DEMOCRATIC REPUBLIC OF THE CONGO

Assessments and Events
- An estimated 1.5 million people are in need of assistance in North and South Kivu, including about 200,000 IDPs in camps around Goma. Their most urgent needs remain security, safe water, food, shelter, sanitation and health care.
- The CNDP rebels have announced they are withdrawing from two fronts to create humanitarian corridors. However, lack of security and access continue to be the chief constraints to providing assistance to IDPs.
- The weekly number of cholera cases reported in Goma has increased from 20 in August to 150 early November. During the first week of November, 410 cholera cases were recorded, including 70 cases of measles.

Actions
- WHO supports health authorities for assessments, disease surveillance, cleaning of IDP sites as well as identification and filling of urgent needs. Further inter-agency health assessments are planned as soon as security allows.
- Under WHO’s coordination, the Health Cluster adopted a plan to distribute 10 tons of medicines (144 basic health kits) from Goma to functioning facilities in the following health zones: Karisimbi (18 kits), Rutshuru (8), Kirotshe (18), Mweso (18), Masisi (15), Pinga (40) and Walikale (36). Six kits will remain in Goma. WHO and the provincial health authorities will guarantee free health care for three months and follow-up on the use of medicines and speed up the process of distribution to beneficiaries.
- Eight international and eight national WHO staff members are in Goma for monitoring, coordination and support.
- Italy and Norway provided in-kind contributions valued at more than US$ 1 million and Australia provided Aus$ 500,000. Cash needs now for the next three months are estimated at US$ 2.2 million.
- In Province Orientale, the Dungu and Beni regions, inaccessible from Goma, will receive one and two health kits, respectively, from the WHO Office in Kampala.
- WHO emergency activities in the DRC are funded by Australia, Finland, Italy, Norway, the CERF and the Pooled Fund for the DRC.

ZIMBABWE

Assessments and Events
- The country’s health system, once among the best in Africa, is collapsing under the weight of inflation. According to the media, the country’s two largest referral hospitals in Harare are no longer able to provide health care.
- Nationwide, the surveillance system is weak and access to basic services is compromised by limited availability of essential drugs, supplies and equipment, and insufficient human resources and supervision. For the past weeks, absenteeism has risen to unprecedented levels and the referral system in Harare has almost vanished.
- Health officials in the capital report that at least 50 people have died of cholera this month due to the rapid breakdown in sanitation. The water authority has run out of purifying chemicals leaving large sections of the city without safe water. As of 18 November, 6072 cases of cholera and 294 related deaths (CFR 4.8%) have been reported countrywide. The most affected areas are Harare (3535 cases and 152 deaths) and Matabele South (1302 cases and 50 deaths).
- Lack of resources is also affecting the malaria control programme. Training on complicated and severe malaria is lagging and stocks of medicines are insufficient.
Actions
- The Country Office requested emergency health kits from the depot in Dubai to strengthen national and provincial stocks ahead of the rainy season.
- As Health Cluster lead, WHO held a series of extraordinary meetings with Health Cluster, UN and NGO partners to review the situation, assess the challenges and come up with possible actions to alleviate the situation.
- WHO met with the MoH to discuss the situation in the hospitals and the health sector at large, and garner the Minister’s support for specific actions proposed by the Health Cluster. WHO also met with high officials from the three main hospitals in Harare regarding their needs and recommendations to re-start regular services.
- WHO is requesting US$ 790 500 from the emergency response fund for Zimbabwe to support the MoH with malaria epidemic preparedness, response and mitigation in ten high-risk districts. The Country Office is also finalizing a Euros 3 million project to be submitted to ECHO to enhance the response to public health emergencies.
- Funds to support humanitarian health activities were received from Italy, Ireland and the CERF.

Assessments and Events
- In Ethiopia, floods are reported in Somali, Oromiya and SNNP regions. In SNNP, more than 5200 households (around 31 000 people) are affected. Official reports from the Federal MoH show a countrywide decrease in the acute watery diarrhoea (AWD) outbreak. To date, 13 districts in Amhara, Oromiya, SNNP and Tigray are reporting cases. No new district has been affected for four weeks. As of 2 November, 3791 cases and 23 related deaths have been reported nationwide.
- In Somalia, the cholera outbreak in Marka, Lower Shewelle, is lessening. Between 13 August and 31 October, 532 people were admitted for treatment in Marka. Of these, 62% were children under five.
- Between 31 September and 3 October, 180 cases of acute watery diarrhoea (AWD) and 23 related deaths (CFR 12.78%) were reported from Goloole, Middle Shabelle. Several other AWD outbreaks are ongoing. From Bossasso, Puntland 300 cases and eight deaths were reported and 226 cases with no related-deaths from Jilib, Jamaame and Afmadow districts in Lower and Middle Juba. Strengthening health education on hygiene and sanitation is essential.

Actions
- In Ethiopia, WHO is preparing the dispatch of three emergency health kits to the affected areas in the Somali region. An inter-agency mission is identifying requirements in SNNP. WHO has allocated US$ 7500 to support nutrition assessment in Oromiya’s East and West Hararge Zone and supported training in SNNP for 200 health workers on the management of severe acute malnutrition. WHO, in collaboration with UNICEF, the NGO PSI and the Amhara regional health bureau (RHB), financed and organized a training on AWD epidemic prevention.
- Following the August floods in Gambella, WHO is supporting routine immunization – including vaccination rounds and training for health workers – and surveillance activities. A Gambella-based WHO staff member supervises districts and health facilities for surveillance, investigation and response.
- In Somalia, WHO is conducting new surveillance rounds on expanding the scope of the disease surveillance system in Lower Shabelle. In Marka, WHO supports water chlorination control and health and hygiene promotion activities.
- In Middle Shabelle, a new cholera task force coordinates efforts to reduce the impact of the AWD outbreak, reduce the case fatality rate and prevent the outbreak of spreading outside Jowhar town. WHO also conducted training in AWD outbreak assessment and cholera case management in Berbera, Somaliland.
- WHO’s emergency activities are funded by Canada, Italy, OCHA (funds from DFID) and the CERF in Ethiopia and by China, Italy, Norway and USAID in Somalia.
Assessments and Events
• In the east, disease surveillance has shown an increase in cases of hepatitis E in the refugee camps of Bredjing and Treguine during August and September. Cases have decreased since then. In the two camps, 261 cases, leading to one known death, have been recorded this year.

Actions
• Two nutritionists have joined the WHO sub office in Abeche to begin training workshops on the management of acute malnutrition for health workers. Training will extend until the end of 2008. A regular nutritional surveillance bulletin is in preparation.
• WHO and Action Contre la Faim are discussing a new nutritional survey among displaced and local populations in Haouich sub prefecture, Ouaddai region.
• WHO’s emergency response is funded by ECHO, Italy, Finland, Spain and the CERF. Following meetings with WHO on the health strategy for Chad, ECHO has confirmed further funding for 2009.

CHAD

See also the [weekly mortality and morbidity report](#) for eastern Chad.

SUDAN

Assessments and Events
• In the Darfur region, the reporting timeliness of the early warning and alert response system is 92%. Data shows that the health services utilization rate is 1.3 visits/person per year.
• In Southern Sudan, the MoH/GoSS has reported about 30 cases of viral haemorrhagic fever and 12 related deaths in Southern Kordofan between 27 October and 7 November. An upsurge of measles cases is also reported in Pibor County around Boma townships.

Actions
• In North Darfur, WHO and the State MoH are following up on two suspected measles cases in ZamZam camp. All necessary measures have been taken at the four functioning clinics to ensure alertness at all levels. In El Fasher hospital, WHO conducted a training on the integrated management of childhood illness and provided medical and pharmaceutical items to support free health care for IDPs. WHO also trained 135 people on water quality, food safety and vector control in Kutum and Kabbabaya.
• In South Darfur, WHO conducted a series of training activities for health staff: safe health care waste management in Nyala, Kass, Tulus and Gredha hospitals, tuberculosis case diagnosis, management and reporting in Gredha and malaria case definition, diagnosis and management in Abo Matareg. WHO also provided medicines and supplies to EdDaein and Kass hospitals for support free health care for IDPs.
• In collaboration with the Federal MoH, WHO will conduct a training on diseases surveillance, viral haemorrhagic fever and outbreak investigation for health staff in Kassala and Gedaref states.
• In Southern Sudan, WHO and partners are negotiating access to the area. WHO disseminated viral haemorrhagic fever material to all partners and MoH in Warrap State to emphasize vigilance on history taking, medical examination, universal precautions, isolation procedures, notification and sample collection.
• WHO’s activities in Southern Sudan are funded by the Common Humanitarian Fund, Finland, the CERF, Italy, Ireland, ERF and ECHO.

HONDURAS AND GUATEMALA

Assessments and Events
• At least 60 people in Honduras and 17 in neighbouring Guatemala were killed in the floods that followed Tropical Storm Paloma and a separate tropical depression. Authorities are now on alert for landslides and mudslides.
• In Honduras, floods and landslides affected 313,350 persons, of which 50,600 were evacuated. The living conditions of more than 310,000 people will remain precarious for months.
• Rains seriously damaged the water supply and sanitation systems in the most affected areas of Atlántida, Colón, Cortés and Yoro departments while many communities remain without safe water sources. Collapsed sanitation facilities contaminated wells, exposing communities to epidemics outbreaks (cholera, malaria and dengue which are endemic to the area).
• In Guatemala, 15 days of rain have affected 30,000 families, contaminated wells and damaged both the infrastructure and the agriculture in most of the...
IN HONDURAS

Actions
- In Honduras, WHO/PAHO purchased medicine and the medical items for the MoH and deployed two SUMA experts from its Regional Office to provide support emergency response authorities in Cortés and Choluteca.
- WHO/PAHO is providing health assistance and monitoring the sanitary situation in the affected zones. There are not reports of outbreaks or medicine shortage. WHO is also working with UNDP on the procurement of medicine and equipment for water disinfection and cleaning of wells.
- In Guatemala, WHO/PAHO is working with the MoH on assessments, analysis and monitoring of the situation.
- Emergency health activities in Guatemala are funded by the CERF.

IN GUATEMALA

Actions
- In Guatemala, WHO/PAHO is working with the MoH on assessments, analysis and monitoring of the situation.
- Emergency health activities in Guatemala are funded by the CERF.

INDONESIA

Assessments and Events
- On 17 November, a 7.7-magnitude earthquake hit Gorontalo province on Sulawesi Island. Six died and 158 were injured while 15,750 people were evacuated to higher grounds.
- Close to 1200 houses and buildings have been damaged. Access to affected areas and communication lines were disrupted.

Actions
- The MoH, the Crisis Centre of North Sulawesi and provincial and district health authorities, in close collaboration with WHO, are providing emergency health care.

INTER-AGENCY ISSUES

- The next Emergency Directors Meeting was held in Rome on 18 November.
- The informal IASC Taskforce on climate change met on 18 November.
- The 2008 meeting of the Consultative Group on the use of Military and Civil Defence Assets took place in Geneva on 18 November.
- On 19 November, the Humanitarian Liaison Working Group in Geneva updated on Iraq. A second meeting briefed on climate change and risk reduction.
- An inter-agency meeting on the Central Emergency Fund took place on 19 November prior to a meeting between humanitarian agencies and the CERF Advisory Committee.
- The 72nd meeting of the IASC Working Group took place in Rome from 19-21 November.
- The Global CAP 2009 Launch was held in Geneva on 19 November. The Abu Dhabi launch will take place on 24 November.

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

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