Health Action in Crises
Highlights No 189 – 31 December 2007 to 6 January 2008

Each week, the World Health Organization Health Action in Crises in Geneva produces information highlights on critical health-related activities in countries where there are 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.

KENYA

Assessments and Events
- Since 30 December, post-election violence has caused at least 150 deaths and displaced 150,000 people. According to OCHA, up to 500,000 people are affected. Most of the violence has taken place in the Rift Valley and in Nyanza provinces and in the slums surrounding Nairobi. Reportedly, violent fighting continues.
- Information from the field is still scarce, but it can be assumed that the displaced lack food, clean water and fuel, and that the general insecurity hampers access to health care.

Actions
- The Kenyan Red Cross has been the first to respond to the humanitarian crisis.
- The UN Country Team is preparing for immediate relief activities. It will ensure the full coordination of response across all UN agencies, as well as with non-UN partners and the Government.
- The WHO Country Office is planning to assist the MoH, the Red Cross and partners deliver well-coordinated emergency health care to the affected populations, with special focus on trauma, maternal communicable disease, maternal and neonatal risk.
- The UNCT is approaching CERF for a rapid response grant. WHO and health partners are drafting a document on health and nutrition for the Flash Appeal.
- In 2007, WHO’s emergency activities in Kenya were supported by the CERF.

WEST AFRICA

Assessments and Events
- Persistent civil unrest is contributing to increasing insecurity in Mauritania, Niger and Mali. Humanitarian activities and access are commensurately being affected.
- In Burkina Faso, 77 cases of meningococcal meningitis and 13 deaths (CFR 16.9%) were reported between 17 and 23 December, bringing the total number of cases reported since 1 January 2007 to 26,784, including 1,906 deaths (CFR 7.1%).
- Meningitis epidemic preparedness continues within the 14 countries of the meningitis belt.
- Cholera is reported as dwindling in Guinea and Guinea Bissau.

Actions
- In Burkina Faso, the UN and partners are trying to raise US$5.7 million to assist more than 93,000 people affected by floods. As of December, only 3.1% of the request had been funded, mostly by Canada. More funding is required for health and other emergency interventions critical for flood-affected populations.
- The cholera outbreak in Guinea Bissau seems to have been successfully contained by the effective rapid response of local and central Government, with the support of the UN system.
- The WHO Regional and Country Offices in West Africa, together with government and non-government partners, are coordinating surveillance and response strategies for communicable disease epidemics in the sub-region.
- In 2007, WHO’s work in West Africa was supported by Canada (Burkina Faso) the CERF and internal funds from the Regional Office and headquarters. In-kind donations of health supplies were also donated by Norway.
### CHAD

**Assessments and Events**
- In the east, armed clashes are intensifying. Meanwhile, attacks on humanitarian staff and assets continue to hamper the delivery of assistance.
- Five cases of whooping cough were reported in Gaga and Adre over Christmas by the International Medical Corps: this is a clear diminution compared to the 32 cases reported between 17 and 23 December. Reported cases are all unvaccinated children under five from the resident population. No cases have been reported among IDPs.

**Actions**
- The UN and partners have updated contingency plans for the IDP sites in Goz Beida and Koukou. A minimum package of services including water and sanitation, food and health has been agreed upon and will continue to be provided in these sites also if humanitarian organizations have to evacuate. Consultations are ongoing to update the contingency plans of other IDP sites.
- In the areas of Gaga and Adre, WHO, UNICEF, HCR and the International Medical Corps are considering a whooping cough immunization campaign targeting children under five in order to contain the disease.
- WHO provided four public health centres in Adre district with four basic health kits and 2000 rapid test malaria Paracheck. Meanwhile, the Organization is developing technical guidelines for the management of meningitis.
- WHO is providing feedback into the investigation of food safety led by WFP in IDP sites.
- In 2007, WHO’s emergency activities in Chad were supported by Italy, ECHO and the CERF.

**MINURCAT**, the UN mission to help create conditions for the safe return of refugees and IDPs in eastern Chad and the north-eastern Central African Republic, is now present in the country.

### SUDAN

**Assessments and Events**
- The outbreak of Rift Valley fever continues: between 4 October and 11 December, 602 cases and 219 deaths were reported in White Nile, Gazeera, Sinnar, Khartoum and River Nile states. Gazeera reported 64% (385) of all cases and 67% (147) of all deaths.
- According to a joint survey carried out by the Government, WFP, FAO and UNICEF, malnutrition among children under five in Darfur has reached 16.1% in 2007, compared to 12.9% in 2006, exceeding for the first time since 2004 the emergency threshold of 15%.

**Actions**
- The WHO-partnered emergency response to the Rift Valley fever outbreak includes social mobilization and community advocacy activities. Videos were produced and shown around the affected areas. Flyers, leaflets and posters are also distributed countrywide.
- In North Darfur, WHO supports the State MoH in monitoring and supervising facilities that are implementing the Integrated Management of Childhood Illness (IMCI). In late December, four clinics in North Darfur were visited and eight IMCI-kits were distributed in El Fasher and Kabkibiya localities.
- In South Darfur as part of meningitis preparedness plan, WHO distributed copies of the meningitis case management protocol to agencies working in the health sector. Training on case definition, surveillance and management are now being prepared for the staff of health facilities in camps.
- In 2007, WHO’s activities in Sudan were supported by the CERF, the Common Humanitarian Fund, ECHO, Finland, Ireland, and Italy.

The joint UN-AU force officially launched the mission in Darfur (UNAMID) on 31 December.

### SOMALIA

**Assessments and Events**
- Violence continues in Mogadishu. According to a local human rights group, fighting in the capital killed more than 6500 civilians and wounded at least 8500 in 2007. More than 250 000 people have been displaced from Mogadishu in the past two months. For those remaining in the conflict-affected areas of the city, access to hospitals remains difficult.
- External health assistance is critically needed due to limited ability and absence of resources for the Government to deliver public health.

**Actions**
- Through the CAP 2008, WHO aims to deliver health care interventions while at the same time improve the existing health care services. The main activities include:
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/hac/

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

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