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 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.

HORN OF AFRICA

Assessments and events:
- Up to 11 million people, mostly nomads living in areas which are difficult to access, are facing severe food insecurity due to the prolonged drought in Djibouti, Eritrea, Ethiopia, Kenya and Somalia.
- A survey carried out by the NGO Save the Children in selected pastoral areas of the Somali region in Ethiopia reported Global Acute Malnutrition rates as high as 20%.
- Under-nutrition results in increased morbidity and mortality, particularly from communicable diseases, while ill health, in turn, aggravates malnutrition.
- Population displacements, precarious sanitation and lack of drinking water are expected to further increase the risk for cholera, typhoid fever, diarrhoea, acute respiratory infections and measles. The limited health human resources and medical supplies as well as the low immunization coverage in affected areas are additional risk factors.
- The immediate enhancement of national and international capacities for response is required for a possible worsening of the situation in the next 3 to 6 months.

Actions:
- In Nairobi, WHO briefed the UN Special Humanitarian Envoy on the health aspects of the sub-regional crisis and is calling a meeting of the health partners to advance coordinated plans for the sub region.
- A joint AFRO and Headquarters team is assisting the WHO Office in Eritrea to finalize the contingency plan for the health sector.
- In order to reduce avoidable mortality and morbidity in the region, WHO is developing a strategy based on managing information, enhancing the coordination of all humanitarian actors, decentralizing capacities and being ready to fill critical gaps.
- In 2005, WHO activities in Kenya were supported by the African Development Bank; 2006 support for Somalia activities has come from Italy; no voluntary contributions were received for Djibouti, Eritrea or Ethiopia.

SOUTH ASIA EARTHQUAKE

Assessments and events:
- As no massive movement of people are predicted nor large numbers of cases of malnutrition are observed, the international community is cautiously optimistic about its ability to avert a further humanitarian disaster.
- While the focus remains on relief needs for the rest of winter, increasing attention is placed on the beginning of return and early recovery phases.
- The warm weather – not common at this time of the year – is welcome but impacts on the sanitation conditions in camps.
- In Battagram, a survey showed that only two-thirds of people needing care received treatment, emphasizing how the lack of female health workers limits access to medical care for women. Targeted services for vulnerable groups like pregnant women and young children were recommended.

Actions:
- The MoH, WHO and the main national and international health actors held a workshop to review activities and discuss the strategic direction for the transition period.
- In Mansehra, 35 medical technicians were trained on the Disease Early Warning System (DEWS) and on issues such as psychosocial care and reproductive health.
- In Mansehra and Muzaffarabad, UNFPA/WHO training is ongoing for Lady Health Workers and female health technicians on topics such as reproductive
On 23 February, UNHCR is briefing the humanitarian community in Geneva on its 120-day Emergency Response to the South Asia Earthquake and the Way Forward.

On 24 February, the IASC-UNDG Task Force on the South Asia Earthquake will update on the humanitarian situation and on transition planning, the real time evaluation as well as issues of security and gender.


Assessments and events:

- The new constitution was officially adopted on 18 February.
- In the provinces of North and South Kivu, Orientale and Katanga, security remains unstable. According to sources, 8,000 to 14,000 people have been displaced by fighting in the region of Malemba, Katanga. Farmers’ access to fields is difficult in some areas, and this could cause food insecurity later in the year.
- In Katanga, the cholera outbreak is subsiding, with a total of 186 cases and 1 death. No new cases have been reported since 10 February.
- In Goma, North Kivu, more than 100 cases of cholera have been notified since the beginning of the year. No deaths have been reported thanks to good case management but water and electricity shortages could worsen the situation.
- In Mbuji Mayi, the capital of the Kasai Oriental Province, the epidemic of measles, ongoing since November 2005, is totalling more than 800 cases and spreading to peripheral areas.
- Another 527 cases of measles, including 10 deaths, have been notified in the Bas Congo Province.
- The region of Isiro, Province Orientale, continues to be on alert following a suspicious case of haemorrhagic fever. Samples collected have tested negative for Marburg and Ebola.

Actions:

- WHO provided kits and supplies to the Bas Congo, Katanga, North and South Kivu provinces to respond to the cholera and measles epidemics.
- A joint MONUC, UNICEF and WHO mission was carried out in Saké, North Kivu, to assess the situation of displaced pygmies.
- WHO is participating in a UNHCR-led interagency mission in Equateur, South Kivu and Katanga provinces to evaluate the needs prior to the return of refugees from Burundi.
- Preparations are ongoing for a contingency plan on Avian Influenza.
- WHO provided financial and technical support to a MoH workshop for regional coordinators on the national TB and HIV/AIDS programmes.
- With WHO support, a workshop revised the national health system and defined a strategy to strengthen services and foster cooperation with health partners.
- In 2005, WHO activities were supported by Belgium, the European Commission, Finland, Norway and the United Kingdom.

Democratic Republic of the Congo

More information is available at: [WHO’s planned activities for the DRC in 2006](http://www.who.int/hac/crises/international/pakistan_earthquake/en/index.html)
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/

SUDAN

Assessments and events:
- Between 28 January and 20 February, 3,478 cases of cholera, including 75 deaths (CFR 2.15%), have been reported in Yei and Juba, South Sudan.
- In Darfur, acute respiratory infections (ARIs), malaria and bloody diarrhoea remain the leading causes of morbidity for all age groups.
- The general security situation in West Darfur remains unstable and phase 4 is activated in some areas.

Actions:
- In South Sudan, the South Sudan MoH, the Federal MoH and WHO have set up a task force to coordinate the overall response to the cholera outbreak. The main activities include:
  - Strengthening of the surveillance and reporting systems in all affected areas;
  - Provision of two cholera kits and hypochlorite to disinfect water sources;
  - Distribution of the WHO Guidelines on the Management of Acute Watery Diarrhoea to health partners;
  - Health education and hygiene promotion.
- WHO is providing technical support on epidemiological and laboratory investigation, risk assessment, case management and outbreak control.
- Between 20 and 22 February, the Federal MoH, the South Sudan MoH, WHO, UNICEF and other partners organized the first 2006 round of the national polio immunization campaign. Over 8.1 million children under five were targeted, particularly those living in the poorest communities or those intermittently cut off by conflict.
- In North Darfur, clean up exercises were conducted in Abu Shoak and Zam-Zam IDP camps and in El Fasher Teaching Hospital. WHO provided technical support and assisted WES and local authorities in coordination, monitoring and provision of equipment and tools.
- In North and South Darfur, WHO supported national and state health authorities in conducting a Training of Trainers on the Integrated Management of Childhood Illness (IMCI) to over 15 community health workers.
- In South Darfur, the State MoH, WHO, UNICEF and the International Rescue Committee set up a joint task force to better assist NGOs working with communities.
- WHO, the three Darfur States MoH, the Federal MoH, UNFPA and UNICEF held a two-day workshop on the reproductive health work plan for 2006.
- In Kassala, WHO has provided UNHCR with three New Emergency Health Kits (each kit serves a population of 10,000 people for three months) to help with the response to the current refugees influx from Eritrea or Ethiopia.
- In 2005, WHO activities were supported by the European Commission, Ireland, Italy, the Netherlands, Norway, Sweden, the United Kingdom and the United States. A 2006 contribution has been received from Switzerland. Allocation of funds of the 2006 Common Humanitarian Fund has begun.

WEST BANK AND GAZA

Assessments and events:
- The Palestinian Central Bureau of Statistics presented the preliminary contents of a study on the Millennium Development Goals. The data will be made available on CD at a later stage.

Actions:
- The latest issue of Bridges, the Israeli-Palestinian public health magazine, has just been published and focuses on nursing. The magazine can be seen at http://www.bridgesmagazine.org/
- WHO and MoH started the data collection for a survey on rickets that should be concluded by the end of February.

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

WHO/Healthinforum prepared and distributed its monthly newsletter, focusing on the Health Care Providers and Beneficiaries Survey for 2005, the first conference of the Health Sciences Centre to be held in Al-Quds University in March, World Cancer Day and CARE’s project on Emergency Assistance to Sustain Primary Health Care Services. The Newsletter can be seen at http://www.healthinforum.net/

In 2005, WHO’s activities in the West Bank and Gaza Strip were funded by AGFUND, the European Commission, Norway and the United States.

PHILIPPINES

Assessments and events:
- On 17 February, two successive landslides hit the village of Guinsaugon (estimated population 1,400) in Southern Leyte Province.
- National disaster officials in Manila report 81 fatalities, 20 injured and 415 survivors. 1,350 people are still missing, including 253 staff and students of the local school.
- Provision of clean drinking water and communicable disease surveillance are among the main priorities.

Actions:
- The WHO Country Team is providing technical support to health authorities while a WHO/EHA Regional Adviser is part of the United Nations Disaster Assessment and Coordination (UNDAC) team currently in the affected area to support the work of the provincial disaster authorities, assist in the consolidation of ongoing assessments and ensure coordination among all actors.
- USD 15 000 has been borrowed from the Multi-Donor Emergency Revolving Fund for initial support work.

INTER-Agency Issues

- **IASC Clusters.**
  - **Water, Sanitation and Hygiene.** The second face to face meeting of the Working Group took place in Geneva on 21 February.
  - **Emergency Shelter.** On 22 February, the Working Group reviewed its implementation plan and prepared for a cluster retreat.
  - **Nutrition.** On 23 February, the Nutrition Cluster is discussing the nutritional situation in the Horn of Africa and the IASC pilot countries and updating on funding and budget issues.
  - **Health.** The next face to face meeting of the Health Cluster will take place in Geneva on 22 and 23 March.
- **Transition.** On 20 February, possible themes and presenters were discussed for the 2006 ECOSOC Informal Session on Transition, which will be held in Geneva on 14 July between the Operations and Humanitarian segments. Two panels are envisaged at this stage, one focusing on natural disasters and the other on post conflict.
- **Avian and Human Influenza and Humanitarian Action.** An IASC consultation will take place in Geneva from 22 to 24 February.
- **Consolidated Appeal Process.** On 22 February, the IASC CAP Sub Working Group provided feedback on the 2006 Humanitarian Montreux Donor Retreat and discussed NGO participation in the CAP, the Needs Assessment Framework (NAF) and Flash Appeals.
- **Tsunami.** The next meeting of the IASC-UNDG Taskforce will take place on 8 March.
- **IASC Weekly.** On 22 February, the IASC weekly meeting in Geneva discussed the humanitarian response to the landslides in the Philippines, the floods in Bolivia, and remote sensing in emergency response and early information.
- **IASC -WG.** The next IASC Working Group meeting will be hosted by FAO in Rome from 14-16 March.

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

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