

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. 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.

SUDAN



More information is available at:
<http://www.emro.who.int/sudan/>

⇒ On 3 May, the UNDG Sudan Technical Working Group discussed plans for a Joint Assessment Mission (JAM) in Darfur. The process is expected to start soon and will include experts from Sudan, the UN, the World Bank and the donors. Two phases will be conducted in parallel; the first to be completed by October 2006 and the second in 2007. WHO is actively involved in the preparation of the mission and will participate in the assessments.

Assessments and events:

- In *Darfur*, the recent escalation in violence is impacting on people's access to essential services. The surveillance system continues to cover 85% of the population, but the health services utilization rate has decreased to below 2 visits per person per year.
- Preventive public health measures need sustained investment to make a difference but after steady improvements in 2004 and 2005, funding shortages now threaten the fragile public health system.
- In *Southern Sudan*, the cholera outbreak is ongoing but it has not spread to new areas. Between 28 January and 30 April, 12 095 cases and 320 deaths (CFR 2.64%) were reported.
- Meningococcal meningitis continues to spread countrywide; 15 out of the 25 states are currently affected. Between 1 January and 27 April, 5 791 cases were reported including 631 deaths (CFR 10.8%). The most affected states are *South and North Kordofan, West Darfur, Blue Nile, Kassala and Gederaf* in the North and *Warap, Northern and Western Bahr el Ghazal* in the South.

Actions:

- In response to the meningitis outbreak in Zallingi, *West Darfur*, a mass vaccination campaign targeting nearly 100 000 people was launched on 27 April. It is implemented by the State MoH with support from WHO, UNICEF, IFRC and international NGOs working in the areas.
- In addition, WHO and UNICEF submitted a proposal to ECHO requesting 700 000 Euros to vaccinate more than 800 000 people in affected areas. The proposal also aims at improving surveillance, case management and drug availability as well as supervision.
- In *West Darfur*, a HIV/AIDS Task Force, co-chaired by the State MoH and WHO, and a Voluntary Counselling/Testing centre have been established.
- The rehabilitation of the laboratory and blood bank in El Geneina Hospital was completed on 30 April with funding support from WHO.
- WHO is preparing a mission with the Federal MoH and the World Bank in *South Kordofan* to develop the state component of the Multi Donor Trust Fund-financed health decentralized project.
- At the national level, WHO continues to advise and assist the Federal MoH for risk containment in case of influenza pandemic. The capacity of National Public Health Laboratory in Khartoum was upgraded with WHO support.
- In 2005, activities were supported by the European Commission, Ireland, Italy, the Netherlands, Norway, Sweden, the United Kingdom and the United States. In 2006 contributions were received from the European Commission, Finland, Ireland, Switzerland and the 2006 Common Humanitarian Fund.

HORN OF AFRICA



Assessments and events:

- This is complex crisis marked by fragile livelihoods. Even with normal or above normal rainfalls, emergency needs are likely to remain due to the people's overstretched coping capacities, the cumulative nature of the problem and the increase in human and livestock health problems.
- Whatever the outcomes of relief in the next 12 months, more efforts will be needed at long term to reduce structural vulnerabilities.

Actions:

- Following the joint HAC, AFRO and EMRO mission of the past weeks, WHO is working on the recruitment of international staff, procurement of supplies and allocation of operational funds to ensure timely and efficient use of the CERF grants.
- In *Eritrea*, WHO and partners are preparing for a health assessment in the North Red Sea region.

- ⇒ On 8 May, the Special Humanitarian Envoy of the UN Secretary-General for the Horn of Africa will brief the humanitarian community in Geneva on his recent mission to the Horn of Africa and discuss priority, operational, and funding issues related to the Regional Appeal.
- ⇒ The Emergency Relief Coordinator has announced the appointment of Dr Eric Laroche, previously Deputy Director UNICEF Emergency Operations, Geneva, as Humanitarian Coordinator for Somalia as of 1 May.

- In *Ethiopia*, UNICEF and WHO support the MoH in implementing a measles mass vaccination campaign targeting almost half a million children aged 6 to 59 months. Vitamin A will be simultaneously distributed.
- In *Djibouti*, WHO is delineating surveillance and reporting mechanisms as well as guidelines for health care to be offered through mobile clinics.
- In the north-eastern provinces of *Kenya*, an immunization campaign against measles is ongoing together with further field assessments to identify needs and gaps. Meanwhile, WHO is gearing up surveillance, training in case management, vector control and resource mobilization activities for the oncoming malaria transmission season.
- In *Somalia*, training of health workers on surveillance and health coordination is ongoing in Mogadishu.
- Across the sub region, WHO is fielding 16 New Emergency Health Kits, four diarrhoea kits and two traumas kits and supporting UNFPA with 40 kits for clean delivery and 40 kits for treatment of SGBV.
- The Emergency Relief Coordinator has granted a total of USD 4 million from the Central Emergency Response Fund (CERF) for urgent, life-saving programmes in Djibouti, Ethiopia, Eritrea, Kenya and Somalia.

SOUTH ASIA EARTHQUAKE



Assessments and events:

- Return is practically completed in Battagram and Mansehra, but slower in Muzaffarabad and Bagh.
- Landslides and snow are still preventing return to some areas.

Actions:

- From six sub offices in the earthquake affected areas, WHO is now downsizing its presence to two sub offices in Muzaffarabad and Mansehra, though a new field office has been opened in Besham to support the Disease Early Warning System (DEWS).
- The health cluster will continue to exist, guided by the national Earthquake Rehabilitation and Reconstruction Authority (ERRA).
- WHO and partners are working to integrate the current early warning and outbreak response programme into the national disease surveillance system and on strengthening prevention, control and rapid response to waterborne disease outbreaks, with a special focus on water and sanitation.
- WHO EMRO and Headquarters are organizing a visit to Pakistan to support the WHO Country Team in planning for the post-disaster phase within the framework of the UN plan "From Relief to Recovery".
- WHO activities are supported by Australia, Canada, Denmark, the European Commission, Ireland, Italy, Japan, the Republic of Korea, Kuwait, Monaco, Norway, the Slovak Republic, Sweden, Switzerland, Turkey, the United Kingdom, the United States and many private contributions.

DEMOCRATIC REPUBLIC OF THE CONGO



Assessments and events:



- Due to fighting between the government and armed groups in the North and centre of *Katanga* in the last six months, the number of displaced people has reached at least 165 000.
- The MONUC said on Wednesday 3 May that military personnel from the DRC as well as members of Mai-Mai groups are systematically committing human rights violations against scores of civilians in the province.

Actions:

- Starting on 25 April, the MoH and WHO are conducting a joint mission to *Katanga*. With technical and financial support from WHO, the mission will assess the health status of the displaced population living in the zone between Mitwaba, Dubie and Mlemeba Nkulu. Action is critical as the already weak health care system cannot cope with the recent influx of displaced people.
- With financial and technical support from Italy, WHO is dispatching 16 New Emergency Health Kits, two cholera kits and two surgical kits to Katanga. They will be distributed among the MoH, MSF and selected local NGOs.

Health Action in Crises

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<p>⇒ On 26-29 April, DGR/HAC visited the Country Office in Kinshasa, meeting with the WHO country team, the MoH and the Deputy Special Representative of the Secretary General to DRC.</p>	<ul style="list-style-type: none"> • WHO is working with the office of the Deputy Special Representative of the Secretary General to DRC and will contribute to a transition plan with special emphasis on the health and social services component. • WHO is supporting the MoH in developing systems for emergency response, disease surveillance, and TB control and in establishing a national programme to address gender-based violence among displaced populations. • In 2005, WHO activities were supported by Belgium, the European Commission, Finland, Norway and the United Kingdom. In 2006, support has been given by Finland and from the Pooled Fund.
<p>CHAD</p> 	<p>Assessments and events:</p> <ul style="list-style-type: none"> • Security remains unstable. Some humanitarian activities have had to be interrupted. Most UN missions have been postponed to after the presidential election. • A WFP mission in villages south of Adré near the border with Sudan has revealed new internal displacements. Nutritional screening showed that these populations were suffering from acute malnutrition, with rates ranging between 5.5 and 8% (measurement by MUAC). Some 80% of the households concerned have no access to drinking water and none to sanitation. <p>Actions:</p> <ul style="list-style-type: none"> • Health activities – including measles vaccination, the provision of essential medicines, the recruitment of health staff and the deployment of mobile clinics – for displaced persons south of Adré and in Goz Beida are ongoing thanks to UNICEF, the MoH, the ICRC and partner NGOs. WHO is ensuring epidemiological and nutritional surveillance. • WHO is participating to the preparation of a survey on the impact of cost recovery of health services. The survey will cover three health districts and is due to begin on 15 May. • In 2005, WHO activities in Chad were made possible by a contribution from the United Kingdom and a loan from CERF. In 2006, the United Kingdom has provided seed emergency response funding.
<p>UGANDA</p> 	<p>Assessments and events:</p> <ul style="list-style-type: none"> • Between 16 April and 3 May, 126 cases of cholera have been notified in Agoro IDP camp in Kitgum District. • The latest data shows a downward trend in the number of cases, however heavy rains in the area make district-wide cholera preparedness essential. <p>Actions:</p> <ul style="list-style-type: none"> • The district health authorities, supported by WHO, UNICEF, MSF-Holland, IRC and others NGO partners, are in controlling the outbreak. WHO supported: <ul style="list-style-type: none"> ➢ Supply and pre-positioning of a cholera kit; ➢ Provision of non-medical equipment for the MSF treatment centre in the camp; ➢ Coordination and the development and implementation of a district-wide cholera preparedness plan; ➢ Monitoring of available supplies, training and provision of reference materials. • We are in the process of funding the surveillance and training component of the district-wide cholera preparedness plan which was jointly developed by the DHT, UN agencies and NGOs • In 2005-2006, support for WHO activities was received from the European Commission, Finland, Norway, Sweden, the United Kingdom and the United States.

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GUINEA



Assessments and events:

- An outbreak of cerebrospinal meningitis was reported in the western region of *Kankan*. Between 20 March and 22 April, more than 100 cases have been notified, including 22 deaths.
- *Guinea Forestière* is also affected with one case reported in the Beyla prefecture and another in N'Zérékoré. No deaths have been reported.
- The immunization coverage is very low and most of the people in the areas at risk would need to be vaccinated.

Actions:

- WHO conducted a joint mission with the MoH in Kankan to review response activities and identify and needs potential gaps.
- WHO provided 3 500 bottles of oily chloramphenicol for treatment. Petrol for surveillance and outreach activities was provided to the local health authorities.
- The Country Office is in contact with the AFRO Regional Office to discuss the procurement of vaccines and related equipment.
- In 2005, WHO activities were supported by Norway.

WEST BANK AND GAZA



Assessments and events:

- On 26-27 April, WHO participated in a UN seminar on "Assistance to the Palestinian People" focusing on the international efforts at alleviating the economic and humanitarian crisis.

Actions:

- WHO is participating in the UN consultation on the current situation in the West Bank and Gaza. The WHO Coordinator in Jerusalem is monitoring the health situation.
- WHO supported a training for district nutrition staff from the Palestinian MoH. The 15 participants will become part of a nutrition surveillance system set up to strengthen data collection and management.
- In 2005, WHO activities in the West Bank and Gaza Strip were funded by AGFUND, the European Commission, Norway and the United States. Norway is contributing to 2006 activities.

INTER-AGENCY ISSUES

- **Tajikistan.** On 3 May, the IASC Weekly meeting in Geneva briefed on the UNDAC preparedness mission to Tajikistan.
- **United Nations Disaster Assessment and Coordination Team.** UNDAC is holding its 2006 Induction Course near Lausanne, Switzerland, from 7 to 19 May.
- **Emergency Response Training.** From 30 April to 13 May, WFP is holding a residential course in Revinge, Sweden, co-hosted by the Swedish Rescue Service Agency.
- **Humanitarian Coordinator System.** The first meeting of the IASC Group on issues related to the Humanitarian Coordinator will take place on 15 May.
- **Gender and Humanitarian Action.** On 16 May, the IASC Taskforce will discuss the Handbook and other issues.
- **CAP.** OCHA is organizing a CAP Training of Trainers Workshop in Geneva on 16-18 May.
- **Cholera control.** On 17 May, WHO will brief the IASC weekly meeting in Geneva on cholera control in emergency settings.
- **IFRC.** The IFRC Global Health and Care Forum will take place in Geneva on 17-19 May.
- **Information Management.** Preparations are under way for the IASC workshop on this theme on 8-9 June in Geneva.

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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