

Each week, the World Health Organization 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.

PAKISTAN



- ⇒ The Country Team has decided to reinstate the cluster approach.
- ⇒ Federal and Provincial MoH have established health emergency operation centres in Karachi and Quetta.
- ⇒ In response to the effects of the cyclone and flooding and the activation of the cluster process, a Global Emergency Shelter Cluster meeting took place in Geneva on 4 July.

Assessments and events:

- Cyclone Yemyin and days of torrential rains caused severe flooding in Sindh (Karachi), Balochistan and the North-West Frontier Province (NWFP). The Government reports 242 persons killed and 1.65 million people affected (including 1.5 in Balochistan).
- In NWFP, some of the areas hit by the 2005 earthquake were also affected.
- The estimated number of homeless in Balochistan and Sindh is 300 000. More than 260 villages are reported destroyed.
- In Balochistan, 60% of the affected areas are not accessible due to flooding and damaged roads. Large-scale displacement is reported, with some marooned in the hardest hit areas. Rescue is only possible by helicopter or heavy vehicle.
- More than 40% of the 74 health facilities in Lasbela district are partially or fully damaged. However, all hospitals are functional, some with damage. Shortages of clean drinking water are reported from the affected districts. Hospitals in Sindh and Balochistan have reported 1950 suspected cases of acute watery diarrhoea (AWD) and 300 snake bites. Malaria, acute respiratory infections and skin infections are also reported.
- Urgent needs include rescue services, water storage and distribution, shelter, food, vector control and essential medicines.

Actions:

- The Health Cluster and Health Emergency Preparedness and Response cell were activated in Islamabad. There are daily health coordination meetings. A Health Emergency Operations Centre is open in Karachi and Quetta.
- WHO has four international surge staff from EMRO and HAC supporting logistics, assessments and coordination. The disease surveillance system has been activated and WHO teams are in the field.
- WHO dispatched one New Emergency Health Kit and 20 NEHK basic units, eight trauma kits, one diarrhoeal disease kit, 450 000 chlorine tablets and 1000 vials of snake anti-venom; some of these supplies have already reached Lasbela. Local and regional procurement of medicines is ongoing.
- The Government of Pakistan is accepting material resources.
- So far, support for WHO operation has come from Italy and in-house resources with an offer from Norway. An Inter-Cluster Flash Appeal is being prepared asking for \$ 4.6 million in emergency funding for health through WHO, UNICEF and other partners. CERF is being mobilized.

CHAD





- ⇒ The cluster approach has been activated.



Assessments and events:

- In the east, increasing violence and lawlessness are combining in a complex humanitarian emergency. The onset of the rainy season is further hampering humanitarian efforts and increasing the risk of outbreaks of waterborne diseases such as cholera, dysentery and typhoid.
- Between 1 January and 25 June 718 cases of hepatitis E, including nine deaths, were notified in the eight districts covered by EWARS.
- A case of meningitis was identified in one of the IDP sites in Goz Beida, and a case of polio was detected in Abéché, the first case in 2007.
- Action by Churches Together (ACT) International is to manage sites at Habile and Aradib near Koukou in the Dar Sila district. The sites host now 35 000 IDPs, and are being assisted by COOPI and MSF-France.
- The strike, which includes government-run hospitals and clinics, continues.

Actions:

- The results of the UNHCR, UNICEF and WHO assessment mission in the IDP sites was presented to OCHA on 3 July. It highlights the inadequacy of the humanitarian response, citing concerns for nutritional and disease outbreaks and recommends strengthening the hospital in Goz Beida,

<p>⇒ On 11 July, WHO and OCHA will brief the IASC weekly meeting in Geneva on the humanitarian situation in Chad.</p>	<p>improving access to nutritional support, water and sanitation.</p> <ul style="list-style-type: none"> • WHO is advancing with plans to open a field office in Goz Beida. An epidemiologist and a logistician have been recruited to strengthen operational capacities in Abéché and the country in general. • WHO met with UNICEF and Save the Children to review the provision of technical support to the NGO's nutritional activities in and around Abéché. In Biltine, WHO supported the organization of the Health and Nutrition reunion with the health delegation from Wadi Fira. • A interagency nutritional assessment targeting the IDPs near Dar Sila and Quaddai has been undertaken with results expected mid-July. • Emergency activities are supported by ECHO, Italy and the CERF.
<p>SUDAN</p>  <p>More information is available at: www.emro.who.int/sudan/</p> <p>⇒ The UN and African Union envoys are arranging a 15-16 July meeting of key stakeholders in Tripoli to work towards a political solution in Darfur.</p>	<p>Assessments and events:</p> <ul style="list-style-type: none"> • In <i>Southern Sudan</i>, since 1 January, the MoH has reported 11 949 cases of meningitis, including 671 deaths. A downward trend in the number of cases has been observed with the onset of the rainy season. Meanwhile during the same period, 8975 AWD cases and 366 deaths were reported in 24 counties. The number of cases is decreasing. • Flash flood have been reported in the town of Rabak, south of Khartoum, leaving 2500 homeless with more rain forecasted. Flooding is also reported in the States of Sennar, Kassala, North Kordofan and Jazeera. <p>Actions:</p> <ul style="list-style-type: none"> • In <i>Darfur</i>, rehabilitation of health facilities and access to hospital care for IDPs remain priorities of WHO's work. The AWD Preparedness and Response Technical Task Force has been reactivated in Geneina and Zaleingi; WHO co-chairs the meetings. • In <i>North Darfur</i>, a cleaning campaign was conducted by WHO and partners in Abou Shok and Assalam camps to try and avert an upsurge in diarrhoea cases during the upcoming rainy season. • In <i>southern Sudan</i>, WHO is monitoring the trend of cholera cases to assist planning and preparedness for the upcoming rainy season. • Following reports of an outbreak of suspected cholera in Liethnom, <i>Warrap State</i>, an mission including the MoH, WHO, OCHA, the UN Resident Coordinators Office, World Relief and Medair was organized to ascertain the scale of outbreak, collect samples, assess water and sanitation and set up a surveillance system and a crisis taskforce. • In 2007, contributions for WHO's emergency activities were received from ECHO, Ireland, Finland, the CERF and the Common Humanitarian Fund.
<p>OCCUPIED PALESTINIAN TERRITORY</p>  <p>More information is available at: www.emro.who.int/palestine/</p> <p>⇒ The Israeli Government transferred an amount of nearly US\$ 120 million to the Palestinian Authority, or approximately 20% of the frozen tax revenues.</p>	<p>Assessments and events:</p> <ul style="list-style-type: none"> • Violence continued in Gaza, with 24 deaths and 41 injuries reported in the last week. On 3 July, Israel and Egypt agreed to open a joint border crossing allowing 4000 Palestinians to return to Gaza, though the three main Gaza border crossings remain largely closed. • Precarious food and supplies, and concerns over drinking water persist. • No disruption of care at Gaza's hospitals was reported but shortages of medical supplies continues. <p>Actions:</p> <ul style="list-style-type: none"> • Over the past week WHO delivered 90% of the Priority List supplies as well at 61.5% of the supplementary drugs from the Master List, including 23 pallets of supplies to Gaza. • WHO leads the third logistics meeting and is coordinating transport of medical supplies to Gaza from MDM-France, UNFPA and MSF. • The MoH and WHO conducted a joint IT training on Basic Computer Skills and Pharmacy Database in Gaza from 30 June to 4 July. • WHO conducted an interagency meeting on The Global Fund to Fight HIV, TB and Malaria with the joint proposal finalized on 4 June.

	<ul style="list-style-type: none"> • WHO met with UN Sector leads and will propose a “response matrix” as part of a “Contingency Plan for the West Bank” on 18 July. This will guide expected interventions and available resources of health stakeholders. • WHO’s emergency activities are funded by Spain, ECHO, Norway and Italy.
<p>HORN OF AFRICA</p> 	<p>Assessments and events:</p> <ul style="list-style-type: none"> • In <i>Ethiopia</i>, 5991 cases of AWD and five deaths were reported between 18 and 24 June, bringing the cumulative total of cases and deaths since April 2006 to 82 854 and 951 respectively. As the rainy season begins, forecasts predict worse flooding than last year: up to 690 000 people could be affected. • In <i>Somalia</i>, new violence erupted in Mogadishu with a reported total of 2000 people injured, 500 killed and 400 000 displaced, including many of the 123 000 who had recently returned. Costs of basic needs have reportedly increased by 50% to 100% over the last two weeks. • Insecurity is limiting humanitarian operations; International Medical Corps suspended its activities in El-Berde, following the death of two employees. • Between 1 January and 22 June, 37 094 AWD cases were reported from central and south Somalia including 1133 deaths. The number of reported cases is decreasing in all the regions except in Bay. During the same period, 2318 cases were reported from Somaliland including 35 deaths. <p>Actions:</p> <ul style="list-style-type: none"> • In <i>Ethiopia</i> WHO assisted the Federal MoH with a three-week exercise on AWD in the affected regions. WHO participated in the UN Technical meetings and continued the interagency development of the Flood Contingency Plan for Kiremt 2007 and Flood Standard Procedures. • In <i>Somalia</i>, following an increase in the number of AWD cases reported from Dharqo health centre, near Baidoa, WHO provided supplies (Ringer Lactate, Oral Rehydration Salts, doxycycline, etc.) and conducted health education on the prevention and management of AWD cases. • WHO is requesting US\$ 900 405 and 800 830 from the CERF to support the immediate response against the AWD outbreak, and provide basic life saving health care services to the displaced population and host population in areas affected by floods and conflict. • WHO activities are supported by the CERF, Canada, Italy, Norway, Sweden, the United States and Finland for Somalia and cluster coordination, the CERF in Kenya as well as by the CERF and ECHO in Eritrea.
<p>CENTRAL AFRICAN REPUBLIC</p> 	<p>Assessments and events:</p> <ul style="list-style-type: none"> • The MSF mobile clinic in Paoua has suspended its activities since 12 June. • In Ouham Pende, insecurity and the onset of the rainy season have restricted humanitarian activities leaving 400 000 people at great health risk. • Eight cases of meningitis were reported between 18 June and 24 June. • Some humanitarian aid has begun reaching the Sudanese refugees at Sam Oundja. <p>Actions:</p> <ul style="list-style-type: none"> • WHO coordinated the third meeting of the health cluster in the region, where issues of security and freedom of operations were discussed. • WHO participated in a meeting about HIV/AIDS with the health district of Ouham Pende; out of the 2742 persons living with HIV/AIDS reported in the district, only 200 receive co-trimoxazole prophylaxis and 69 ARV treatment. • Two WHO nurses continue to give aid to the refugees at the Sam Oundja site. • Emergency activities are funded by Finland and the CERF.

INTER-AGENCY ISSUES

- The **Humanitarian Liaison Working Group** in Geneva met on 2 July.
- **Preparedness and Contingency Planning.** An inter-agency consultation of contingency planners organized by the IASC Sub working group on Early Warning took place in Geneva on 2-4 July. WHO was represented by AFRO and EURO.
- **Clusters.**
 - The second Cluster/Sector Lead Training (CSLT) took place in Montreux on 2-6 July.
 - Humanitarian Reform Workshops took place in Guinea on 5 July and the Central African Republic on 11 July.
- The **Good Humanitarian Donorship (GHD)** Implementation Group briefed the IASC Consultative Group in Geneva on 6 July on the 19 July annual donor-only meeting of the GHD as well as the GHD-IASC plus meeting on Humanitarian Financing on 20 July. The IASC Contact Group on GHD met in Geneva on 2 July.
- **Consolidated Appeal Process.**
 - A CAP/Central Emergency Response Fund Training took place in Rome from 2-4 July 2007.
 - A regional CAP Training of Trainers workshop with representatives from West African CAP countries will be held in Dakar, Senegal from 9-11 July.
 - The 2007 CAP Mid Year Review will be held in Geneva on 17 July in the margins of the ECOSOC Humanitarian Segment.
 - The next CAP Sub-Working Group meeting will take place on 19 July.
- **Mozambique.** The Representatives of WFP and UNICEF in Mozambique briefed the Humanitarian Liaison Working Group in Geneva on 3 July on the response of both agencies to the humanitarian emergency caused by the cyclones that hit the country in February.
- **UNWRA.** On 3 July, the General Commissioner of UNWRA met with the Humanitarian Liaison Working Group in Geneva.
- **Gender and Humanitarian Action.** The IASC Gender Sub-Working Group meeting met on 6 July. The next SWG meeting will take place on 3 August.
- **IASC Retreat.** A stock-taking meeting in the margins of the ECOSOC will take place in Geneva on 9 July in preparation for the IASC Retreat, scheduled for mid September.
- The first meeting of the **Global Humanitarian Platform** will take place in Geneva on 11-12 July.
- **Peacebuilding.** A new NGO report *Consolidating the Peace? Views from Sierra Leone and Burundi on the United Nations Peacebuilding Commission* will be launched in Geneva on 9 July. The report has been produced by ActionAid, CAFOD, and CARE.
- The newly established **IASC Reference Group on Human Rights and Humanitarian Action** will meet on 10 July.
- The first meeting of the **Global Humanitarian Platform** will take place in Geneva on 11-12 July.
- **Transition.** An informal ECOSOC event on the transition from relief to development will take place on 13 July. Panel 1 will discuss the Democratic Republic of the Congo. Panel 2 will discuss Burundi.
- **ECOSOC.** The Humanitarian Segment of ECOSOC will take place in Geneva on 16-18 July. Side events will focus on HIV/AIDS in Humanitarian Action (13 July), building the resilience of nations and communities to disasters (16 July), and on encouraging/funding national and local response to forgotten/neglected emergencies disasters, including small scale disasters (18 July).

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

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