In *Haiti*, WHO/PAHO facilitated a Civil Protection Agency/MoH assessment with local emergency networks. Medical team and supplies are on standby.
- In *Cuba*, medical teams are on standby. WHO/PAHO is in contact with the MoH and the UN Country Team.
- In *Jamaica*, recovery activities are under way. WHO/PAHO deployed a SUMA expert and a disaster specialist.

NEPAL - INDIA: THE MONSOON



Assessments and Events

- Flooding caused by a breach in the Kosi River's embankment has affected 70 000 people in Nepal's Sunsari district and more than 3 million in India's Bihar state. Both countries face immediate and medium-term challenges in providing safe water and sanitation as well as access to health care.
- No outbreaks have been notified so far, but media report a rise in the number of diarrhoea cases. The risk for water- and vector-borne diseases is high due to massive population displacements, heat, overburden hygiene and sanitation facilities and stagnant water.
- In *Nepal*, 54 000 people are displaced, a large number of whom have found shelter in the 27 sites established in Sunsari and Saptari districts.
- In *India*, 300 000 people are now in relief camps and many of the other evacuees are staying with relatives. According to estimates from state officials, at least 200 000 others still need to be rescued.

Actions

- WHO is providing supplies and technical assistance to both countries.
- In *Nepal*, WHO sent medicines and equipment for more than 120 000 people for one month to the 27 shelters established in flood-affected areas. Anti-malaria and anti-diarrhoea supplies were also deployed, while larger quantities of medicines were pre-positioned. Staff from the Country Office have joined field missions to respond to and assess health needs, as well as deliver medicines. WHO is planning a field mission to neighbouring Saptari district.
- In *India*, the Government has set up accommodation and health centres for the displaced people. Authorities provided 20 million water purification tablets and

PAKISTAN



More information on is available on the [EMRO Regional Office web site](#).

- ⇒ Pakistan is on the UN list of countries most affected by the food price crisis. More than half the children suffer from stunting and about 9% from wasting. A recent study of 1407 households in two Sindh districts conducted by Action against Hunger has placed the prevalence of acute malnutrition at 22%.
- ⇒ The Health Cluster was activated in Islamabad, Peshawar and Quetta and the NWFP Government organized the clusters at provincial level.

Assessments and Events

- Increased hostilities in the NWFP's Bajaur district have displaced 250 000 people. By 24 August, 60 000 were accommodated in camps, schools and other government buildings in the district while more than 92 000 had sought refuge in camps or with host families in neighbouring Lower Dir district. Most are women, children and older people.
- Early August, around 300 000 people had already been displaced by torrential rains in the province's Peshawar district.
- Assessments show that IDP camps lack drinking water, health care and adequate water and sanitation, raising the risk for outbreaks of waterborne diseases, particularly as it is monsoon and flood season. Malaria is also prevalent in those districts, accounting for at least 30-40% of the consultations last year.

Actions

- Authorities in flood-affected areas provide emergency health care in 11 medical camps but the increasing number of patients is depleting the limited resources. Requests to the Federal MoH for additional drugs and supplies as well as for operational costs are met with the help of WHO and UNICEF.
- In Peshawar, the outbreak early warning system (DEWS) active in seven medical camps reported that 30 849 people had sought care between 5 and 26 August. The DEWS reported upper respiratory tract infection as the first cause of consultation (21%), followed by skin diseases (16%), acute diarrhoea (10%) and lower respiratory tract infection (5%).
- WHO is supporting health authorities and other partners such as Save the Children investigating rumours of suspected outbreaks. An outbreak of acute watery diarrhoea was thus contained early through effective interventions from health authorities supported by WHO, UNICEF and WASH partners.
- WHO is preparing an appeal for the CERF to support emergency health interventions for IDPs from Bajaur district and flood-affected areas in NWFP. In cooperation with the MoH and health partners, the project aims to:
 - Support and facilitate coordination at all levels;
 - Support the delivery of essential health interventions to IDPs and host communities;
 - Ensure the provision of essential medicines and supplies;
 - Strengthen disease and nutrition surveillance and early warning systems;
 - Facilitate emergency mass vaccination campaigns against measles and polio.

CHAD



- ⇒ As Health Cluster lead, WHO participates in the preparation of the CAP 2009.

Assessments and Events

- In the east, the hepatitis E outbreak is ongoing with 51 new cases reported between 25 and 31 August in Goz Beida, Abeche and Adre districts. This brings the total to 978 cases and nine deaths.
- In Sarh, there is risk of outbreaks following the recent floods. Concern about the risk of food insecurity is high as hectares of agricultural land were washed away.

Actions

- WHO is supporting surveillance and response activities.
- WHO is supporting the MoH for the reinforcement of laboratory capacities in the region. A mission was organized to Biltine to support supervision and provide essential supplies.
- In cooperation with UNHCR, WHO is preparing a training workshop on the surveillance of acute flaccid paralysis cases. The workshop will be held from 8 September to 23 October in IDP sites, refugee camps and public health centres.
- WHO's emergency response is funded by its own budget, Finland and ECHO. Chad is selected for the second round of under-funded emergency funding from the CERF.

NIGER



Assessments and Events

- Insecurity is disrupting access to health care, particularly maternal health, in the region of Agadez.
- Malnutrition prevalence remains high with 84 835 cases and 176 deaths reported since 1 January. This could worsen as families affected by the floods are threatened by food insecurity following the destruction of agricultural lands.

Actions

- WHO continues to provide support in surveillance, coordination and control of diseases, in addition to the supply of emergency kits.
- Emergency activities are supported by the WHO budget and the CERF and by in-kind donations from Norway.

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/>

GUINEA



Assessments and Events

- The outbreak of cholera is stabilizing in Boke and Boffa prefectures. No cases were reported between 18 and 24 August from the 18 (out of 38) facilities that sent in their surveillance reports. Care is needed to consolidate the campaign, contain the outbreak and prevent its spread to other localities. The outbreak of cholera in neighbouring Guinea Bissau, coupled with the rainy season, constitute a threat to the proper termination of the outbreak.
- A case of yellow fever was confirmed in N'Zerekore prefecture. Enhanced surveillance, essential drugs and chlorine are needed to avert a possible spread of the disease as well as funds for training, supervision and communication.

Actions

- WHO is supporting the MoH to consolidate the fight against cholera by strengthening surveillance and investigation.
- The Country Office and sub office in N'Zerekore provided support to the MoH for an investigation mission on the yellow fever case.
- Funding is provided by the regular budget, the CERF.

GUINEA BISSAU



Assessments and Events

- The cholera outbreak continues with 3915 cases and 90 deaths reported as of 31 August. New cases have been detected in Bijagos archipelago bringing the number of regions affected to 10 out of 11. MSF-Spain and OXFAM-US have mobilized teams to support the response.

Actions

- WHO is using CERF funding to support several health centres and mobile clinics in under-served areas, supervise surveillance and case management and provide laboratory supplies and operational funds for regions to initiate the epidemic response.

INTER-AGENCY ISSUES

- **Gender.** The IASC Gender Sub-Working Group met on 3 September. A face-to-face Sub-Working Group meeting will be held in New York on 6-7 October.
- An inter-agency meeting on the **Central Emergency Response Fund** took place on 3 September.
- The Inter-Agency Working Group on **Disarmament, Demobilization and Reintegration** met on 3 September.
- The IASC Task Force on **HIV in Humanitarian Settings** met on 5 September.
- **Climate change.**
 - The 3 September IASC weekly meeting in Geneva briefed on humanitarian issues discussed during the UN Framework on Climate Change Convention (UNFCCC) Climate Change Negotiations held in Accra last 21-27 August.
 - The task force to prepare IASC inputs into the UNFCCC will hold its first meeting in Geneva on 8 September.
 - An IASC expert meeting on climate change and migration/displacement will be held in Geneva on 15 September.
- **Clusters.**
 - A global cluster lead meeting with the World Economic Forum will be held on 9 September.
- The 85th **UN Civil-Military Coordination** training course will be held in Constanta, Romania, on 14-19 September.
- An inter-agency task force meeting to prepare IASC inputs into the **United Nations Framework Convention on Climate Change** (UNFCCC) will be held in Geneva on 8 September.
- A inter-agency preparatory meeting for the sixth **Emergency Directors Meeting** (Rome, 18 November) will be held on 15 September.
- A meeting of the Humanitarian Liaison Working Group on **Disaster Risk Reduction** will be held in Geneva on 16 September.
- The first meeting of the **Education Cluster Working Group** will be held in London on 24-25 September.
- The **UN Executive Committee on Humanitarian Affairs** will meet on 9 October.

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

MAP DISCLAIMER: The presentation of material on the maps contained herein does not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or areas or of its authorities, or concerning the delineation of its frontiers or boundaries. Map source: Perry Castaneda Library Map Collection, University of Texas at Austin.

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