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 operational use and does not reflect any official position of the WHO Secretariat.

**VIET NAM**

![Map of Viet Nam](http://www.wpro.who.int/sites/eha/)

For more information see [http://www.wpro.who.int/sites/eha/](http://www.wpro.who.int/sites/eha/)

**Assessments and Events**
- The eye of typhoon Ketsana hit Quang Nam province on the evening of 29 September with wind power of 150 kph.
- Twelve provinces in central coastal areas were directly affected by the rains and flooding. The most affected are Thua Thien, Hue, Quang Nam, Quang Ngai, and Binh Dinh.
- Assessment on the damages to the health sector is on-going.
- Several provincial and district hospitals such as Ly Son and Son Tinh were damaged. Many community health centres were also damaged.
- As of 30 September, 41 deaths, 81 injuries and 10 missing persons have been reported.
- The Ministry of Health (MOH) has expressed concern over the possible increase of H1N1 cases in the area. MOH has sent an initial request to WHO for immediate relief.

**Actions**
- WHO is in close communication with the Disaster Management Unit (DMU) of the Ministry of Health, Departments of Health in affected provinces and other UN agencies for information sharing and provision of necessary health support.
- WASH and health clusters will be activated with the support of MOH.
- Joint assessment teams are being organized with Hanoi School of Public Health and Disaster Management Working Group (DMWG).

**PHILIPPINES**

![Map of Philippines](http://www.wpro.who.int/sites/eha/)

For more information see [http://www.wpro.who.int/sites/eha/](http://www.wpro.who.int/sites/eha/)

**Assessments and Events**
- Tropical storm Ketsana (maximum winds 85kph and gusts up to 120kph) hit Luzon island on 26 September
- The storm flooded villages and roads along with the capital Manila and forced thousands of families to seek shelter in evacuation centres.
- As of 1 October, over 2.5 million people have been affected. Over 680 000 people are in 726 evacuation centres.
- As of 1 October 277 people have died, 5 injured and 42 are missing
- The government has identified initial needs in terms of water supplies, emergency medicines and associated supplies, and both food and non-food items, especially for evacuation areas.
- Threats to the health of affected individuals include safe water and food supply, water- and food-borne diseases such as leptospirosis, dengue and diarrhoea increase in non-communicable diseases; and mental health concerns.
- Many hospitals and health facilities were flooded. Health care staff were not able to report due to the impact of floods in their own homes and families.
- State of National Calamity was declared in the affected regions.
- Rescue operations are ongoing and power lines are being restored.
- The Flash Appeal is under preparation. Health Cluster seeks $7,35 million, of which $3,45 is for WHO

**Actions**
- WHO joined UN agencies and government authorities to conduct field assessments of the situation.
- WHO will provide PHP 2 million (about US$42 000) to support health needs in the wake of the floods.
- WHO is working through the existing UN coordination mechanisms as well as with the Philippines Department of Health and other partners to ensure an appropriate and effective response.
- First Health Cluster meeting co-chaired by the MoH and WHO was held on 1 October.
- WHO/HQ deployed a logistician to provide logistic support to the WCO.
<table>
<thead>
<tr>
<th>INDONESIA</th>
<th>Assessments and Events</th>
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<tbody>
<tr>
<td>On 30 September, a 7.6 earthquake struck off the coast of Padang in West Sumatra, and was followed by aftershock of 6.2.</td>
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<td>The earthquake affected 11 sub-districts. The coastal city of Padang (with a population of 900,000) is the most affected.</td>
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<td>The Ministry of Health reported 529 dead, 105 injured and thousands still missing, but those numbers are expected to be significantly higher.</td>
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<td>Around 2,650 buildings have been damaged.</td>
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<td>Accessibility to affected area was disrupted. Communication and electricity are cut-off.</td>
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<td>The Government has declared a State of Emergency for two months.</td>
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<td>International assistance is welcomed but needs to be coordinated through the Government</td>
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| Actions |
| WHO and the Ministry of Health deployed 196 health professional with medical supplies to the site for Rapid Health Assessment. |
| Regional Crisis Center of Medan, North Sumatra, Provincial Health Office and District Health Office are working in close collaboration with WHO, sending health teams and providing integrated Emergency Health Services. |
| Health Department's West Sumatra Crisis Center is opening two field hospitals in Padang. |

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<thead>
<tr>
<th>SAMOA</th>
<th>Assessments and Events</th>
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<tbody>
<tr>
<td>Following an 8.0 magnitude undersea earthquake south of the main Samoan Island chain on 29 September, a tsunami struck Samoa.</td>
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<td>Villages, houses, buildings, and communication lines were damaged or destroyed.</td>
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<td>Among the worst-affected villages were Lalomanu and Poutasi.</td>
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<td>The official death toll stands at 123, with 142 injured. A total of 32 000 people were affected.</td>
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| Actions |
| The WHO is in communication with the Ministry of Health and medical staff to coordinate the provision of necessary supplies and technical support. |
| A disaster management expert has been deployed to Samoa. |
| WHO also provided transportation support for injured patients for medical care. |

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<tr>
<th>TONGA</th>
<th>Assessments and Events</th>
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<tbody>
<tr>
<td>Tonga was struck by a series of tsunamis following an 8.0 magnitude undersea earthquake south of the main Samoan Island chain on 29 September.</td>
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<td>Nine people have been reported dead 4 seriously injured.</td>
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<td>There was extensive damage to the northern part of the kingdom.</td>
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<tr>
<td>On Niutatotuputapu Island, around 500 people out of a total population of 878 have been displaced. Around 55-60% of the houses in the village of Hihifo have been destroyed. The village of Falehau also experienced destruction of about 55% of the houses.</td>
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<tr>
<td>Health concerns include the lack of clean water, waste disposal and sanitation.</td>
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<tr>
<td>The hospital at Niutatotupu was seriously damaged.</td>
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</table>

| Actions |
| WHO is in close communication with the Tongan government to aid in the assessment of the situation and the possible provision of supplies and other material support. |
| The Tongan government has not requested support from the United Nations at this time. |

For more information see [http://www.wpro.who.int/sites/eha/](http://www.wpro.who.int/sites/eha/)
Assessments and Events

- The Government of Yemen will open a new IDP camp in Aleb on the Yemen-Saudi border north of Baquim, where thousands of IDPs are present. A joint UN mission will visit Aleb for initial assessment and planning.
- No communicable disease outbreaks have been reported from any IDP-hosting areas, but the risk remains very high due to partial surveillance, inadequate health services and lack of safe drinking water.
- The main causes of patient consultations are diarrhoeal diseases, respiratory and urinary infections, as well as skin infections, which mainly include scabies and rashes.
- Limited resources in the health sector are hindering the provision of health services to IDPs.

Actions

- Six WHO-MoPHP joint mobile medical teams working in Al Hawf, Amran and Hajjah have reported 9174 consultations
- The fifth health cluster coordination meeting was conducted on 27 September. The draft health response plan for 2010 was discussed and agreed by partners.
- The current WHO response is supported through CERF funds and an in-kind donation (surgical kits and supplies) by the Italian government. There is an urgent need for more resources to continue the response to the ongoing situation.

SUDAN

Assessments and Events

- Following a recent fighting in Korma, 741 households have reportedly been displaced to Umleyona while another 59 households have moved to Rwanda camp. The remaining population has reportedly taken refuge in the mountains south of Korma.
- A humanitarian needs assessment mission planned to Korma has been cancelled due to the prevailing insecurity.
- WFP’s third round of the Darfur Food Security Monitoring System (FSMS) found the food security situation has improved in North and South Darfur and deteriorated in West Darfur except for IDPs in West Darfur. Findings highlighted an improvement in the physical security in North, West and South Darfur compared to the last monitoring round, with no significant security incidents and no population displacement.
- In Sudan out of 21 suspected cases, four confirmed Influenza A (H1N1) cases were reported by FMOH with no deaths. All cases were travel related.
- WHO Weekly Morbidity and Mortality Bulletin found the health situation remains stable and morbidities are within normal range and mortalities below emergency threshold.

Actions

- WHO coordinated with all NGOs in the Darfur region to hold health cluster/sector meetings and finalized priority gap areas and prepared projects in all the three states.
- In all Darfur states the PHC teams are working to finalize the updating of the Health Resources Availability mapping system HeRAMS with active involvement of all partners.
- In North Darfur, weekly WHO monitoring visits were conducted to ensure free access of IDPs to health services.
- In South Darfur, weekly monitoring visits were conducted to Nyala Teaching Hospital to monitor and ensure free access of IDPs to hospital services.
- In West Darfur, WHO is coordinating with the ICRC to train hospital cadre on how to deal with emergency cases within the first 24 hours.
- WHO’s emergency activities in Sudan are funded by Australia, Italy, Monaco, the United States of America, the CERF and the Common Humanitarian Fund.
INTER-AGENCY ISSUES

In order to keep health action in crises high on the inter-agency humanitarian agenda, WHO/HAC participated/will participate in the following meetings/activities.

- An inter-agency meeting on Humanitarian Financing on 5 October
- An inter-agency meeting on Tropical Storm Kesana (Ondoy) in the Philippines on 1 October and a meeting with Member States, organized by OCHA, on 6 October
- A Humanitarian Coordination Group meeting on 7 October
- The IASC Gender Capacity (GenCap) Steering Committee meeting in New York on 7 October
- The IASC Sub-Working Group on the Consolidated Appeal Process on 8 October
- The IASC Gender Sub-Working Group face to face meeting in New York on 8 and 9 October
- A meeting of the IASC Taskforce on Meeting Humanitarian Challenges in Urban Areas on 9 October
- A meeting of the IASC Task Team on Cluster Mainstreaming on 9 October
- A Common Humanitarian Fund Evaluation Task Force Meeting on 9 October
- A Framework Team meeting on 9 October
- The inter-cluster/ Humanitarian Country Team support mission to Pakistan, week of 12 October
- A inter-agency meeting on UN Action against Sexual Violence in Conflict in New York on 13 and 14 October
- The International Day for Disaster Reduction on 14 October
- The 4th training partnership meeting of Inter-Agency Working Group on reproductive health in crises in Geneva on 14-16 October
- A meeting of the IASC Taskforce on Information Management on 15 October
- The monthly UN ECHA meeting on 16 October.

INTERNATIONAL DAY FOR DISASTER REDUCTION (IDDR)

WHO is teaming up with UN, national and non-government partners to mark this year's International Day for Disaster Reduction (IDDR) on 14 October, which is being dedicated to the need to make "Hospitals Safe from Disasters." The day coincides with the culmination of the two-year World Disaster Reduction campaign based on the same theme and organized by the UN International Strategy for Disaster Reduction, WHO and the World Bank.

Events will be held worldwide to mark the IDDR, with a key global event taking place in London on 14 October (hosted by the UK Health Protection Agency) and related events occurring in countries such as China, Egypt, Nepal, Nigeria, Panama, South Africa, Tajikistan and Thailand.

WHO will be launching a Thematic Platform on Disaster Risk Reduction for Health, which brings together national and international health partners in a forum to promote best practice in reducing the threat to health from hazards and making health systems better prepared to respond.

The IDDR builds on the ongoing World Health Day campaign of WHO dedicated to a similar theme, "Save lives. Make hospitals safe from emergencies."

For more information, go to:
Safe Hospitals website: http://www.safehospitals.info/

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

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