PHILIPPINES

Events and assessments:

- Tropical Depression "Winnie" triggered massive floods in northern and central Philippines. As of today (6 December), more than 637 persons are reported dead, 255 are injured, and 630 are missing. Approximately 650,000 people are affected.
- The most heavily impacted provinces include Isabela (Region II); Bulacan, Nueva Ecija, and Aurora (Region III); Quezon and Rizal (Region IV), and Camarines Sur (Region V).
- The UNDAC assessment is scheduled for 8 December. The team will visit two municipalities in Quezon Province. Because the roads to the most seriously affected areas are still not passable, the group will be brought by helicopter to the area.
- DOH Regional Centers for Health Development teams (including clinicians and psychosocial support teams) have been dispatched to the severely affected communities.
- More than 60 patients from the province of Quezon have been airlifted to government hospitals in Metro Manila for management of fractures, lacerations, and abrasions because provincial and regional facilities could not absorb the cases.
- The Department of Health expressed the following health concerns:
  - need for regular air transport to be able to bring medical teams to the severely affected communities;
  - medicines and supplies needed:
    - paracetamol (tablets and syrup),
    - amoxicillin,
    - oral rehydration salts,
    - vitamin A (retinol) capsules,
    - water disinfection powder,
    - first aid kits (in bags), including gauze, cotton, and povidone iodine;
  - malaria prevention and control;
  - diarrhoeal diseases prevention and control;
  - technical support in the areas of environmental health, forensic pathology, psychosocial care, health services management, health assessment.

Actions:

- In light of the identified needs, WHO is requesting US$ 95,000 in urgent financial assistance for medicines/supplies; malaria prevention and control activities; water purification; technical assistance (forensic pathology, health services management, environmental health, psychosocial care); health promotion activities; logistics; and documentation. WHO is particularly well-situated to provide this support, as the Western Pacific Regional Office is located in the Philippines.
- WHO is coordinating with the Department of Health to provide water purification tablets and safe water sources. Gastro-enteritis outbreak is a major concern, especially among young children without proper nutrition in the past weeks.
- WHO is getting prepared for a possible outbreak of malaria through supporting the rehabilitation of health facilities and resumption of health services.
- WHO nominated a public health expert to participate in the UNDAC mission.
SUDAN

DARFUR CRISIS

Events and assessments:
• The Early Warning Alert and Response Network (EWARN) for epidemic-prone diseases in South Darfur has expanded by four new sites. EWARN in South Darfur now includes 20 surveillance sites and covers more than 315,000 Internally Displaced Persons (IDPs) in accessible camps.
• The two-month environmental health campaign was successfully completed in Kalma camp, South Darfur. WHO provided technical and financial support, and contributed to the campaign's supervision, monitoring and evaluation.
• A joint UN Joint Assessment on 30 November was carried out to determine the impact of previous week's fighting on IDPs. The assessment was conducted in Sarafaya, Korma, and Taweela.
• The second round of the polio NIDs (National Immunization Days) in Kalma camp, South Darfur, was interrupted due to security concerns. WHO worked with the State Ministry of Health, NGOs, and the local community to get it back on track. WHO trained 65 community health volunteers and 15 health workers to serve as vaccinators. The second round of the campaign had a coverage rate of 108%, with more than 16,500 children vaccinated.

Actions:
• Preparations are underway for a water surveillance and monitoring workshop aimed at strengthening water quality activities in the camps in West Darfur. WHO, the State Ministry of Health, WES, UNICEF, and NGOs are also contributing to the one-day workshop scheduled for 8 December.
• In South Darfur, Kass Hospital rehabilitation continues. WHO provided funds (US$ 86,000) for rehabilitation of the water supply system and is facilitating the repair of the lighting system. In addition, WHO is assisting the hospital to fulfill its needs for emergency drugs and has prepared a list of drugs to be purchased locally (the estimated cost is US$ 3,700 for a one-month supply).
• In anticipation of any possible meningitis outbreak during the coming dry season, WHO has developed a strategy for meningitis outbreak control in South Darfur. Based on this framework, the WHO sub-office in South Darfur is extending technical support to the Epidemiology Department of the SMoH to develop a preparedness and response plan for epidemic meningococcal diseases (EMD) outbreaks.
• WHO supplied the American Refugee Committee (ARC) in South Darfur with five basic health kits, malaria rapid diagnostic tests, ACT, technical guidelines, and standard protocols. In North Darfur, WHO will provide malaria drugs and Malaria Diagnostic Test (RDT) Kits to agencies with trained service providers.
• Funding for WHO humanitarian operations in Darfur has been provided by the African Development Bank (AfDB), 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.

Darfur Refugees in Eastern Chad
• Hepatitis E update: Partners are working on water and sanitation interventions and health education. The numbers of Hepatitis E cases and deaths are decreasing.
• Disease surveillance and response: The WHO team for the installation of EWARN arrived in Abéché on 6 December and participated in the health and nutrition sector coordination meeting.

IRAQ

Events and assessments:
• WHO delivered 20 vehicles to the MoH Baghdad as part of the UNDG Iraq Trust Fund ‘Strengthening Primary Health Care Programme’ for distribution to the governorates.
• WHO delivered requested supplies and medicines—including stomach tubes, urine bags, and chronic illness drugs—to the MoH/Kimadia warehouse within the past week.
• No new cholera cases have been reported in Basra since 15 November 2004, in spite of active case tracing.
• World AIDS Day was commemorated on 1 December. A symposium on HIV/AIDS was held, attended by MoH staff as well as members of various...
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/

Actions:
- WHO—in collaboration with the MoH and the Central Statistical Office at the Ministry of Planning—conducted a Maternal Mortality Rate Workshop in Amman from 29 November to 2 December. The workshop addressed the preparation of the dataset, the merge of the two surveys’ data (south/centre and the north), and the derivation of appropriate weights and standardisation of data files.
- WHO continues to support the MoH committee for monitoring the supply of medicines and medical supplies in Iraq. WHO’s contribution—besides direct technical support for pharmaceutical and computer programming—includes vehicle rentals, Daily Salary Allowance (DSA) to supervisors of a pilot study, computers, and hard- and soft-ware supplies.
- WHO conducted a three-day training course in Baghdad on the "Health Internetwork Access to Research Initiative" (HINARI) for faculty members from Baghdad Medical College.
- WHO is providing guidance to the MOH and the Ministry of Environment (MOE) on the strategy and steps for implementing the four environmental health programmes: chemical safety, healthy villages, water quality, and water technology.
- WHO and MoH plan to start a comprehensive multi-sectoral disaster management programme as part of WHO's support to the MoH emergency preparedness plans.
- WHO has supported the Minister of Industry by providing a health expert to the Emergency Operations Cell.
- WHO has sent five Iraqi physicians on medical fellowships this week. One physician is undertaking a fellowship training on "Zoonotic Diseases" in Parasitological and Immunological Laboratories at the Al Yarmouk University, Amman-Irbid. The other four physicians are undertaking a fellowship on Bionomics, Molecular Biology, and Control of Mosquito Vectors at the Ain Shams University in Cairo.

WEST BANK AND GAZA STRIP

Events and assessments:
- The Office of the UN Special Coordinator for the Middle East Peace Process, in conjunction with the UN Development Group, organized a one-day coordination workshop. Attendees included heads of all agencies working in West Bank and Gaza. The objective of the workshop was to assess ways to improve the following:
  - Coordination mechanisms and instruments between UN agencies at country level with regards to development assistance;
  - Common strategic planning elements and UN inter-agency strategic planning instruments such as the Country Assessment (CA) and the United Nations Development Assistance Framework (UNDAF);
  - Tools designed to enhance UN's collective analysis and programming in support of national goals and priorities, including the Millennium Development Goals.

Actions:
- WHO/Healthinforum and the MOH organized the first district health emergency coordination meeting in Jenin.
- A WHO consultant arrived for a five-day mission as part of the Essential Drug List (EDL) review project. The objectives of the mission, currently underway, are to analyze the draft EDL prepared by the MoH Pharmaceuticals department; provide recommendations on the final EDL; revise the materials used to train health professionals on the EDL and the Drug Formulary concepts; and advise on a new training strategy and plans to ensure good understanding of the medicines selection principle that will warrant consistent use of the EDL and the Formulary by health care providers.
- A WHO consultant accomplished a six-day mission from 28 November to 4 December to follow up on activities performed by Birzeit University and the Gaza Community Mental Health project (GCMHP) regarding the forthcoming Quality of Life Survey 2005. The two organizations have had preparatory discussions.
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/

with 13 focus groups in order to develop the final instrument for the survey.

• WHO West Bank and Gaza office participated in a workshop from 1 to 3 December in Milan organized by Headquarters regarding WHO/AIMS (Assessment Instrument for Mental Health System). AIMS is a tool to assess weaknesses and strengths of a country's mental health services.

• 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.

NORTH CAUCASUS

Events and assessments:

• On 19 November in Moscow, humanitarian agencies launched the 2005 Consolidated Appeal for Chechnya and Neighbouring Republics. The total requested funding amounted to nearly US$60 million, of which US$ 3,060,750 were for health projects to be implemented by WHO and partners.

• The MoH of Chechnya priorities for 2005 have been released. They include:
  ➢ Further improvement of skills of health staff;
  ➢ Rehabilitation of state health structures;
  ➢ Improvement of prophylactic campaigns, including vaccine and awareness activities;
  ➢ Strengthening of the primary health care level, ambulance, and first aid services;
  ➢ Improvement in health indicators of socially important diseases such as TB, AIDS, STI, drug/substance abuse;
  ➢ Implementation of the Republican-funded target programmes;
  ➢ Further development of the Centre of Emergency Medicine;
  ➢ Improve mother and child health care.

• On 24 November, a joint WFP/ECHO/WHO assessment mission was carried out the Urus-Martan and Shali districts of Chechnya. In this region, maternal mortality and perinatal mortality rates (23.6% compared to average in Russia - 12.1%) are of the highest in Russia. The birth rate in Chechnya (19.1) is twice as much as the rate in Russia (9.8). Infant mortality in the Republic is still much higher than in Russia.

• Four cases of Congo Crimean Haemorrhagic fever were registered in Malgobeck district of Ingushetia. Three people died, and the fourth person was hospitalized in Moscow, after medical evacuation. WHO supported the MoH, Ingushetia with funds for barrier nursing items and basic drugs and equipment.

• The emergency phase of the Beslan, North Ossetia crisis being over, there is now a growing need to implement the transfer from emergency to middle- and long-term psychosocial assistance to the affected population.

Actions:

• WHO donated to the MoH of Chechnya 350 medical books (35 different titles) for further distribution to health structures.

• In November, WHO conducted three training courses on HIV consultation and child feeding in the Republican AIDS Centre in Grozny. Twenty-two local health experts from various districts of Chechnya participated in each training course.

• A training on HIV/AIDS counselling for psychologists from the state sector and the NGOs was conducted from 9-12 November by the WHO trained facilitator from Chechnya.

• On 8-19 and 16-27 November, WHO conducted training courses on Integrated Management of Childhood Illnesses (IMCI) for 20 local MCH specialists in Urus-Martan district and 20 doctors from Naur district of Chechnya.

• On 22-26 November, WHO carried out a training course on Making Pregnancy Safer/Promoting Effective Perinatal Care (MPS/PEPC), neonatal care and prevention of mother to child transmission of HIV (PMTCT) for 25 neonatologists from Chechnya and Ingushetia.

• WHO invited an expert from the Moscow Research Institute of Psychiatry (MRIP ) to conduct a workshop (29 November to 3 December) on standardization of diagnosis and treatment of mental health in children in Nazran. Psychologists from psychosocial NGOs and state facilities from Ingushetia and Chechnya participated.

• WHO would like to thank the UK's Department for International Development

• On 1 to 3 December in Milan organized by Headquarters regarding WHO/AIMS (Assessment Instrument for Mental Health System). AIMS is a tool to assess weaknesses and strengths of a country's mental health services.
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/

INDONESIA

Events and assessments:

- Two earthquakes, followed by hundreds of aftershocks, have jolted Indonesia in the past month. An earthquake with a magnitude of 6.5 on the Richter scale hit Alor District, East Nusa Tenggara Province, on 12 November. It claimed 33 lives, and injured 300. A second quake measuring 6.4 on the Richter scale hit Nabire District, Papua Province, on 26 November. Twenty-eight people were killed and more than 200 people injured. Both quakes damaged thousands of houses and hundreds of public facilities.

- Seven health centres are damaged, three of these severely. The District Health Office is also severely damaged. The Nabire District Hospital was slightly damaged, but is still functional. Communications between sub-districts, health centres and field mobile health clinics and teams have been affected.

- On 30 November, the District Government/SATLAK PBP Nabire appealed for international humanitarian assistance and requested OCHA Indonesia to support coordination efforts. (Source: OCHA)

- The Ministry of Health sent the Emergency Brigade Team (EBT) from Makassar to assist at the Nabire District Hospital. The team consists of one surgeon, one general practitioner, one surgical nurse, and one anaesthetist. The District Health Office from Serui is on standby to send six nurses to Nabire, should they be requested. The MoH has provided essential medicines and materials, and indicated that these may be sufficient to manage the situation for the moment. On 3 December, 12 field health posts were opened.

Actions:

- WHO, in cooperation with the Centre for Health Emergency Preparedness and Response of the MoH, is:
  - Closely monitoring the situation;
  - Facilitating emergency information management and sharing findings with partner agencies;
  - Assisting in coordination efforts among different departments of MoH, UN agencies, and key stakeholders;
  - Identifying the immediate needs for medical and logistic support;
  - Finding additional resources through international and donors community networks;
  - On stand-by to travel with the post disaster assessment team from MOH to the site and provide technical support for the development of rehabilitation and emergency contingency plans.

HAITI

Events and assessments:

- Despite the efforts of UN agencies, the transitional government, international NGOs, and other actors, a large majority of the Haitian population remains extremely vulnerable. The response simply has not met the overwhelming needs.

- From a health point of view the main threat to people’s lives and well-being are:
  - (a) infectious diseases, 
  - (b) lack of access to emergency health care and 
  - (c) shortage of treatment and essential medicines for people with chronic conditions.

- Restoration of access to affordable health care, including drugs and the services of well trained doctors and nurses, has been delayed by staff shortages, structural problems, and a continuing unstable security situation. The people’s health is a critical element of the nation’s transition to a more stable future and intensified action to address Haiti’s structural problems in the health sector is therefore needed.

Actions:

- WHO/PAHO’s actions after the floods in the North Western part of Haiti focused on coordination, vector control activities, the collection and analysis of epidemiological information for all partners in the health sector, and distribution of essential drugs and medical material.

- National and international staff of WHO/PAHO with expertise in different fields (epidemiology, water and sanitation, disaster response management) carried out several evaluation missions to the affected areas. The Ministry of Health and WHO/PAHO opened an office in Gonaives to coordinate and plan the activities of
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/

- An epidemiological surveillance system was put into place in cooperation with Ministry of Health and the US Centres for Disease Control and Prevention. With technical and material support from WHO/PAHO, the MoH carried out vector-control operations. Spraying activities will continue in the cities of Gonaives and Port de Paix for a three-month period.
- WHO/PAHO has carried out the cleaning of the regional Ministry of Health pharmacy. All damaged medicines and medical material were properly destroyed while PROMESS pharmacists salvaged non-damaged items.
- In the wake of the floods and in cooperation with UNICEF, WHO provisionally restored the cold chain and supplied health centres with vaccines in order to resume the expanded program on immunization as soon as possible.

World Conference on Disaster Reduction
18-22 January 2005,
Kobe, Hyogo, Japan

The World Conference on Disaster Reduction (WCDR) is a milestone event to increase the profile of disaster risk reduction in development planning and practice. The Conference will provide a unique opportunity to promote a strategic and systematic approach at the national level to address vulnerabilities and to reduce risk to natural hazards. The Conference will build on the findings of the review of the implementation of the Yokohama Strategy and Plan of Action of 1994. Expected conference outcomes include:

- Increased awareness, recognition and political endorsement for implementing disaster risk reduction and mobilizing local, national and international resources;
- Launching of specific initiatives and partnerships to support the implementation of the International Strategy for Disaster Reduction;
- Assessing achievements and identifying good practices;
- Defining the remaining challenges, critical needs and opportunities in disaster reduction initiatives worldwide and examining emerging issues; and,
- Developing a set of objectives and areas of action for disaster risk reduction to implement the objectives of the Johannesburg Plan of Implementation for Sustainable Development, as essential conditions to achieve the relevant Millennium Development Goals (MDGs).

The Conference is scheduled to be held on 18-22 January 2005 in Kobe, Hyogo, Japan and will take place immediately after the commemoration of the tenth anniversary of the Great Hanshin-Awaji Earthquake which struck Kobe and the neighbouring area in the early hours on 17 January 1995, killing more than 6,400 people and injuring approximately 40,000.

(Source: http://www.unisdr.org/wcdr/)

INTER-AGENCY INITIATIVES

- **UNRWA.** The ad-hoc Committee for announcing voluntary contributions to UNRWA will meet in Geneva on 6 December. WHO will participate.
- **Sudan.**
  - The next meeting of the Inter-Agency Standing Committee Taskforce on Darfur will take place in Geneva on 7 December. WHO is a member of ITF and will participate.
  - On 9 December, UNHCR will hold a donor briefing on the Sustainable Option for Livelihood Security in Eastern Sudan (SOLSES). Representatives from the Programme Management Unit (IUCN, GTZ, UNICEF and UN Habitat) will also be present.
- **MCDA.** On 7 December, WHO will attend in Geneva the meeting of the Consultative Group on the Use of Military and Civil Defence Assets.
- **Reproductive Health in emergency settings.** WHO, as a member of the Inter-Agency Working Group (IAWG) on Reproductive Health in Refugee Settings, will participate in the IAWG meeting in Geneva on 7 December.
- **Somalia.** The 2005 Somalia Appeal will be launched in Nairobi, Kenya, on 7 December. Funds requested by WHO and implementing partners amount to US$ 4,937,140.
- **OCHA in 2005.** On 8 December, the Emergency Relief Coordinator will launch in Geneva the OCHA activities and Extra-Budgetary Funding Requirements in 2005. WHO will attend.
- **Angola.** On 9 December, UNHCR will brief the voluntary repatriation operation in Angola on lessons learnt from 2004 and plans for 2005. UNHCR Representatives from the Democratic Republic of Congo, Namibia, and Zambia attend.
- **IASC Plenary.** Preparations are under way for the next IASC Plenary in Geneva on 9 December. The
meeting will discuss a) lessons learnt from Darfur, b) action to address gender based violence in emergencies, c) the humanitarian response review, d) expanding humanitarian dialogue and strengthening partnerships, e) review the work of the IASC in 2004 and f) endorsing the 2005 workplan. The Representative of the WHO Director-General for Health Action in Crises will participate.

- **HWLG.** Following the IASC Plenary, Jan Egeland will brief the Humanitarian Liaison Working Group in Geneva on the IASC Principals meeting and the 2005 Montreux Retreat.

- **Great Lakes Region.** On 15 and 16 December, WHO will participate in Nairobi in a regional scenario development and humanitarian analysis workshop for the Great Lakes Region.

- **GDAS.** The first international Global Disaster AlertSystem (GDAS) workshop will be held in Geneva from 14 to 16 December. The purpose of the workshop is to determine the scope of GDAS and identify information requirements of decision makers at all responder levels within the international community. WHO plans to participate.

- **CAP.** On 14 December, the next Consolidated Appeals Process Sub-Working Group will update on the Needs Assessment Framework Matrix and review the production and launch of the Consolidated Appeals. WHO is a member of the CAP SWG and will participate.

- **ECHA.** The next meeting of the UN Executive Committee on Humanitarian Affairs (EHCA) will take place on 16 December. Tentative agenda items include: 1) Somalia, Briefing by the Under-Secretary-General for Humanitarian Affairs on his recent mission to Somalia, 2) Uganda: joint briefing by the UN Department for Political Affairs and the UN Department for the Coordination of Humanitarian Affairs, and 3) open-ended discussion on the Report of the UN Secretary-General's High Level Panel on Threats, Challenges, and Change (issued on 2 December 2004).

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. Map source: Perry Castaneda Library Map Collection, University of Texas at Austin.