

Health Action in Crises (WHO/HAC) Highlights - No 5: Monday, 19 April 2004

The WHO Department of Health Action in Crises aims to produce a running note on select current issues at weekly intervals. The note is designed for internal—within WHO—use only.

DARFUR CRISIS





SUDAN

Event: Throughout the Darfur, humanitarian access continues to be precarious and protection is the priority. There have been no reported cease-fire violations since the agreement came into affect on 12 April. Agencies operating in the Darfur region confirm that fighting between the warring parties appears to have decreased. However, the conflict-affected population remains very concerned about protection, as harassment and attacks by the Janjaweed—especially around IDP settlements—continue. (Source: UN Resident Coordinator) UN agencies persist in intensifying operations. The mission of UN Emergency Relief Coordinator, Jan Egeland, has been postponed until further notice.

Action:

- WHO, UNICEF and the Ministry of Health continue to plan for a Darfur-wide measles campaign. A joint project proposal for USD 4.2 million has been circulated. Despite insecurity, WHO, UNICEF and the Ministry of Health deem the campaign feasible, based on past successes with polio.
- On 10 April, WHO conducted a spot-check of the registers at the Health Post in Kaalma camp, located 14 km from Nyala in South Darfur. The check found a daily Under-5 Mortality Rate of 6.8/10,000 for the period of 28 March-10 April (representative of an out-of-control crisis, according to international standards). The main causes of morbidity and mortality in the camp are acute respiratory infections, diarrhoeal diseases and malnutrition.
- WHO continues to increase its staff capacity in WHO/Sudan and in support of the UN-wide response to the crisis in Darfur. The WHO-seconded to the United Nations Joint Logistics Centre has assumed his post in Khartoum. WHO/HQ confirms the secondment of a Public Health Coordinator to UNHCR in Abeche, eastern Chad, to support the Darfur refugee programme there. WHO sub-offices are embedded in the field coordination facilities of OCHA (Office for the Coordination of Humanitarian Affairs).
- WHO participated in a 8-10 April visit to North, West and South Darfur by the Sudan Under-Secretary of the Federal Ministry of Health, the Minister for Foreign Affairs and Justice, the UN Resident Coordinator, and staff from UNICEF and the US, French and EU missions.
- WHO continues to participate in the preparation of inter-agency consolidated six-month contingency plan for Darfur.
- Discussions are underway with UNFPA on Reproductive Health Kits and technical support for the PHC and referral system components of WHO humanitarian plan.
- One Outbreak Investigation Kit is being sent from Geneva to Khartoum for Darfur.
- WHO is continuing its support for environmental sanitation efforts in Kutum and Al Fasher.
- WHO participated in the assessment in Kulbus and is working with partners to improve health facilities in Kaalma.

<p>IRAQ</p>  <p>The map shows Iraq with its major cities: Baghdad, Samarra, Karbala, An Najaf, Ar Ramadi, Ar Rutbah, Al Kut, An Nasiriyah, Al Basrah, and Umm Qasr. Neighboring countries are Turkey, Syria, Iran, Saudi Arabia, and Kuwait. The Tigris and Euphrates rivers are also shown.</p>	<p>Event: UN Secretary-General Special Advisor for Iraq, Lakhdar Brahimi, ended a visit to Iraq on 15 April, recommending that a caretaker government be formed in May and a consultative assembly be elected in July. High-level officials from the Coalition Forces met on 16 April with local representatives of Fallujah in an attempt to end the cycle of violence that has cost the lives of approximately 700 Iraqis and 70 Coalition Forces since early April. The situation remains tense in Najaf, where Shiite cleric Muqtada Al-Sadir and his militia Mehdi Army are in control. Talks are also ongoing in Najaf to end the current stand-off. As a result of increasing hostage-taking cases and killing of foreigners, practically all NGO international staff have been pulled out of Iraq.</p> <p>Action:</p> <ul style="list-style-type: none"> • WHO—in conjunction with NGOs and other UN Agencies—coordinated the shipment of three plane-loads of drugs and medical supplies to Iraq, in response to requests by the Ministry of Health. • WHO is assisting the Italian government in the shipment of medical supplies valued at USD 25,600. • WHO Geneva and EMRO will meet with Ministry of Health officials and the CPA Health Advisor, Jim Haveman, on 29-30 April in Amman to review the health situation in Iraq. • On 22 April, a preparatory event for the donors' meeting on Iraq (tentatively scheduled for mid-May in Doha, Qatar) will take place in Washington, D.C.
<p>DJIBOUTI</p>  <p>The map shows Djibouti with its major cities: Khor Angar, Balbo, Obock, Tadjoura, Yoboki, Dikhil, and Ali Sabieh. Neighboring countries are Eritrea, Ethiopia, and Somalia. The Red Sea, Gulf of Aden, and Bab el Mandeb are also shown.</p>	<p>Event: On 13 April, following torrential rains in almost all districts of the country, the river El Oued burst its banks and flooded several areas in Djibouti city. Fifty-one deaths were reported in Djibouti city, in addition to 23 injured and 37 persons missing. Approximately 1,500 people were left without shelter. More than one-third of the displaced are children. The water and electricity infrastructure was heavily damaged. With the resulting drinking water shortage, broken sewage pipes and environmental damage from the flood, the threat of epidemic-prone diseases such as cholera is now a pressing health emergency. An estimated 300,000 people would be vulnerable to these outbreaks. The flood situation has disrupted the provision of basic health services because of the total or partial destruction of the main health care facilities in the area. Medical equipment, drugs, cold chain and nutrition substitution stocks were lost. Two health care centres in the outskirts of the affected areas are facing increased demands.</p> <p>Actions: WHO is working with other UN systems agencies (including UNICEF) to help the Government of Djibouti respond to this crisis and minimise the risk of a major diarrhoeal disease outbreak. WHO/EMRO immediately made USD 81,000 available for the Djibouti floods crisis. This loan is being used to cover an order for five New Emergency Health Kits, five cholera D and five cholera F kits (including air freight). Monies are being requested for the eventual purchase of additional kits and for recovering the initial expenditure. EMRO and HAC Department, HQ are planning an urgent mission to the affected area in support of the WHO country representative and her team.</p>
<p>WEST BANK AND GAZA STRIP</p>	<p>Event: The UN International Meeting on the Impact of the Construction of the Separation Barrier in the occupied Palestinian territory, including in and around east Jerusalem, was held 15-16 April. Participants expressed deep concerns about the current and potential humanitarian consequences of the barrier and urged the active involvement of the international community to mitigate impacts.</p> <p>Action:</p> <ul style="list-style-type: none"> • WHO/HAC participated in the 15-16 April UN meeting in Geneva on the impact of the wall. WHO/West Bank and Gaza Strip prepared

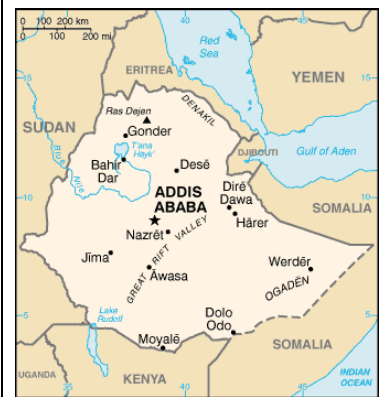
Health Action in Crises

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/>



- background materials for the occasion.
- In consultation with UNICEF, UNRWA, UNFPA and OCHA, WHO partook in the preparation of the first draft of Mid-Year CAP review for the health sector.
 - WHO/West Bank and Gaza Strip provided technical advice to the Ministry of Health National Committee on Immunization for the planned national measles campaign, in coordination with WHO/HQ and EMRO.
 - WHO/Food Safety carried out a mission (3-9 April) to assess food safety issues and provide recommendations and a plan of work for strengthening food safety in the oPt.
 - WHO Representative of the Director-General for Health Action in Crises will make a keynote address at the European, Palestinian and Israeli Cities (EPIC project) meeting in Torino, Italy (19-20 April). The Head of the WHO Office in the West Bank and Gaza Strip will also attend. The EPIC project is part of the WHO-supported platform for dialog between Palestine and Israeli local authorities on issues of common concern, including health care.

ETHIOPIA



Event: The Government of the Federation of the Democratic Republic of Ethiopia (GFDRE) plans to resettle 2.2 million vulnerable people before the end of 2005. Over one million are planned for 2004 before 1 May. A joint UN/Donor/World Bank Resettlement Working Group has undertaken monitoring of humanitarian conditions in resettlement sites in the four resettlement regions: Oromia, Amhara, Somali, and Snnprs. Many resettlement sites are demonstrating serious humanitarian conditions that require urgent short-term assistance.

Action: WHO participated in the 15-23 March multi-agency mission to assess the humanitarian conditions of the resettlement sites. The assessment mission found that food quality and quantity was insufficient in resettlement sites, resulting in the presence of moderate to severe malnutrition in some sites. Supplementary food was needed for children and pregnant/lactating women in most sites. There was an overall lack of drugs and medical supplies, and water and sanitation problems were persistent in many sites. In addition, the health service coverage in the regions was very low. This situation was attributed to insufficient and unevenly distributed health facilities and health personnel in the regions. In light of the above, assessment summary reports underline the need for the following:

- Immediate humanitarian interventions to meet urgent needs.
- Further specialised assessment in key areas to determine appropriate urgent responses.
- Pre-positioning of stocks to meet potential vulnerabilities expected during the rainy season.
- Actions on longer term issues before it is too late.

The Resettlement Working Group recommends that the GFDRE slow down or cease resettlement activity for this year so that the humanitarian community and GFDRE can address urgent needs.

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/>

INTER-AGENCY INITIATIVES

- The Inter-Agency Standing Committee (IASC) Task Force on Human Rights and Humanitarian Action will hold a workshop in Geneva on 22 and 23 April. WHO participates in this Task Force and will attend.
- The senior inter-agency Network on Internal Displacement, of which WHO is a member, will meet on 20 April to discuss the following: preparations for the IASC Working Group meeting in June 2004, the IDP Advisors Lessons Learnt meeting in May, updates on Uganda and Somalia, and the report on the mission to Liberia.
- On 19 April, the IASC Task Force on the Humanitarian Impact of Sanctions will meet to discuss the draft of the Sanctions Handbook, which is expected to be shared with the IASC for endorsement. WHO is a member of the TF and will attend.
- WHO plans to take part in the Wilton Park Conference on Humanitarian Coordination, Montreaux, 21-23 April. The event is organized by the Swiss Agency for Development and Cooperation and the Swiss Wilton Park Association, in consultation with OCHA.
- WHO will participate in a UNDP/World Bank meeting in Port-au-Prince, Haiti, on 22 April. To be attended by donors, UN agencies, the Red Cross Movement, NGOs and the Government of Haiti, the meeting will serve as a platform for discuss needs not yet covered by the Flash Appeal and to set up a project for the next two years. A preliminary inter-agency meeting will take place on 21 April.

INTER-DEPARTMENTAL INITIATIVES

Note: Inter-departmental collaboration for a specific country has been listed under the appropriate country.

- On 20 April, representatives from various departments within WHO—in conjunction with staff from Merlin, International Red Cross/Red Crescent, UNFPA, International Organization for Migration, *Medecins San Frontieres*, and others—will participate in a meeting regarding the revision of the New Emergency Health kit (NEHK). Each kit provides medical supplies for 10,000 people for three months.

Please send any comments and corrections to kollert@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.*