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.

NEPAL

Assessments and events:
- The monsoon started late, with real onset on the 10 July. By the end of July, 28 districts had been affected by floods and landslides. NRCS reported 69 people dead, 4 missing, 48 injured and 262 160 (46 799 families) affected.
- Now, rainfall has weakened and water levels have decreased. However, media reports indicate that 25 500 families have been displaced and access is still a challenge in the worst affected areas.
- There is a high risk of increased mortality and morbidity in the coming few weeks/months. Anticipated disease outbreaks include ARI, diarrhoeal diseases, vector borne diseases. Snake bites are another concern.

Actions:
- MoHP established a high-level committee for mitigation of the health impact of the floods and landslides.
- Assessments were conducted by district public health offices with support from the WHO Polio/EPI staff.
- Prior to the floods, WHO had pre-positioned diarrhoeal and emergency health kits in the most vulnerable areas, and is now procuring supplies to equip five medical teams.
- WHO is attending inter-ministerial coordination meeting called by Ministry Of Home Affairs, together with other UN agencies and NRCS.
- Support for WHO’s emergency operations in Nepal is provided by Republic of Korea.

More information is available at: [http://www.who.int/hac/crises/npl/sitreps](http://www.who.int/hac/crises/npl/sitreps)

BURUNDI

Assessments and events:
- The Tanzanian Government plan to repatriate all Burundese refugees living in camps (153 000) by 31 December 2007. The repatriation process is underway. According to the UNHCR it will be possible to repatriate 18 000 refugees per month.
- Reportedly 369 refugees from the Democratic Republic of Congo have been transferred from Bujumbura to Musasa transit centre in the Ngozi province. The total number of DRC refugees transferred to Gasirwe refugee camp and Musasa transit centre in 2007 is 4656.

Actions:
- WHO, UNICEF, UNFPA and UNHCR developed a health component joint plan to support MoH during the repatriation process, and are planning health activities for all humanitarian needs within Burundi.
- Support for WHO’s emergency operations in Burundi is provided by Republic of Korea and Finland.
**AFGHANISTAN**

Assessments and events:
- There are about 3 million refugees in neighbouring countries and they are beginning to return to Afghanistan. Returns have begun from Iran and are posing a great burden on the health infrastructure, particularly in province of Farah where 80% of these refugees originate.
- Returnees will be at risk of un-sanitary conditions due to overcrowding and inadequate basic health care.

Actions:
- WHO has announced plans to provide basic health care to 10,000 families and reinforce the health service in the host communities.
- An application for a rapid response grant has been submitted to the CERF Secretariat.

**PAKISTAN**

Assessments and events:
- As of 26 July, the official figure from the National Disaster Management Authority (NDMA) includes 80,000 houses destroyed in Sindh and Balochistan. Figures of affected population remain the same, 370,000 with 319 deaths.
- In the North West Frontier Province (NWFP), the reported losses include 117 dead, 2,732 buildings damaged and 1,001 washed away.
- In Balochistan, reporting units counted 54 acute watery diarrhoea (AWD) patients seen in outpatient departments.
- In northern Sindh, flood water is still passing through the district of Dadu. ARI accounted for 25% of all visits during the month of July, while AWD and malaria cases are reportedly rising rapidly.

Actions:
- In Balochistan, WHO is conducting house-to-house investigations to assess the risk of water contamination. Water samples are collected and wells are chlorinated.
- In Sindh, 23,320 patients have been seen since the start of the floods. Stock of ASV and anti-retroviral treatment are sufficient as well as stocks of oral rehydration salts. Routine vaccinations are being carried out daily in flood affected areas.
- In NWFP, an assessment of flood-affected facilities was completed in district Nowshera. Equipment and medicines were provided to local health partners in Peshawar and Nowshera.
- Support for WHO’s emergency operations is provided by Canada, Monaco, Australia, Norway and the CERF.

**CHAD**

Assessments and events:
- Security remains precarious all around the east.
- The country had seen no indigenous cases of Polio for over two years. Now the two indigenous cases confirmed in Abeche and Massakori are reason enough to declare an outbreak of the disease.
- Hepatitis E infections have decreased in 3 IDP sites, however there were 2 deaths confirmed in areas of Koloma and Gouroukoun.

Actions:
- Preparation for a polio vaccination campaign are underway.
- One nutritionist from WHO-Geneva is on mission in Abeche and is assisting the WHO team there to prepare training on case Management Malnutrition in partnership with UNICEF and Save the Children.
- WHO has received 48,000 doses of anti-malaria kits through CERF funds.
- Emergency activities supported by ECHO, the Government of Italy and the CERF.

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**Health Action in Crises**

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Check the Health Action in Crises Web site for more details: [http://www.who.int/hac/](http://www.who.int/hac/)
SUDAN

Assessments and events:
- All over Sudan, floods have put 2.4 million people at risk in 16 of the 26 states; more than 32 000 households are affected in the east, southeast and Khartoum. Official figures report 57 dead and 138 injured.
- In Southern Sudan, several thousand people have been affected by flooding in Upper Nile and Unity, Jonglei, Lakes, Warrab and Northern Bahr El Ghazal. All of these states suffer from high malnutrition rates. Upper Nile has reported 210 cases of malaria, 26 cases of measles and diarrhoeal diseases since the beginning of the floods. Three cases of yellow fever have been confirmed in early July including two deaths.

Actions:
- In South Darfur, WHO is supporting indoor residual spraying in the IDP camps and is monitoring the cholera treatment centres.
- In North and West Darfur, water and sanitation quality monitoring continues. WHO along with MoH Polio team visited West Darfur in response to two cases; alert and awareness trainings were held on the detection and reporting of cases of acute flaccid paralysis.
- In southern Sudan, the MoH and WHO dispatched 17 000 doses of ACT and are holding case management and treatment refresher courses for health care workers. UNFPA donated 30 safe delivery kits to the MoH. The WHO is sending 13 New Emergency Health Kits to flood-affected areas. The Federal MoH has approximately 70 000 doses of yellow fever vaccine for outbreak situation
- In 2007, contributions for WHO’s emergency activities were received from ECHO, Ireland, Finland, the CERF and the Common Humanitarian Fund.

SOUTHERN AFRICA

Assessments and events
- Drought affects five of the Southern African countries in particular, Swaziland, Lesotho and Zimbabwe.
- More than 400 000 in Swaziland require humanitarian assistance because of food shortages. The country has also been hit by a wave of wild fires, resulting loss of human life and property. A large percentage of wood plantations was burnt. Homesteads in several Chiefdoms have been destroyed, and families have lost all their property, including food stores.
- In Lesotho 400 000-550 000 are in need of assistance after the drought slashed the corn harvest by 40%.
- WFP reports severe food shortages also in Zimbabwe

Actions
- In Swaziland, in the context of drought relief, WHO will coordinate activities with MoH and other local partners to increase the availability of essential drugs and supplies to health facilities. Regional Director AFRO donated $30,000 to assist the Ministry of Health deal with the fire casualties
- In Lesotho, WHO and health partners are coordinating with the national authorities to support operation of nutritional programme and strengthen disease surveillance and outbreak preparedness as well as the integrated management of childhood illnesses.
- In both countries WHO operation have been supported by regular budget funds, Applications were made for CERF grants and Flash Appeal were launched.

HORN OF AFRICA

Assessments and events:
- In Eritrea, the total meningitis cases reported to date remain at 10 with one death no new cases have been reported in last 6 weeks. The number of Malaria and bloody diarrhoea cases have been approaching the alert thresholds for last few weeks. Total cases of measles this year is 33.
- In Ethiopia, the acute watery diarrhoea outbreak continues; as of17 July, 85 463 cases and 991 deaths had been reported. Between 1 January and 26 July, 446 cases of acute flaccid paralysis were reported. Bloody diarrhoea cases reported in East Harerge zone, 319 cases with no deaths. From January 1st to June 30th 2007 there were 1317 measles cases reported. Flooding has displaced

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HORN OF AFRICA

approximately 4 000 people in South Omo. Most areas of the Somali region are lacking food, drugs and medical supplies. UNHCR reopened a camp and is relocating 4 000 Somali refugees. ICRC is requested to evacuate Somali region. WHO driver was killed by a gunman

• In Somaliland, between 1 January and 27 July 2007, 3560 AWD cases were reported, including 45 deaths. In current week (epidemiological week 30) the reported number cases increased 7% in comparison to previous weeks. The number of AWD cases in central south Somalia however has dropped by 59% compared to June.

Actions:
• In Eritrea, thanks to its work on disease surveillance, WHO continues to generate and share health information to guide partners’ activities
• In Ethiopia, the nine WHO consultants continue supporting the regional health bureaus (RHBs). Training on Rift Valley Fever (RVF) for health workers and health extension workers is being conducted at high risk regions. The third meeting of the Health Partners Forum took place in Addis Ababa with the participation of UN agencies and national and international NGOs.
• In central south Somalia, the Health Cluster is conducting a large scale assessment of all health activities and problems in the country
• WHO activities in the Horn are supported by the CERF, Canada, Italy, Norway, Sweden, the United States and Finland in Somalia, by the CERF and the local Humanitarian Response Fund in Ethiopia, by ECHO and the CERF in Eritrea, and by the CERF in Kenya.

SRI LANKA

Assessments and events:
• Between 25 May and 27 June, 86 500 IDPs moved out of the camps; 190 750 are left.
• In Batticaloa efforts are underway to move the IDPs to improved settlements. In Trincomalnee, the problem is more complex, as people fear returning to the area that has not been cleared yet.
• The resettlement of 70 000 IDPs to western Batticaloa prompted the MoH to recruit nine physicians to strengthen the local health network
• Sporadic cases of viral hepatitis and varicella have been reported in Batticaloa. These remained under control due to action taken by MoH.

Actions:
• The main focus is on assisting mass resettlement of the formerly 16 000 IDPs in Batticaloa, Ampara and Trincomalee. The 50 000 IDPs remaining in scattered camps in Batticaloa are routinely visited by WHO, government clinics and NGO mobile clinics.
• WHO made a detailed assessment of the four major hospitals in the north east districts, and provided essential emergency equipment to Batticaloa teaching hospital.
• WHO and partners organized training in Colombo for six health teams, each containing a physician, nurse and an ambulance driver. There are plans to expand the programme throughout the north of Sri Lanka.
• Support for WHO’s emergency operations in Sri Lanka is provided by UNCERF and The Government of Italy

INTER-AGENCY ISSUES

• On 29 and 30 July, WHO convened a ministerial consultation in Damascus, Syria, to address the health needs of Iraqis living in neighbouring countries. The ministries of health and of foreign affairs of Egypt, Iraq, Jordan and Syria were represented as well as ICRC, IFRC, UNFPA, UNHCR, UNICEF and UNOCHA. Participants discussed how to ensure delivery of health care to the estimated 2 million or more displaced Iraqis who have sought refuge in Egypt, Jordan and Syria.
• On 2 August, the UN Executive Committee on Humanitarian Affairs discussed Zimbabwe and Sri Lanka.
• Gender and Humanitarian Action. The next meeting of the Sub-Working Group will take place on 3 August.

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

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