CHAD & CAMEROON

Assessments and Events
- In Cameroon, the influx of Chadian refugees has almost ceased. At least 30,000 are now in Kousseri, of which about 20,000 are expected to remain. They will be moved to a camp further from the border, in Maltam. The intense population movements of the past weeks increase the risk of poliovirus spread into Cameroon.
- In Chad, 12,000 new refugees arrived from West Darfur, in urgent need of aid. They will be accommodated in Mile and Kounoungou camps.
- Two suspected cases of meningitis including one death have been reported in the eastern town of Bahai, but the alert threshold has not been reached.

Actions
- Twenty humanitarian organizations have joined the national health authorities and are providing humanitarian aid in Kousseri.
- MOH-Cameroon has made available health supplies and equipment. WHO provided medical supplies and equipment for 60,000 people (host and refugee population) over three months.
- WHO, MSF-France and MSF-Suisse are supporting local authorities, and WHO will assist in setting up health facilities in Maltam.
- The Organisation de Coordination pour la Lutte contre les Endémies en Afrique Centrale, supported by WHO UNICEF, UNHCR, IFRC and MSF-Suisse, is conducting a mass vaccination against measles and polio for children from both the refugee and host communities. Each child will also receive vitamin A.
- In Chad, UN agencies and partners are assessing humanitarian needs in N’Djamena following the heavy fighting of last week.
- Polio immunization activities planned for 23-26 February are postponed due to the ongoing insecurity.
- In the East, WHO donated three emergency health kits to International Medical Corps to assist the new Sudanese refugees. Another kit was donated to Save the Children. Stocks of health supplies should last between two and four months.
- In 2007, WHO’s activities in eastern Chad were funded by Italy, Finland, ECHO and the CERF. Current emergency operations between Chad and Cameroon are being funded by the WHO regular budget. Allocation of funds from the CERF is being discussed.

KENYA

Assessments and Events
- The latest IDP figures are about 600,000 people, of which 300,000 are living in camps. OCHA reports that needs are growing in the new sites while displacements continue. Health officials are concerned about the long-term impact of the crisis on health status and services, especially in areas hardest hit by the violence.
- There is a general feeling that more analysis is needed, to identify where the main shortfalls are for each sector, and where resources are most needed.

Actions
- WHO teams are present in Nakuru, Eldoret and Kisumu.
- In Eldoret, WHO, UNICEF and the Kenyan Red Cross conducted a rapid assessment of IDP settlements in the districts of Bunga South and West. Overall, the provision of health and immunization services is assured, through mobile clinics where necessary. Poor sanitation and lack of water in some settlements are being addressed by partners.
- MSF-Switzerland and WHO are setting up a preparedness and response plan for communicable diseases for the ASK showground, in Eldoret.

More information is available at: www.who.int/hac/crises/ken/en/index.html
### Health Action in Crises

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### Ethiopia

**Assessments and Events**
- In SNNPR region, 11 suspected cases of meningitis were reported in Kambata Tembaro and Hadiya zones in January, including two deaths.
- No cases of acute watery diarrhoea (AWD) have been reported over the first five weeks of 2008. The situation continues to be monitored by the Federal MoH and humanitarian agencies. Prevention work continues, as the risk factors for AWD transmission remains high.
- In Oromiya region, as of February, more than 900 cases of measles and 60 deaths have been reported in Guji Zone and surveillance and preventive measures have been strengthened. Proper case management is ongoing.

**Actions**
- The Federal MoH, in collaboration with health partners, has developed a plan against meningitis seeking US$ 28 million to pre-position vaccines, drugs, medical and laboratory supplies and enhance disease surveillance, health and laboratory staff training and community education.
- In the Somali region, WHO recruited two national consultants for Jijiga and Gode zones and five surveillance officers for Gode, Kebredehar, Degahabur, Fik and Wader zones. They will join the two surveillance officers already in Jijiga and Gode. To support the vaccination campaign against measles and polio, the Regional Health Bureau, WHO and UNICEF, organized a training of trainers workshop in Jijiga. Each child will also receive Vitamin A and de-worming tablets.
- WHO continues to coordinate with humanitarian partners to mobilize resources for stronger preventive measures against AWD, to avoid a new epidemic.
- In 2007, WHO’s emergency activities in Ethiopia were supported by the CERF and the local Humanitarian Response Fund. WHO submitted a US$ 32 million proposal to donors to support the national meningitis preparedness plan.

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### Uganda

**Assessments and Events**
- In Arua district, between 12 December and 27 January, there was an outbreak of meningitis with 320 cases and 15 deaths. Meanwhile, an outbreak of hepatitis E is ongoing in Madi Opei sub-county, Kitgum district. As of 25 January, 199 cases and seven deaths have been reported.

**Actions**
- In Arua, MOH conducted a vaccination campaign to contain the meningitis outbreak, WHO continues to support the response to this epidemic through technical coordination, support to surveillance, epidemiological investigations, community mobilization and provision of drugs and medical supplies.
- In Lango, WHO is providing technical support to district health authorities to reactivate the meningitis emergency preparedness plans and committees.
- In Karamoja, drugs and medical supplies for more than 200 cases have been pre-positioned. WHO visits the districts to follow-up on meningitis preparedness. Key elements are surveillance, increased public information, social mobilization and case management protocols.
- WHO continues participating in meetings with health partners to improve health response coordination at the national and district levels.
- WHO also supports disease surveillance activities in all districts of northern Uganda and Karamoja by providing technical, financial and logistic support.
- WHO's emergency activities in Uganda are funded by Finland, Norway, Sweden, the United Kingdom, the United States, the CERF and ECHO.

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**On 30 January, a health partners forum meeting discussed disease outbreaks, the Government’s meningitis emergency preparedness and response plan.**

**In 2007, SNNPR and other regions have reported 46 meningitis cases and no vaccination exercises were conducted in the affected regions.**
### SOUTHERN AFRICA

**Assessments and Events**
- In the last two weeks, heavy rainfall has continued in the north of Mozambique, Malawi, Tanzania and Zambia.
- The Kariba dam had to open one floodgate to ease pressure. Zambia and Zimbabwe have placed military forces on flood alert, and Mozambique may have to evacuate more people.
- In Mozambique, and estimated 100 000 people are still affected by the previous wave of floods. Access to health care is insufficient as posts in resettlement centres lack basic kits and cannot afford to offer incentives to volunteers.
- Between 6 and 10 February, 245 cases and five deaths from Acute watery diarrhoea were reported in Mutarara. The main affected areas are Vila nova de Fronteira (87 cases), Nhnamayobwe, Bawe, and Chare. Cases were also reported in Bawe, Ngungunhana and Chare camps (135, 38 and 17 respectively).

**Actions**
- In Mozambique, data collection forms were distributed in Caia, Mutarara, Mopeia and Morumbala through the MoH and WHO focal points. Training will be organized to strengthen the surveillance system. Concomitantly, WHO is deploying communication equipment in Tete province: a total of 20 radios will be distributed to health facilities in 12 districts.
- The MoH, WHO and UNICEF investigated the suspected acute diarrhoea case in Mutarara District. Laboratory testing has not confirmed cholera so far.
- WHO’s emergency activities are funded by the CERF.

### BURUNDI

**Assessments and Events**
- Internal displacement has become a coping mechanism for the highly vulnerable population, and there are 116 000 IDPs, while about 350 000 Burundian refugees remain in Tanzania.
- An outbreak of cholera in Bujumbura Rural, Bururi, Cibitoke and Makamba provinces is now under control. No new cases have been reported this week. The total number of cases reported between 20 November and 29 January is 198 cases with no deaths in Rumonge (Bururi), 39 cases and no deaths in Bujumbura Rural, 61 cases and no deaths in Cibitoke and 138 cases and 3 deaths in Nyanza lac (Makamba).
- Security is deteriorating with armed robberies, ambushes and attacks being reported. UN operations are now affected and the security phase has been raised to level 3 in January.

**Actions**
- Ministry of Health, WHO and partners work at ensuring that health care is available in all the different foci of humanitarian crisis in the country. In particular, WHO supports health interventions for Burundian refugees being repatriated by UNHCR.
- As far as the cholera outbreak is concerned WHO provides technical expertise to the MoH for coordination and resources and partner mobilization.
- WHO is providing support to a MoH investigation on suspected cases of meningitis in Rutana province.
- In 2007, WHO’s emergency activities in Burundi were funded by Finland and the Republic of Korea.

### YEMEN

**Assessments and Events**
- The health of IDPs and host communities in Sa’ada Governorate continues to cause humanitarian concern. Populations are suffering from precarious living conditions and high levels of morbidity, mortality and disability. Assessments have identified malnutrition and communicable diseases as major threats.
- The main health sector needs include not only drugs, medical supplies and vaccines, but also greater capacities for rapid response.

**Actions**
- Following a previous grant received in 2007, WHO is applying for US$ 292 666 from the CERF to reinforce mass casualty management, outbreak response and environmental health. This would include upgrading the emergency response capacity of Sa’ada Governorate hospitals, establishing a disease early warning system supporting vaccination services for all vulnerable children and women, and strengthen inter-sectoral coordination in emergencies.
### TAJIKISTAN

**Assessments and Events**
- Abnormally cold weather conditions and energy shortages continue to prevail, threatening the country with a humanitarian crisis.
- Typhoid fever is a major concern. The Tajik Red Crescent Society reports an increase in cases in the Jamoat Ovchi of Sogd oblast, Gonchi district. There are 13 confirmed cases and 20 suspect cases. In Kulyab, at least 200 cases have been confirmed.
- In most hospitals, drugs such as wide-spectrum antibiotics, anti-diabetics, analgesics, and antiseptics, needles, bandages are in very short supply or altogether lacking. Primary health care is almost completely paralysed, with indoor temperatures around 5 degrees Celsius. Shortages of energy, water and food supply are causing a sharp increase in the inflation rate.
- The Government has requested international assistance.

**Actions**
- WHO has immediately assisted the Ministry of Health in assessing how the hospitals were managing the situation and identifying gaps in drugs and supplies. A WHO assessment team will go to Kulyab to investigate the typhoid fever outbreak. Preliminary reports indicate the need for antibiotics and diagnostic kits for sensitivity testing and one diarrhoeal diseases kit dedicated to Kulyab.
- WHO is participating in a Flash Appeal coordinated by the UN Country Team. WHO will be requesting extra supplies of basic and supplementary kits and the maintenance of the cold chain during the energy crisis.

### DEMOCRATIC REPUBLIC OF THE CONGO

**Assessments and Events**
- On 14 February, an earthquake struck the province of South Kivu 25 km north of the provincial capital, Bukavu.
- The WHO and the provincial delegation of the Ministry of Health reported 44 persons injured in Bukavu and no figures were available outside Bukavu.
- An outbreak of cholera in the province of Katanga killed 59 people and infected more than 2000 in January. The first cases were noticed between late December and early January in Bukama, Likasi and Lubumbashi.

**Actions**
- WHO is working to support the MoH with the response to the recent earthquakes. 524 injured persons have been treated since 3 February.
- WHO’s response in the Democratic Republic of the Congo is supported by the UN Common Humanitarian Fund, Norway and the CERF.

### BOLIVIA

**Assessments and Events**
- On 12 February, the President declared a state of national disaster following the floods and heavy rains since November 2007. The Department of Beni is the most affected area but the departments of Santa Cruz & Cochabamba are also affected. The health sector, in response to the floods, has declared a state of sanitary emergency for these three departments.
- In the departments most affected, there have been outbreaks of dengue, hanta virus and malaria, with an elevated risk for an increase in the number of cases.
- Four cases of leptospirosis were confirmed in Beni while the number of consultations for skin related diseases, severe respiratory infections and diarrhoea reached 500 reported between 6 and 9 February.
- The disaster has claimed 52 lives and affected 55 649 families.

**Actions**
- WHO/PAHO will coordinate with local health authorities, the Ministry of Health and the national programs of epidemiology, health promotion and vector control diseases.
- WHO/PAHO requested US$ 160 500 from the CERF to strengthen the health sector.

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MENINGITIS BELT

Assessments and Events
- A total of 1383 suspected cases (193 fatal) were reported between 1 and 27 January in Benin (57 cases, 3 deaths), Burkina Faso (774/124), the Central African Republic (37/4), Côte d’Ivoire (37/7), Ghana (45/8), Mali (39/3), Niger (130/10), Nigeria (52/9), the Democratic Republic of the Congo (167/17) and Togo (45/8).
- An increase in cases of meningitis has been reported in Burkina Faso, Mali, Niger, and Nigeria since the end of 2007.

Actions
- In Burkina Faso, following the first cases of meningitis, WHO supported the government in the preparation for the response to the epidemic.
- WHO is part of the West Africa Health Working Group (HWG) and has disseminated a monthly bulletin of information on the monitoring of the disease.
- WHO and the partners within the HWG supported the Burkina Faso MOH in drawing up a plan of action.

INTER-AGENCY ISSUES
- Contingency Planning. The IASC Sub-Working Group met on 11-12 February to prepare the report.
- HIV/AIDS in emergency settings. The IASC HIV taskforce met on 11-12 February.
- UNRWA. On 13 February, the Humanitarian Liaison Working Group in Geneva was updated on the work of the Agency and UNRWA presented to the humanitarian community in Geneva its 2008 Emergency Appeal for the West Bank and Gaza Strip (oPt).
- The inter-agency meeting on the Central Emergency Response Fund met on 14 February.
- Disaster Risk Reduction. On 14 February, IFRC hosted an informal inter-agency meeting on the subject.
- Gender and Humanitarian Action. The Steering Committee of the IASC Gender Sub-Working Group met on 14 February. The next meeting will take place on 5 March.
- Clusters.
  - On 14 February, the Cluster Working Group on Early Recovery discussed how to appeal for early recovery funding through flash appeals.
  - The IASC Training Advisory Team plans to meet on 26 February.
  - The IASC Task Team and Global Cluster Leads plan to meet on 28 February.
  - The Camp Coordination and Camp Management Cluster plans to meet face to face in Geneva on 28 February.
  - The Global Health Cluster will meet face to face in Geneva on 6-7 May.
- WFP. On 14 February, WFP briefed the HLWG in Geneva on its strategic plan and challenges for 2008.
- UNDAC. The annual meeting of the Steering Committee will take place on 18-19 February.
- The 2008 Montreux donor retreat will take place on 21 and 22 February.
- The UN Executive Committee on Humanitarian Affairs (ECHA) will meet next on 22 February.
- IASC WG. Preparations started for the 70th IASC Working Group, scheduled to take place on 11-13 March in New York.

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

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