Al Hudaydah Situation Report #6 (3 July – 9 July 2018)

The next situation report will be issued by the Health Cluster when new information on health response becomes available.

Highlights

- The situation in Al Hudaydah becomes volatile again as multiple airstrikes were reported in Al Hudaydah City and Zabid City (OCHA Al Hudaydah Situation Report No. 7). Armed clashes had also intensified and reached the Al Tuhaytah main town and the vicinity of Zabid town.

- A total of 328 trauma-related injuries and 46 deaths were reported to WHO mostly from 5 hospitals (Al-Thawra Hospital, Al-Olofy Hospital, Bait Al-Fakih Hospital, Zabeed Hospital, Aljarrahi rural Hospital) in Al Hudaydah with 2 deaths and 6 injuries of children being reported (13 June to 7 July 2018).

- Humanitarian partners have verified more than 121,000 displaced individuals (17,350 households) from Al Hudaydah Governorate since 1 June based on the latest OCHA situation report.

- The Health Cluster partners are scaling up their efforts to respond to the needs of the people in Al Hudaydah and neighboring governorates where IDPs are seeking refuge.

- Almost 15.5M USD has been mobilized from the Emergency Reserve Allocation Fund for preparedness and Al Hudaydah response to nine (9) health partners to ensure critical lifesaving health care to IDPs and people affected by the conflict for a duration of six months.

Situation Overview

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IDP Movement

- Humanitarian partners have verified more than 121,000 displaced individuals (17,350 households) from Al Hudaydah Governorate since 1 June based on the latest OCHA situation report.

- The National Authority for the Management and Coordination of Humanitarian Affairs (NAMCHA) has reported more than 12,000 displaced households that arrived in Sana’a. A total of 185 IDP households (997 individuals) have been verified by ADRA, the RRM focal point in Sana’a, that are currently staying in 6 schools.

- IDPs were also reported in some districts of Dhamar, Amran and Al Bayda governorates.

Health Cluster Response in Al Hudaydah

- The Health Cluster partners are scaling up their efforts to respond to the needs of the people in Al Hudaydah and neighboring governorates where IDPs are seeking refuge. Pre-positioning of emergency stocks continue while major efforts are also being made to prevent an escalation of cholera.

- Almost 15.5M USD has been mobilized from the Emergency Reserve Allocation Fund for preparedness and Al Hudaydah response to nine (9) health partners to ensure critical lifesaving health care to IDPs and people affected by the conflict for a duration of six months.

Health Cluster Partners under the Emergency Reserve Allocation Fund

<table>
<thead>
<tr>
<th>Governorate</th>
<th>District</th>
<th>Health Partner</th>
<th>Project</th>
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<tbody>
<tr>
<td>Al Hudaydah</td>
<td>Ad Durayhim</td>
<td>Building Foundation for Development (BFD)</td>
<td>Urgent Emergency Health Project in Ad Duraheim and Al Haql districts in Al Hudaydah Governorate.</td>
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<td>Zabid</td>
<td>Qater Red Crescent Society (QRCS)</td>
<td>Provision of primary health care, food, shelter and clothing to IDPs in Zabid.</td>
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<td>Al Mansourah</td>
<td>Yemen Family Care Association (YFCA)</td>
<td>Enhancement of Health Preparedness Capacity for IDPs in Al Mansourah.</td>
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<td>Az Zaydiyah</td>
<td>World Health Organization (WHO)</td>
<td>Support for health services in Al Mansourah.</td>
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<td>Al Meera</td>
<td>International Organization for Migration (IOM)</td>
<td>Comprehensive support of IDPs with health care services in Al Meera.</td>
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<td>Dhamar</td>
<td>Wusab As Safi</td>
<td>Building Foundation for Development (BFD)</td>
<td>Urgent Emergency Health Project in Wusab As Safi in Dhamar Governorate.</td>
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<td>Marib</td>
<td>Marib City</td>
<td>Charitable Society for Social Welfare (CSSW)</td>
<td>Support for health care services in Marib.</td>
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<td>Amanat Al Amin</td>
<td>Old City</td>
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<td>Ibb</td>
<td>Far Al Udayn</td>
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WHO will be supporting Al-Thawra hospital through local procurement of X-ray films as the hospital is currently suffering from a considerable shortage. WHO is also completing the assessment the operating room, emergency department, CCU and ICU in Al Olofi hospital essential for the hospital rehabilitation. It has also deployed one surgical team to Zabid hospital.

Save the Children International (SCI) is supporting the referral of trauma-related injuries and has also supported Bayt ALFaqih rural hospital with provision of drugs. SCI continues to support some health facilities with monthly incentives to health staff.

**Health Cluster Response in Amanat Al Asimah and Sana’a for IDPs**

- **Six (6) schools identified as IDP hosting sites are already hosting IDPs** from Al Hudaydah with Hafsah School serving as the registration site hosting a total of 185 IDP households (997 individuals). Six (6) additional schools are also being planned to serve as IDP hosting sites in Az'zal and Shu'aub districts (Amanat Al Asimah).

- **ADRA (Adventist Development and Relief Agency)** is taking the lead of ensuring that the Rapid Response Mechanism (RRM) is in place to facilitate the timely provision of humanitarian assistance to IDPs and verification of IDPs as well.

- **UNICEF and WHO** are supporting the health clinic at the transit point in Sana’a City to provide health services and ensure referral of cases with WHO providing additional staff and medicines to the clinic.

- **The Rapid Response Team of WHO-EOC** visited Abu Bakr School and conducted an investigation of skin diseases in some IDPs. Allergic dermatitis was the initial diagnosis and further information will be provided to the Health Cluster.
- **UNICEF** is also supporting a mobile medical team to provide health services in 4 IDP hosting sites and ensure appropriate referral of patients.

- **IOM** is transferring patients to seek appropriate level of care to health facilities from IDP hosting sites and will also be supporting a health facility for IDPs.

- **International Rescue Committee (IRC)** has agreed with GHO Sana’a to continue and expand support to Hilal health centre (the nearby HF to the transit point).

- **International Medical Corps (IMC)** will be supporting with 2 mobile teams with medicines in two schools and will also help in transferring patients to nearby health facilities.

- **Charitable Society for Social Welfare (CSSW)** will be supporting 1 health facility (Al-Sunainah HF) and will also provide medical supplies (including drugs) to other health facilities.

- **MSF** has agreed to support IDP referral of cases (mainly surgeries, burns and acute abdominal cases) to Al-gumhouri hospital. However, a list of IDPs currently staying in Sana’a is needed and has emphasized the need to adhere to the standard MSF referral form and criteria by the mobile teams referring IDP patients.

- **WHO** has partnered with the Cancer Centre for referral of any cancer cases, Al-Thawrah hospital for renal dialysis patients, and Al-Amal hospital for cases that need psychologic care. WHO will be supporting 22nd May hospital for referral of cases through an NGO.

- **SCI** is planning to support 3 health facilities near to the IDP hosting sites / schools in Ma’ain and Bani Al-harith districts (21 September health center, Ghalman health center) that will be confirmed this week.

- **MDM** also proposed to support Al-Guraf health centre in Al-Thawrah district that will be confirmed this week.

### Gaps & Constraints

#### Unstable security situation

- Insecurity has led to temporary closures of some health facilities. Health partners reported that some health facilities are temporarily closing down due to nearby armed clashes as well as displacement of health staff.
  
  - Building Foundation for Development (BFD) has reported that Al Tuhaytah rural hospital has been closed three days ago due to the current escalation of the conflict inside the Al Tuhaytah main town.
  
  - Shortage of specialized medical professionals attributed to the displacement of health care workers such as vascular surgeon in the main hospitals and OB-GYN surgeon in Zabid district hospital due to current conflict escalation.

- Keeping health workers present and safe at the main hospitals and district hospitals presents a major challenge.
Humanitarian access restrictions

- Access restriction into Al Hudaydah of some health partners.
- Movement restriction to other districts (especially for Mobile Health Teams) and governorates for health partner staff as well as storage / delivery of medical supplies.

Increasing demand of medicines due to an increase of trauma-related injuries and influx of IDPs

Needs

- A need for health cluster partners to understand their roles within the Al Hudaydah Concept of Operations wherein health activities are tailored to the different needs of the districts through health cluster meetings among health partners.
- Strengthening the trauma capacity of referral hospitals to cater to the anticipated increase of trauma-related casualties and capacity to conduct mass casualty management.
  - Sufficient amount of trauma-related drugs, anesthesia, X-ray films and lab reagents in the three main referral hospitals should be prioritized.
- The need to monitor the temporary closures of health facilities by health partners and local health authorities.
- The need to increase the supply of medical supplies (including drugs) due to the increasing trauma-related casualties at the three main referral hospitals and other health facilities in nearby governorates due to the influx of IDPs. Staff support (i.e., incentives, transportation and meal allowance) should also be considered.
- Emphasis on the eight Humanitarian Service Points (HSPs)—4 in Al Hudaydah, 1 in Dhamar (Wusab As Safil district), 1 in Ibb (Far Al Udayn district), 1 in Taizz (Al Mukha district) and 1 in Aden governorate regarding health partner response to IDPs. This underscores the importance of aligning the response of health facilities / health partners within the respective HSPs and Concept of Operations.
- Referral mechanism of IDPs in Sana’a seeking health care especially those that require further interventions has to be in place.