Health Action in Crises

Highlights – No 73: 5 - 9 September 2005

Each week, the World Health Organization Department for Health Action in Crises in Geneva produces information highlights on the health aspects of selected humanitarian crises. The reports usually cover a selection of the situations for which a combined UN system humanitarian appeal has been launched.

The WHO contributions in each situation are provided through a mix of different WHO programmes: the staff involved is drawn from WHO field and country offices, often with support from different departments in WHO regional offices and Headquarters. The remit 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 KATRINA

Assessments and events:
- On 29 August, Hurricane Katrina hit the Gulf coast, wreaking havoc in the states of Louisiana, Mississippi and Alabama, the worst natural catastrophe in US history.
- The number of victims is unknown but between 250,000 to 350,000 people made homeless by the storm are put being up in a variety of shelters in 16 US states. More than one million people in Louisiana may have been displaced by Katrina. The cost of the damage could surpass 100 billion dollars.

Actions:
- On 4 September, the US Government accepted the United Nation’s offer of assistance. A UN coordination team will be based at the newly established USAID Hurricane Katrina Operations Center in Washington D.C., where offers of international assistance are being coordinated. OCHA, WFP, WHO, UNICEF and UNHCR are ready to provide emergency staff and a wide variety of relief supplies as and when necessary.
- PAHO/WHO is in a state of readiness should support be required. The Emergency Center has been activated.
- PAHO/WHO has compiled a roster of experts in public health, water and sanitation, health logistics and other specialized areas from which to identify experts to make up part of a UN interagency team and which are available to U.S. authorities.
- WHO participates to the regular inter-agency conference calls on Hurricane Katrina.

NIGER

Assessments and events:
- The first issue of the Weekly Bulletin on Mortality, Morbidity and Nutritional Surveillance in Niger was published. It confirmed that malaria is the main cause of morbidity in Niger, followed by bloody diarrhoea and cholera. The cumulative number of cholera cases in Tahoua region from 13 July to 1 September is 230 cases, including 19 deaths (CFR 8.26%).

Actions:
- Due to the high prevalence of chloroquine resistance, the MoPH, following the technical recommendation of WHO, has temporarily adopted the co-administration of Artesunate and Amodaquin for the first line treatment of uncomplicated malaria cases.
- As a first stop-gap measure, WHO is providing 100,000 blisters of Artesunate+Amodianquin due to arrive in Niamey by the end of next week. Meanwhile the RBM mission is also supporting the MoPH in the training of 40 trainers on the use of artemisinin-based combination therapies. A technical note on the use of artemisinin derivatives in the treatment of uncomplicated cases of malaria has been distributed to all partners in the field.
- WHO will supply 50,000 insecticide treated bed-nets to 32,000 children and 18,000 pregnant women at nutritional centres in the 16 most affected districts.
- To control the cholera epidemic, WHO and partners assisted in confirmation of suspected cases; pre positioning of medicines, laboratory equipment and
rapid diagnostic tests; drafting response plan for the districts at risk; health educating communities; establishing cholera treatment centres and chlorinating wells.

- WHO pre positioned eight cholera kits and distributed the *WHO Technical Guidelines on the Treatment of Acute Diarrhoea in Emergency Situations*.
- As a member of the Taskforce, WHO will participate to the 14 September meeting of the IASC Task Force on Niger.
- Current WHO humanitarian operations in Niger are supported by the UK’s Department for International Development. The government of Italy has shown a strong interest in supporting WHO operations in the country.

### DEMOCRATIC REPUBLIC of the CONGO

**Assessments and events:**
- In Bunia, North Kivu, 11 cases of cholera were notified among 2,500 FARDC soldiers and their 1,700 dependants. No deaths have been reported.

**Actions:**
- UNICEF, WHO, the local health authorities, MSF, OCHA, Medair and MONUC/HAS met to plan the response to the cholera outbreak in Bunia.
- A cholera treatment centre has been established and WHO is monitoring the epidemic and providing supplies for treatment and water purification.
- The WHO/EHA focal point in South Kivu travelled to Uvira to coordinate water and sanitation activities in preparation for the return of several thousand refugees from Tanzania.
- Current WHO humanitarian operations in the Democratic Republic of the Congo are supported by the Humanitarian Aid Office of the European Commission (ECHO), UNOCHA and the governments of Finland and Norway.

### SUDAN

**Assessments and events:**
- Between 20 and 26 August, Acute Respiratory Infections (ARI), malaria and bloody diarrhoea were the main causes of morbidity reported across the Greater Darfur. ARI, malaria and severe malnutrition were the main causes of mortality. No case of acute watery diarrhoea or any other unusual health event were flagged or detected by the Early Warning and Alert Response Surveillance (EWARS) system during this period.

**Actions:**
- Rehabilitation of El Fasher Teaching Hospital in North Darfur in ongoing.
- WHO is following up on the plans to install a water quality testing laboratory.
- WHO is monitoring acute watery diarrhoea cases in Abu Shoak and Al Salam IDP camps in North Darfur.
- The Federal MoH, the State MoH and WHO provided training on cholera preparedness to over 135 medical assistants, doctors and health workers working in IDP camps in West and South Darfur.
- Cholera kits were distributed to the NGOs and hospitals in Kass, Elddain and Edd Al Fursan in South Darfur.
- WHO is following up on the water and blood samples taken during the acute jaundice syndrome investigation in Mukjar, West Darfur. WHO will also be promoting personal hygiene and proper disposal of sanitary waste.
- WHO and UNFPA conducted health facilities assessments in Malha, North Darfur, in Salea, Kulbus locality, West Darfur and in Ottash, Sakali and Dereij IDP camps in South Darfur.
- WHO is providing technical assistance to the nutrition survey conducted by WFP, FAO, UNICEF and the State MoH in North Darfur since 31 August.
- A vector control spraying campaign was conducted in Kabkabiya in North Darfur by the State MoH and WHO.
- WHO provides supplies for a houseflies spraying campaign carried out in collaboration with the ICRC and NGOs in Salea IDP camp.
**CENTRAL AFRICAN REPUBLIC**

Assessments and events:
- Heavy rainfall since 6 August has caused substantial flooding in western parts of the Central African Republic and areas of Bangui.
- The number of people affected by the floods has increased to around 20,000. Over 2,500 homes were damaged or destroyed. Flood waters have weakened existing structures and continuous precipitation is aggravating the situation.
- Needs are urgent as the affected areas are the poorest and most vulnerable of Bangui. The first and most critical need of the population is clean drinking water, but long-term solutions, including the development of proper drainage and sewerage networks, are also required.

Actions:
- The national Red Cross is cleaning up the drainage system. The Government is asking the UN for food, medicines, kitchen utensils, mosquito nets, clothing, blankets, sanitation materials as well as construction materials for emergency rehabilitation.
- The UN Country Team carried out a series of visits to the affected areas to measure the extent of the damage. UN agencies are providing supplies for immediate emergency relief and preparedness if new floods occur.
- The UN Country Team sees waterborne diseases and malaria as priorities. Sensitization activities, positioning of medical supplies within the structures of the MoH and provision of clean water to affected populations are carried out.
- WHO will provide essential drugs to Government-run health facilities and supports the strengthening of an epidemiological monitoring system.
- WHO is carrying out an information campaign on hygiene as the floods have increased the number of health hazards.

**CHAD**

Assessments and events:
- Political and humanitarian crises in neighbouring countries have caused significant population influxes into the country. At least 213,000 Sudanese refugees from Darfur are staying in 11 camps in eastern Chad, while 30,000 Central African refugees are living in southern Chad.
- In south-east Chad, contaminated water and food have caused a hepatitis E outbreak that has killed an estimated 50 people around the town of Kerfi.

Actions:
- WHO provided one New Emergency Health Kit – providing for the needs of 10,000 people for 3 months – to UNHCR to support CAR refugees in southern Chad.
- WHO and partners have developed a plan for control of Hepatitis E in Triguine Camp for Sudanese refugees. An immunization campaign is being carried out in the affected region between 19-21 August and 15-18 September.
- A WHO public health expert is finalizing a health assessment that will serve as background for the Consolidated Appeal Process 2006. She will be attending an inter-agency workshop on the CAP on 6-7 September in N’Jamen.
- Current WHO humanitarian operations in Chad are supported by the Humanitarian Aid Office of the European Commission (ECHO) and by the UK’s Department for International Development.

---

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/](http://www.who.int/disasters/)
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/

GUINEA-BISSAU

Assessments and events:
• Between 21 June and 1 September, 11,681 cases of cholera, including 219 deaths (CFR 1.87%) have been notified. The two western regions of Bissau and Biombo include 83% of all cases. The attack rate is high with 0.8% of the population at risk for the disease.
• The health coverage in these regions is generally weak and made worse during the rainy season due to difficult access.

Actions:
• Following a first appeal in June, WHO, in coordination with partners, provided technical assistance to monitor and investigate the occurrence of cholera cases, support health personnel in clinical case management at rehydration centres in Bissau and promote health education messages and sanitation measures.
• A project proposal to control cholera in Guinea Bissau has been prepared and will be submitted to donors shortly.

WEST BANK and GAZA STRIP

Assessments and events:
• Phase 4 has been declared for Gaza with effect from 2 September by the Department of Safety and Security Office of the Under-Secretary-General.

Actions:
• WHO Gaza and OCHA conducted a field visit to assess health and other humanitarian needs in an isolated rural area called Al Manni.
• The WHO Mental Health (MH) team is working on defining its Annual Work Plan for the next 3 years, in areas such as infrastructure/services organization, planning, training and education, public education, establishment of referral systems, etc. The Work Plan should be completed by 10 September.
• WHO assisted in the preparation of health sector-related documents for ongoing UN exercises including the Country Assessment, the MDG, the NAF-CAP and the Separation Barrier.

INTER-AGENCY ISSUES

• Inter-Agency Standing Committee Working Group. The IASC Retreat on Better Humanitarian Response is taking place in New York on 6 and 7 September. The Working Group on Health is proposing the setting up of a joint initiative for improving humanitarian health outcomes with WHO as the lead agency.
• IASC Plenary. An Ad Hoc Inter-Agency Standing Committee meeting at the level of Heads of Agency will take place in New York on 12 September on what will be the practical implications of assuming primary managerial responsibility and accountability for a humanitarian cluster or sector. The meeting will also discuss the broader humanitarian reform agenda. WHO is a member and will participate.
• Mental health and psychosocial support in crises. A first technical workshop on mental health and psychosocial support in emergency settings will be held in Geneva on 20 and 21 September. WHO and InterAction facilitate the work of this Taskforce.
• Tsunami Recovery. The next meeting of the Global Consortium for Tsunami Recovery, with the Special Envoy for Tsunami Recovery will take place in Washington DC. WHO will participate.

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.