


Health Action in Crises (WHO/HAC)

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The WHO/HQ Department for Health Action in Crises aims to produce a running note on select current issues at weekly intervals. This note—which is by no means exhaustive—is designed for internal use and does not reflect the official position of WHO.

<p>DEMOCRATIC REPUBLIC OF CONGO (DRC)</p> 	<p>Assessments and events:</p> <ul style="list-style-type: none"> • Fighting in recent days has caused tens of thousands of civilians to flee their homes in the Territory of Lubero, North-Kivu, DRC. Entire villages have fled. (Source: OCHA, 19 December) • Crude mortality rates in the DRC continue to be above the emergency threshold of one death per 10,000 people per day. The latest mortality survey by the International Rescue Committee (IRC) found that more than 31,000 people die every month as a result of the humanitarian crisis in the DRC. According to the IRC survey, which covers the April - July 2004 period, the majority of deaths are due to preventable and treatable diseases. • WHO has received reports of a serious outbreak of typhoid fever in Kinshasa. The cases have occurred in the suburbs of Kimbanseke, Kikimi, Masina and Ndjili. Very poor sanitary conditions and a lack of drinking water characterize affected areas. As of 13 December, a total of 13,400 cases were reported. Of the 636 cases who have, thus far, been hospitalized for peritonitis, 200 received surgical treatment for intestinal perforation and 143 died (CFR 22.5%). A crisis committee has been established to contain the outbreak. It is carrying out health education activities and distributing medicine. <p>Actions:</p> <ul style="list-style-type: none"> • With the support of Norway, WHO is sending 10 Cholera and 10 New Emergency Health Kits (the latter each meeting the basic health needs of 10,000 persons for a period of three months) to Kinshasa for Internally Displaced Persons. • WHO is working to establish a country-wide network of epidemiologists supporting local authorities in integrated disease surveillance, while also training health staff and NGOs in preparedness and response. • In conjunction with UNDP, UNFPA and UNICEF and with funding from Finland, WHO advocates against sexual violence, enhances the capacity of health facilities to manage the consequences of sexual violence, and supports community structures in re-integrating victims. • WHO has appealed for US\$ 16,796,866 through the 2005 CAP for DRC in order to implement the following projects: <ul style="list-style-type: none"> ➢ Malaria control in emergency situations ➢ Prevention and response to sexual violence to women, youngsters, and children in the provinces of Katanga, Maniema, and South Kivu ➢ Support to the development of the Minimum Activity Package ➢ Reinforce coordination of health programmes in emergency situations ➢ Preparations and response for epidemics ➢ Eradication of poliomyelitis <p>More information about the 2005 CAP for DRC can be found at: http://www.who.int/hac/about/donorinfo/en/drc.pdf</p> <ul style="list-style-type: none"> • Current WHO humanitarian operations in the Democratic Republic of Congo have been supported by ECHO, Finland, Norway, and AGFUND.
<p>PHILIPPINES</p>	<p>Assessments and events:</p> <ul style="list-style-type: none"> • On 15 December, the Government of the Philippines and the UN Country Team launched a Flash Appeal for US\$ 6.4 million to respond to the health and relief needs of flood victims. The IFRC appealed for an additional US\$ 3.64 million for use by the Philippines National Red Cross (PNRC) in its response. • More than 19 Department of Health (DoH) Mobile Teams have been dispatched to augment the number of health personnel working in badly affected areas. • Joint DoH-NGO environmental health survey teams have been deployed to Region IV.



Actions

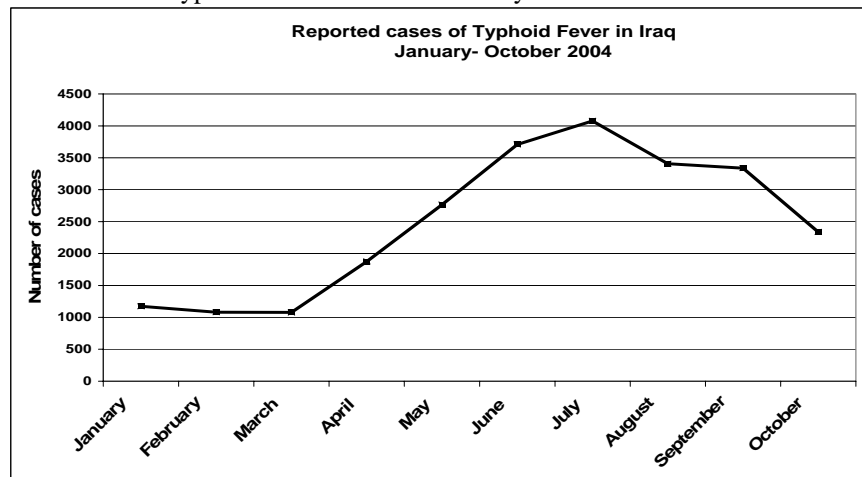
- WHO is providing technical and capacity-building support to local health staff to facilitate effective disease surveillance/prevention and timely responses to health situations arising in the typhoon-affected areas.
- WHO, at the request of the Department of Health, is focusing on malaria preparedness and outbreak control. Interventions target a population of 200,000 for the possibility of 80,000 cases of malaria (estimates based on previous experiences).
- Additional WHO activities are in the areas of emergency response coordination and support to health authorities. Activities include: provision of medicines and supplies; water purification; technical assistance (forensic pathology, health services management, environmental health, and psychosocial care), health promotion activities and rapid response logistics.
- WHO would like to thank USAID and DfID for offering their support in responding to the urgent health needs of the typhoon victims.

IRAQ



Assessments and events:

- A measles immunization campaign targeting 946,470 children aged under six years was launched on 18 December and is due to last five days.
- Typhoid Fever—an endemic water-borne diseases in Iraq with high incidence, especially in the summer months—is on the decrease. The graph below shows the distribution of Typhoid fever cases from January to October 2004.



Actions:

- WHO is providing staff incentives, social mobilization, trainings, and resources for the rental of vehicles for the measles vaccination campaign. Independent monitoring will be done by WHO, UNICEF, IRCS and medical schools. Financially, WHO support amounts to US\$ 770,000 and is from the UNDG Iraq Trust Fund, Primary Health Care Programme.
- WHO supplied technical materials to the MoH High-Level Committee on Iraq National Drug Policy. These included reference publications on the following topics: quality assurance and inspection of pharmaceuticals, registration of medicines, quality control methods for medical plants and conference/training opportunities on drug regulations.
- WHO is supporting the MoH Directorate of Public Health and Primary Health Care (PHC) to review the status of the chronic illness drugs. Specific focus is given to the flow and distribution of drugs to chronic disease card holders.
- A workshop on disease surveillance was held in Erbil on 11-13 December. The workshop was attended by 30 surveillance staff and district managers, and was facilitated by the MOH with the support of WHO.
- WHO delivered sets of updated medical textbooks to the four medical colleges in Baghdad, as well as to the MoH and the Medical City Libraries. Eleven sets will be distributed to Medical Colleges in the governorates in the coming weeks.
- On 15 December and with the aim of strengthening Acute Flaccid Paralysis (AFP) surveillance activities in the Erbil Governorate, an advocacy meeting for junior doctors in major hospitals was convened by the DoH with WHO support.

WEST BANK AND GAZA STRIP



Assessments and events:

- The Palestinian MoH, Palestinian health care providers, donors, and the WHO Head of Office in West Bank and Gaza participated in a conference on the Palestinian Health Sector Review in Rome. The conference was sponsored by the Italian government. The Palestinian Health Sector Review is a project funded by the World Bank, the European Union, the Italian government, DfID, and WHO. It is implemented by the Palestinian MoH and other health providers, with technical support from WHO.

Actions:

- On 8 December, WHO hosted a meeting of the Task Force concerned with elaborating the five-year implementation plan of the Mental Health Services Organization policy document.
- The WHO Steering Committee for Mental Health (SC) met on 9 December. The SC is chaired by the MOH, while WHO serves as Secretariat.
- Current WHO humanitarian actions in the West Bank and Gaza Strip have been made possible by 2004 funding from USAID, AGFUND, and the Government of Norway, as well as pre-2004 funding from ECHO.

SUDAN



DARFUR CRISIS

Assessments and events:


- New polio National Immunization Days (NIDs) are scheduled for 10 January 2005. They will be followed by two additional rounds at 30-day intervals.
- In North Darfur, the leading cause of morbidity is Acute Respiratory Infections in all age groups.
- 102 cases of Acute Jaundice Syndrome were reported during the past two weeks from Habila, West Darfur.
- In West Darfur, measles vaccination campaigns are taking place in Kerenik, UM Tagouk, Azerni, and Abu Surooj on 19-21 December.

Actions:

- WHO provided \$34, 874 to El Geneina State Hospital (West Darfur) to implement waiver user fees. The funds will be used for running costs, staff incentives, training and drugs with the intention that all IDPs receive health care.
- In South Darfur and in the event of increased seasonal incidence of Acute Respiratory Infections (ARI), WHO is prepared to provide back-up support to NGOs running primary health care clinics in the camps. WHO will provide essential drugs (antibiotics, antipyretics and antihistamines) to facilitate case management as per standard treatment guidelines for ARI.
- WHO, UNICEF, and SMOH finalized the Expanded Programme on Immunization (EPI) campaign "Reaching every Child" for vaccination against preventable diseases in the IDP camps in South Darfur.
- The MoH has requested WHO's assistance for the development of a 'Health Information Management System (HIMS)' for the state ministry in South Darfur.
- WHO facilitated the hygiene promotion workshop which was sponsored by UNICEF and held 12-13 December in West Darfur.
- WHO is financially supporting the Nyala Teaching Hospital (NTH) in South Darfur for the replenishment of emergency drugs and consumable medical supplies.
- WHO is establishing Medical Emergency Response Teams (MERTs) in each of the Darfur states via an implementing partnership with the Swedish Rescue

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/disasters/>

	<p>Services Agency (SRSA), a Swedish governmental entity.</p> <ul style="list-style-type: none"> • Funding for WHO humanitarian operations in Darfur has been provided by UK's Department for International Development (DfID), the Humanitarian Aid Office of the European Commission (ECHO), and the governments of Netherlands, Italy, Ireland, Norway and United States.
<p>NORTHERN UGANDA</p> 	<p>Assessments and events:</p> <ul style="list-style-type: none"> • The launch of "The State of the World's Children 2005- Childhood under threat" took place in Gulu district. Organized by UNICEF, the launch was presided by the Deputy Speaker of Parliament and attended by the Minister of State for Children's Affairs and Members of Parliament sub-Committee on Children. The main focus was on the impact of the humanitarian crisis on children, with particular emphasis on the plight of formerly abducted girls and their children born in captivity. The need for vocational training, counselling programmes, childcare, HIV testing and counselling, and efforts to reduce the effects of trauma and promote reintegration into society were discussed. <p>Actions:</p> <ul style="list-style-type: none"> • The cholera epidemic in Pabbo and Attiak camps is under control. Between 8 October and 12 December, 4,273 cases and seven deaths were reported. Cholera treatment centres will henceforth be taken over by the District. During the outbreak, WHO supported the work of CORPS, sensitization of the community via radio, purchase of fuel for community mobilization activities, and surveillance. • WHO and the Uganda AIDS Commission organized a workshop to build the capacity of health workers for the care of HIV/AIDS patients. The workshop was attended by 87 health professionals from all districts in Northern Uganda. The need for continuous counselling and treatments including ARV therapy were addressed. • As of 1 December, the sub-office in Gulu is fully operational. Its main objectives are to strengthen coordination and surveillance of and response to communicable disease outbreaks. The office is staffed by one team leader, one epidemiologist, one information officer, one public health officer, and a driver. • Funding for WHO humanitarian operations in Northern Uganda has been provided by Finland.

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

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