

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 operational use and does not reflect any official position of the WHO Secretariat.

WEST AFRICA



For more information see www.who.int/hac

Assessments and Events

- Heavy rains that began in West Africa in June 2009 have so far affected at least eight countries with flood waters, affecting about 600 000 people and causing 159 deaths up until 10 September.
- The first countries affected by flooding in July were *Benin* and *Togo*, where 20 000 people and 7500 people respectively were affected. Most have found refuge with family.
- *Burkina Faso*: Severe rains affected about 150 000 people with 8 deaths. Approximately 48 000 people are sheltering in temporary accommodation and about 40 000 with relatives. Infrastructure such as roads, bridges, one electrical plant and one of the main water purification plants have also been damaged.
- *Ghana*: Flooding has affected about 55 000 people across the country with 24 deaths.
- *Niger*: A dam in Dabaga broke causing flooding of Agadez city. Three deaths have been reported along with the destruction of schools, administrative buildings, roads and livestock. The initial assessment reported over 79 000 people affected.
- *Mali*: Eleven death shave been reported and 2700 people affected.
- *Senegal*: heavy rains have affected about 30 000 families (more than 250, 000 people).
- *Sierra Leone*: Authorities reported 103 deaths due to floods and landslides with 450 houses destroyed over 2400 acres of farmland covered with flood water. Areas of the city with very poor sanitation and limited access to healthcare are among flooded areas.
- So far no major communicable disease outbreaks have been recorded in affected countries, but there have been reported increases in malaria and diarrhoeal disease cases.

Actions

- In response to the health needs, WHO has been supporting health ministries and UN partners in conducting health assessments, coordinating the activities of health partners and providing needed medical supplies
- WHO has sent the following supplies:
 - *Burkina Faso*: One interagency emergency health kit IEHK (basic medicines capable of treating 10 000 people for three months) and two diarrhoeal disease kits (200 severe cholera cases, 800 moderate cases and 200 adults and 200 children affected by *Shigella* dysentery). Three IEHK and two diarrhoeal disease kits have been ordered. A vehicle to enable WHO staff to undertake health surveillance activities has been purchased.
 - *Niger*: Basic and anti-malarial medicines to treat 20 000 people for three months
 - *Senegal*: One IEHK
 - *Sierra Leone*: Basic and anti-malarial medicines for 3000 people for three months
- WHO staff are participating in health assessments and surveillance of epidemic-prone diseases
- WHO is coordinating activities of health partners within the humanitarian cluster approach.
- WHO is supporting refresher courses and guideline sharing to deal with water-borne diseases.
- WHO's West Africa Emergency and Humanitarian Action Intercountry Support Team is sharing tools for health assessments related to health response and coordination of health providers.
- WHO's 2009 emergency activities in Burkina Faso were supported with CERF funding and activities in Niger were funded by Belgium, the CERF and France.

YEMEN



More information can be seen at www.who.int/hac/crises/yem/en/index.html and the latest [WHO Press Release](#)

⇒ No funds have been received for the health component of the recent Flash Appeal (US\$ 2.3 million requested for the health cluster).

Assessments and Events

- Most health facilities in Sa'ada Governorate remain inaccessible due to the continuing conflict.
- 107 patients have been confirmed H1N1 positive. The increasing number of cases is overburdening the limited specialized care services in the hospitals.
- No disease outbreaks have been reported from any of the IDP-hosting areas.
- Malaria, skin infections, diarrhoeal diseases, respiratory infections and malnutrition are the main causes of consultation.

Actions

- On 14 September a joint UN mission including the UN Resident Coordinator and representatives from OCHA, UNICEF, WHO and other agencies visited the IDP camps in Haradh, Hajjah Governorate.
- The medicines and supplies received by the WHO office in Yemen will be used to support mobile medical teams and hospitals in the conflict-affected areas.
- WHO is supporting six mobile health units managed by the Ministry of Public Health and Population. These units are providing essential health care services in Jowf, Amran and Hajjah Governorates.
- WHO's emergency operations are funded by Italy, Andorra and the CERF. HAC is seeking donor support for this new crisis.

SOMALIA



For more information see www.who.int/hac

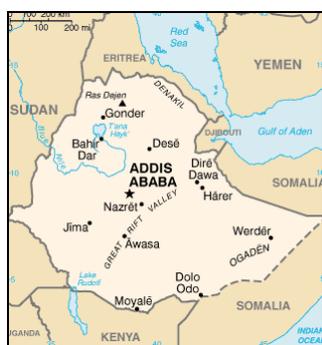
Assessments and Events

- The drought in Mudug, Galgaduud, Hiraan and Bakool regions caused by five consecutive seasons of drought has led to 75 percent of the total population being classified as being in Humanitarian Emergency. There is also an alarming deterioration in the food and nutrition situation in the north after 2-3 consecutive seasons of below normal rainfall.
- Half the Somali population, 3.8 million people, are in need of livelihood and humanitarian support, including the more than 1.5 million Somalis internally displaced. This is an 18 percent increase since January.
- As funding was put on hold in June, delays are affecting the implementation of health activities by different partners.

Actions

- On August 12, UNICEF and WHO in partnership with local authorities launched the second round of Child Health Days for Somaliland. Approximately 440 000 children under five years and 500 000 women of child bearing age were targeted by more than 5000 volunteers.
- A package of critical health services including measles and polio immunization, vitamin A supplementation, de-worming, aqua-tabs for water treatment, hygiene education, tetanus vaccination for women and nutritional screening and referral were administered.
- WHO's emergency activities are funded by the CERF, China and the HRF.

ETHIOPIA



For more information see www.who.int/hac

Assessments and Events

- An outbreak of acute watery diarrhoea (AWD) that began in Ethiopia in January this year has now spread to six regions of the country. The outbreak is expected to worsen with the onset of the rainy season.
- The continuous movements of pilgrims and migrant labourers to holy water sites and private farms is facilitating the spread of the disease to other parts of the country.
- More than 15 000 cases and 230 deaths have been reported (case fatality rate 1.7%).

Actions

- WHO has been providing technical, financial, logistic and material support to the government of Ethiopia since the onset of the outbreak.
- WHO surveillance officers have been assigned to all regions, and WHO staff in the capital, backed up by the Organization's inter-country support team in Harare, have been providing technical support in the areas of surveillance, case management, social mobilization, water and sanitation, resource mobilization and coordination.
- WHO's emergency activities are funded by the CERF and Finland.

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/>

GUATEMALA



Assessments and Events

- The country is facing the worst drought in 30 years, which has triggered a food crisis, worsening what were already dangerous levels of malnutrition in indigenous and rural areas where 7 out of 10 children under 5 are malnourished).
- Guatemala has the fourth highest rate of chronic malnutrition in the world (49.3% among children under 5).
- The hardest-hit communities are in the south-eastern part of the country, a region plagued by irregular rainfall and poverty.
- Acute diarrheal diseases have increased by 35%, reaching epidemic levels.
- Acute respiratory infections have also reached epidemic levels.

Actions

- WHO is advocating for health needs and supporting MoH in assessing the situation.
- WHO is monitoring acute respiratory infections.
- WHO conducted a surveillance to detect severe acute malnutrition in children under 5, in collaboration with the Ministry of Health and Social Welfare and the support of UNICEF.

DEMOCRATIC REPUBLIC OF THE CONGO



For more information see www.who.int/hac

Assessments and Events

- An outbreak of cholera has been reported in *South Kivu* with 383 new cases and 2 deaths. A total of 5188 cases with 69 deaths (CFR 1.3%) has been reported between the 1st and 36th week.
- In *North Kivu*, 202 new cases of cholera were reported with 1 death. The cumulative total between the 1st and 36th week is 4425 cases and 47 death (CFR 1%).
- There have been a total of 642 cases of measles at 32 deaths (CFR 5%) and 17 cases of meningitis with 1 death (CFR 1%) between the 1st and 36th week.

Actions

- WHO is providing support for surveillance and monitoring of cholera and other epidemic-prone diseases.
- WHO's emergency activities are funded by Australia, the CERF, ENI, Finland, and Norway.

AFGHANISTAN



For more information see www.who.int/hac

Assessments and Events

- Outbreaks of acute watery diarrhea have been reported in several provinces. The lab results released by the National Public Health Laboratory were positive for Vibrio-Cholera in ten provinces (out of 34) of the country.
- In some insecure parts of the country where access to health services is limited the case fatality rate (CFR) reached 9.45% while in general it is 3.6%.
- Reports of increasing insecurity are being received from different parts of the country.
- The Kandahar regional hospital (Mirwais Hospital) and TB and malaria centers have been damaged due to an explosion.

Actions

- Response to the outbreak was jointly led by MoPH and WHO. In addition to sharing technical guidelines and advice, WHO distributed diarrhea kits for effective case management in the affected regions.
- WHO also distributed trauma kits for the treatment of potential mass casualties due to violence.
- Based on MoPH request, WHO is in the process of rehabilitating or repairing damaged health centers.
- WHO's emergency activities are funded by the CERF and Norway.

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INTER-AGENCY ISSUES

In order to keep health action in crises high on the inter-agency humanitarian agenda, WHO/HAC participated/will participate in the following meetings/activities.

- The IASC weekly meeting in Geneva on 16 September on the IDP situation in Mindanao (Philippines).
- An inter-agency panel discussion on **Population Movements in the context of Climate Change** in Geneva on 16 September 2009.
- The monthly meeting of the **UN Executive Committee on Humanitarian Affairs** on 17 September.
- An **inter-cluster coordination** meeting on 18 September.
- An inter-agency meeting on 23 September on **Legal Frameworks in Humanitarian Coordination**
- A **UNHCR** briefing on 23 September on its Operations in Mauritania and Yemen and its Western Sahara Confidence Building Measures Programme
- A informal meeting of Global Cluster Leads with the participation of the Humanitarian Coordinator for Pakistan on 25 September to prepare for the forthcoming inter-cluster mission to **Pakistan**
- An inter-agency meeting on 23 September to prepare for reviewing the **humanitarian funding process** on 25 September.
- An **Emergency Directors** teleconference on 23 September.

SPECIAL EVENT

HAC is organizing a series of lunchtime seminars on health and human rights in humanitarian settings, linking human rights and international humanitarian law to WHO's work in emergencies.

The next seminar will take place at WHO on 23 September from 12.30–14.00. Topic: International Humanitarian Law. Speaker: ICRC.

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

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