

HEALTH ON THE FRONT LINES

EMERGENCY RESPONSE
AND PRIORITIES

in WHO's Eastern
Mediterranean Region



**World Health
Organization**

REGIONAL OFFICE FOR THE **Eastern Mediterranean**

WHO's Eastern Mediterranean Region faces profound challenges impacting the public health and wellbeing of its population.

At the beginning of 2024, violence and loss in Gaza continue unabated, with insufficient aid reaching the population. Sudan grapples with the world's largest displacement crisis, while earthquakes, floods, and disease outbreaks exacerbate health burdens across the Region.

Health emergencies are escalating rapidly, with conflicts directly or indirectly affecting 13 countries. In 2023, 73 disease outbreaks were responded to, and six of the ten deadliest natural disasters worldwide occurred in our Region.

In response to these challenges, five priorities for WHO's emergency work have been outlined: addressing access disparities, strengthening country capacities, investing in public health systems, fostering collaboration, and enhancing WHO's capacities.

By prioritizing the well-being of those in need and focusing on human dignity, meaningful progress towards peace and improved health outcomes can be made.

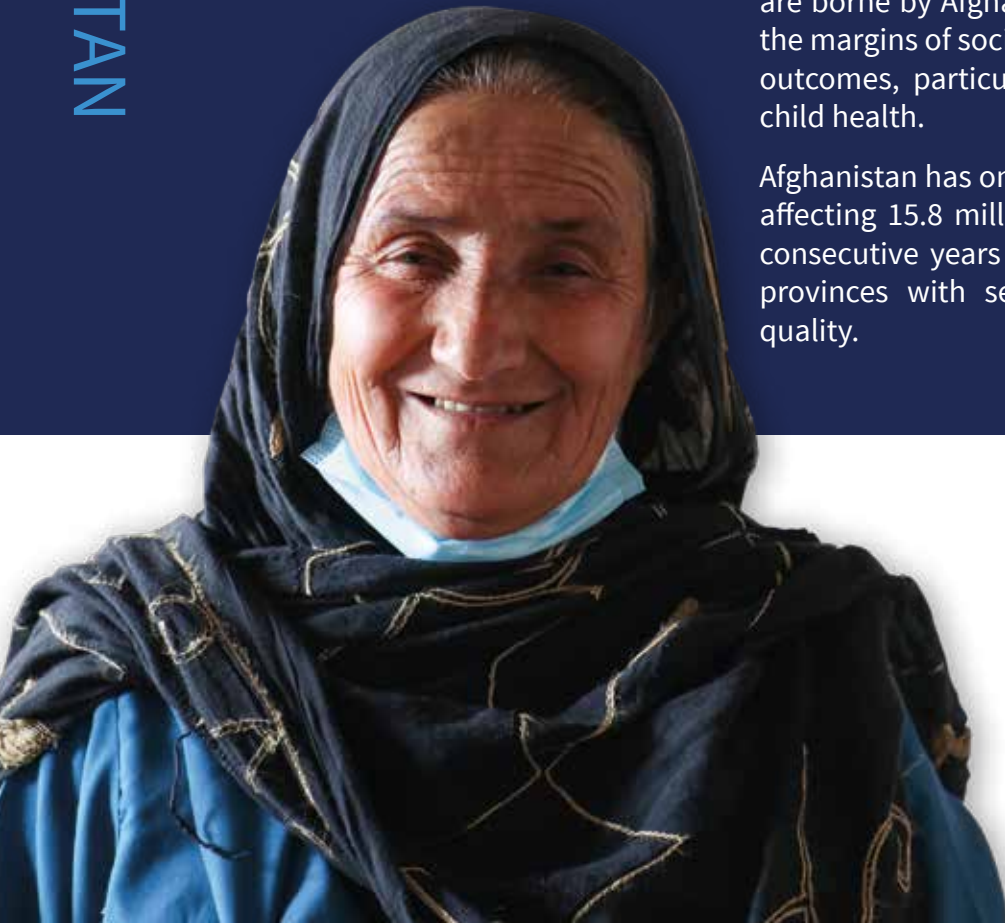
In emergency contexts, health must be prioritized as a fundamental right, respected by all parties to conflict. Upholding this right is crucial for promoting resilience and dignity.

HEALTH SITUATION

The need for humanitarian aid in Afghanistan has surged dramatically, increasing from 18.4 million people in need before August 2021 to an estimated 23.7 million people in 2024.

The most severe repercussions of this protracted health emergency are borne by Afghan women and children, who find themselves on the margins of society and increasingly vulnerable to adverse health outcomes, particularly for reproductive, maternal, newborn, and child health.

Afghanistan has one of the highest levels of food insecurity globally, affecting 15.8 million people. This has been exacerbated by three consecutive years of drought-like conditions, leaving 30 out of 34 provinces with severe water scarcity or extremely poor water quality.



23.7_m

PEOPLE IN NEED
OF HUMANITARIAN AID

17.9_m

PEOPLE IN NEED OF
HEALTH ASSISTANCE
INCLUDING 8.92 MILLION
WOMEN AND GIRLS

15.8_m

PEOPLE FOOD INSECURE

9.5_m

PEOPLE MALNOURISHED,
INCLUDING 857,000
CHILDREN WITH SEVERE
ACUTE MALNUTRITION

7.2_m

CHILDREN AND WOMEN
IN NEED OF EMERGENCY
NUTRITION ASSISTANCE

9.5_m

PEOPLE LIVING IN MORE
THAN 20,000 VILLAGES WITH
LITTLE TO NO ACCESS TO
BASIC HEALTH SERVICES

30 OUT OF 34
PROVINCES

HAVE SEVERE WATER
SCARCITY OR EXTREMELY
POOR WATER QUALITY



2024 HEALTH PRIORITIES

Reach the unreached and place women and children's health first by:

- Taking a 'for women, by women, with women' approach
- Expanding the coverage of health service delivery and increasing its quality, especially in underserved areas
- Sustaining the momentum of polio eradication and increasing immunization coverage

Continue protecting people every day by scaling up the response to ongoing emergencies and emerging health needs through:

- Including the strengthening of disease outbreak preparedness and response
- Strengthening the health information management system

Coordinate the health sector for maximum impact, including through:

- Responding to health-related humanitarian needs at national and subnational levels through the donor/partner coordinating forum, health cluster, and other coordinating mechanisms

17.3 MILLION PEOPLE
TARGETED

221.5^{US\$}m FUNDING
REQUIRED

COST OF INACTION

- 1.4 million new and expecting mothers and their children will no longer receive specialized food designed to prevent malnutrition
- Underfunding of the nutrition program will result in 875,000 children suffering from severe acute malnutrition, over 87,000 of these will result in medical complications.
- 262 static and mobile health facilities discontinued services in June 2023, depriving 2 million people of access to primary health care services
- 2,800 community-based classes and more than 170 mobile, health and nutrition teams closed in August 2023, affecting more than 200,000 children.
- Gender-based violence increased by 25% in 2024 to 13.1 million people, requiring dedicated support and sustained funding.

WHO RESPONSE IN 2023

- 16.5 million people reached with health assistance by WHO and partners
- 13 million children vaccinated (11 million against polio and 2 million through routine immunization)
- 1,106 (97.2%) disease outbreak alerts investigated and responded to within 24-48 hours
- 469,336 women provided with reproductive health services
- 194,722 mental health consultations supported
- 50,588 complicated cases of severe acute malnutrition treated in 130 stabilization centres across the country
- 26,755 referrals in WHO-supported hospitals across the country
- Over 5,000 women and girls received specialized services through the WHO-supported National Advanced GBV Referral Center.



Abdul, 38, from Nangarhar province, has been taking various drugs for the past 10 years. He puts this down to the pressures of poverty, stress and his failure in business.

“Drugs changed my life completely,” said Abdul, a father of six. “I have been violent towards my children and my wife. I have become a shame for my entire family.”

In February 2024, Abdul admitted himself to a drug addiction treatment centre in Jalalabad Province. Inpatients at the centre receive medical treatment and psychosocial care, including medication and counselling. WHO operates the centre with funding from the European Union.

A month after being admitted, Abdul said, “I am feeling much better. I learned that ending drug dependency is only possible if I actively participate in community-based relapse prevention services.”

The 150-bed drug addiction treatment centre for adults, funded by the European Union, provides health services to male adults. A second drug addiction treatment centre in Jalalabad has 20 beds for adolescent males.

Abdul is convinced that he never wants to go back to taking drugs, and plans to draw on medical support even after he has been discharged. “My family is waiting for me to join them as a new, healthy person,” he said.

Afghanistan has nearly 4 million drug users – roughly 10% of the population. Through seven WHO-operated treatment centres across the country, a total of 919 people completed treatment in 2023, while almost 24,000 more were reached by outreach teams.

HEALTH SITUATION

Seven months into the war in the Gaza Strip that started on 7 October 2023, the catastrophic humanitarian crisis continues to worsen. Desperation and scarcity have led to a near-total breakdown in law and order.

The devastation has displaced 1.7 million people, constituting 75% of Gaza's population. Over 70% of civilian infrastructure – including homes, hospitals, schools, water, and sanitation facilities – has been destroyed or severely damaged. By the second week of April 2024, only 11 out of 36 health facilities were partially functional for the whole of Gaza as a result of repeated attacks, access restrictions, hostilities, or shortages in fuel, water, food, and medical supplies.

Communicable diseases are rising amid unsanitary conditions and overcrowding. Famine is imminent in northern Gaza and there is a risk of famine across the rest of the Gaza Strip. More than half of all Palestinians in Gaza – 1.1 million people – have completely exhausted their food supplies and are facing catastrophic hunger.

WHO and partners have been doing the near-impossible to assist people in need, despite the risks. But ongoing hostilities, lack of sustained access and deconfliction has rendered the aid operation at scale virtually impossible.

OVER
33,000

PEOPLE KILLED AND MORE THAN 76,660 INJURED IN GAZA FROM 7 OCTOBER 2023 – 17 APRIL 2024

2.3m

PEOPLE IN NEED OF HUMANITARIAN AID

180

UN STAFF MEMBERS, AMONG THEM 177 UNRWA EMPLOYEES AND A WHO STAFFER KILLED IN ATTACKS ON AID WORKERS

1.7m

PEOPLE DISPLACED IN GAZA

1.11m

MILLION PEOPLE EXPERIENCING CATASTROPHIC FOOD INSECURITY (IPC 5), A 92% INCREASE FROM OCTOBER 2023 TO APRIL 2024

856

ATTACKS ON HEALTHCARE (435 IN GAZA, 421 IN WEST BANK) FROM 7 OCTOBER 2023 – 14 APRIL 2024

9,000+

PATIENTS NEED MEDICAL REFERRALS OUTSIDE GAZA



2024 HEALTH PRIORITIES *(POST HOSTILITIES)*

- Restore functionality of the health system by supporting and maximizing the capacity of the operational hospitals and primary health centres.
- Reactivate non-functional hospitals and primary care centres, wherever it is possible through basic rehabilitation and provision of supplies and equipment.
- Support mobile clinics to address the health needs of internally displaced people.
- Support the provision of MHPSS services for people in need, including the health workforce, and provide psychological interventions and psychotropics.
- Expand and strengthen the of disease surveillance system

2.7 MILLION PEOPLE
TARGETED

204^{US\$}_m FUNDING REQUIRED
FOR EMERGENCY
OPERATIONS

REGIONAL IMPACT

The crisis in the Gaza Strip is escalating to a multi-front regional conflict, particularly impacting Lebanon, Syria and Yemen. Readiness to respond to health needs, including pre-positioning of emergency medical supplies and coordination among partners is urgently needed although funding for the countries impacted by the violence continues to decline.

WHO RESPONSE IN 2023

- Between October 2023- March 2024, over 90 missions planned with other UN partners to conduct assessments and deliver fuel, medical supplies, water, and food to health facilities - half denied, impeded, postponed or withdrawn.
- WHO continues to support medical transfers of patients within Gaza and abroad.
- 142 trucks carrying WHO and health partners' supplies, essential medicines and equipment, worth US\$ 12 million, delivered into Gaza
- Coordinated deployment of 23 Emergency Medical Teams (EMT) in north and south Gaza and supported the teams through supplies and equipment. EMTs also supported to establish four field hospitals.
- Supported establishment of three malnutrition stabilization centres in Gaza for the treatment of children suffering from acute malnutrition
- Supporting disease surveillance through the electronic early warning, alert, and response system (EWARS in a box) at 13 UNRWA sites, with preparations taking place to expand it to 15 additional medical points
- Work with partners to map and monitor progress on all response activities towards set targets and identify activities to be incorporated into a longer-term humanitarian health response plan



Nesma Ayyad, mother of seven-year-old Jana, paints a heartbreaking picture of her daughter's deteriorating health in war-torn Gaza. With her husband absent and her home destroyed, Nesma struggles to care for her children amidst acute food and water shortages. Jana's once vibrant life has been replaced by suffering, as she battles malnutrition and its devastating effects. 'My daughter is my life, she was like a flower. Now I can see her ribs and her spine. She's lost the ability to even sit. I have to carry her to the toilet,' says Nesma.

The dire situation in Gaza is not unique to Jana; over a million Palestinians face catastrophic hunger, with children like Jana bearing the brunt of this crisis. WHO has stepped in, operating nutrition stabilization centers and providing vital medical supplies, but the need is overwhelming.

Jana's story highlights the urgency of the situation. Despite initial treatment, her condition remains critical, prompting WHO to facilitate her transfer to a field hospital for further care. Nesma's hope for her daughter's recovery is echoed by many parents in Gaza, longing for a brighter future amidst the darkness of conflict and deprivation.

"I am truly happy that she's finally going to be able to leave and receive treatment. I hope that day comes soon. I hope she comes back healthy as she was before or in an even better state," hopes Nesma.

As Nesma awaits news of Jana's evacuation for additional treatment, her prayers are a poignant reminder of the resilience and hope that persist even in the face of unimaginable adversity. Thanks to support from the European Civil Protection and Humanitarian Aid Operations (ECHO), WHO has also supplied hospitals and health centers with medical supplies for the treatment of up to 1250 children with severe acute malnutrition.



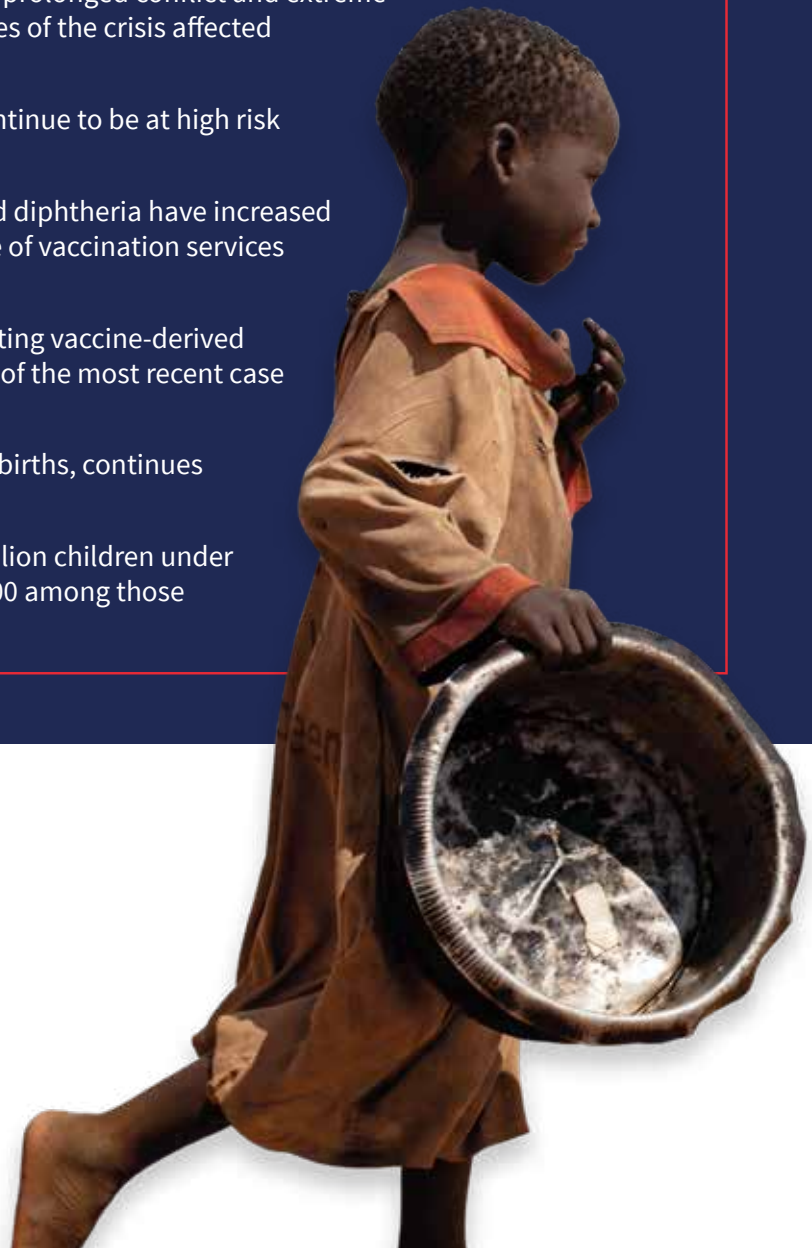
HEALTH SITUATION

Somalia remains a fragile and humanitarian context due to prolonged conflict, insecurity and vulnerability to extreme climate events. The recent 2021-2023 drought crisis in the Greater Horn of Africa has taken a heavy toll on Somalia, leaving millions of people displaced, worsening nutritional status, leading to disease outbreaks and further exacerbating the already fragmented health system.

Despite these challenges, collaborative efforts across the humanitarian-development nexus have successfully prevented a nationwide famine, a testament to collective resilience and cooperation. However, the conclusion of the prolonged drought was followed by the onset of El Niño in October 2023, bringing severe flooding to riverine communities across Somalia and increasing the risk of water-borne and vector-borne disease outbreaks. Currently, a significant cholera outbreak is underway in 30 districts.

As of 2024, about 6.9 million people in Somalia are estimated to be in dire need of humanitarian assistance, with more than 3 million facing acute food insecurity.

- Multiple, frequent, and concurrent disease outbreaks on top of prolonged conflict and extreme weather conditions continue to threaten the health and the lives of the crisis affected population of Somalia.
- Existing, ongoing disease outbreaks of cholera and measles continue to be at high risk to increase and spread further into new geographical areas.
- Alerts of vaccine preventable diseases like whooping cough and diphtheria have increased in the last quarter of 2023, demonstrating insufficient coverage of vaccination services in the country.
- Polio remains a high risk in Somalia with eight reported circulating vaccine-derived poliovirus type 2 (cVDPV2) cases in 2023, and the date of onset of the most recent case from the Bardera district was 20 January 2024.
- The maternal mortality ratio in Somalia of 692 per 100,000 live births, continues to be among the highest in the world.
- Malnutrition rates continue to be high and an estimated 1.7 million children under the age of 5 are expected to face acute malnutrition and 430,000 among those are expected to be severely malnourished in 2024.



2024 HEALTH PRIORITIES

- Progress towards universal health coverage with the further roll-out and implementation of the Essential Package of Healthcare for Somalia (EPHS2020)
- Increase vaccination coverage of all vaccine-preventable diseases (VPDs)
- Enhance disease surveillance system to ensure early detection and response to any public health emergencies

6.6 MILLION PEOPLE
TARGETED

122^{US\$}_m FUNDING
REQUIRED

COST OF INACTION

The estimated budget needs for 2024 could increase dramatically if disease outbreaks are not detected and responded timely as they emerge. Disease surveillance and rapid response will be critical means to save lives and costs, while contributing to the health system strengthening through deliberated programme design.

Availability and accessibility to health services for people affected by crisis will reduce with reduced funding availability in 2024. Development funding, including the implementation of a recent World Bank funded “Improving Healthcare Services in Somalia Project”, covers less than 20 per cent of functional health facilities in selected regions in Somalia. The remaining public health facilities continue to depend on short-term humanitarian funding and service provision by Health Cluster partners as the operational capacity of the ministries of health to deliver health services and respond to disease outbreaks remains limited.

Ultimately, failing to act will lead to higher morbidity and mortality rates among Somalia's most vulnerable populations, particularly women and children, who already face alarmingly high maternal and child mortality rates in the country.

WHO RESPONSE IN 2023

- 63 nutrition stabilization centres supported with medical supplies and technical support including introduction of updated treatment protocols and supervisions.
- 32,913 severe acute malnutrition cases treated with a cure rate of 97%.
- 3.2 million children reached with Vitamin A supplements and deworming tablets.
- Nearly 1 million people reached with oral cholera vaccine.
- 78% of raised alerts of diseases with the potential of outbreaks in crisis affected communities investigated within 48 hours.
- 12.7 metric tons of interagency emergency health kits and 14 metric tons of cholera supplies distributed to health facilities in the drought and floods affected districts.
- 55 Health Cluster partners collaborated to provide humanitarian healthcare services to the most affected populations with the coordination of WHO as the Health Cluster lead.



Fadumo Mohamed and her daughter Khaliye sought refuge at Raama Cadey camp in Baidoa, South-West State of Somalia, after being displaced by drought and conflict. Their journey was long and challenging, but they persevered, hoping to find help for Khaliye's illness.

When they arrived at the WHO-supported clinic within the camp, Fadumo's relief was palpable. Finally, they found the medical assistance Khaliye desperately needed. In addition to treatment, Khaliye also received her first vaccine, a crucial step towards protecting her health in their new, uncertain circumstances.

Their story highlights the crucial role of humanitarian aid in providing hope and healing to vulnerable communities in times of crisis.

HEALTH SITUATION

One year after the conflict escalated in April 2023, humanitarian needs across Sudan are at a record high, with 24.8 million people, or every second person, needing humanitarian assistance in 2024. This is 9 million more than in 2023.

People have been forced to flee their homes due to the dire humanitarian situation and the destruction of essential infrastructure such as roads, hospitals, medical facilities, and schools, as well as power, water, and communications services.

The number of people displaced by the conflict continues to increase, with 8.65 million people fleeing their homes in Sudan. Since the outbreak of the current conflict in mid-April 2023, at least 15 300 have died and at least 33 000 have been injured, although establishing accurate numbers of civilian casualties is challenging.

Disease outbreaks are increasing in the face of disruptions of basic public health services, and 62 attacks on healthcare have been verified by the WHO.



14.7_m

PEOPLE IN NEED OF
HEALTH ASSISTANCE

70%

OF PEOPLE IN NEED OF
HEALTH ASSISTANCE LIVE
IN HARD-TO-REACH AREAS
RELYING ON CROSS-BOR-
DER AND CROSSLINE
OPERATIONS

17.7_m

PEOPLE IN SUDAN (37% OF
THE POPULATION) FACED
HIGH ACUTE FOOD
INSECURITY (IPC PHASE 3+)
BETWEEN OCTOBER 2023
AND FEBRUARY 2024

30_m

PEOPLE DO NOT HAVE OR
HAVE LIMITED ACCESS TO
HEALTHCARE SERVICES

OVER
2/3

OF HEALTH FACILITIES IN
CONFLICT-AFFECTED
AREAS ARE
NONFUNCTIONAL

1.3_m

CASES OF MALARIA
11,000 SUSPECTED CASES
OF CHOLERA
8,300 SUSPECTED CASES
OF DENGUE

2024 HEALTH PRIORITIES

-
- Continue cross-border support to accessible areas in Sudan from Chad and South Sudan

 - Support the delivery of integrated essential health services in priority hospitals and primary health care facilities

 - Continued stockpiling and delivery of emergency health kits to public health facilities and health partners responding emerging public health events

 - Reinforce the capacity of rapid response teams for early detection of and response to disease outbreaks

 - Support facility-based care for acute malnutrition

2.7 MILLION PEOPLE
TARGETED

100^{US\$}_m FUNDING REQUIRED
FOR EMERGENCY
OPERATIONS

COST OF INACTION

2.5 million people remain at risk if humanitarian corridors for aid are not opened, and emergency health supplies do not reach vulnerable communities.

WHO RESPONSE IN 2023

- 4.5 million people aged 1 year and above reached in 6 priority states in cholera vaccination campaigns.
- Over 150 nutrition stabilization centres received medical supplies to address severe acute malnutrition. Operation costs for 42 nutrition stabilization centres were supported by WHO.
- 1,210 metric tons of medical supplies airlifted to Sudan from WHO's Logistics Hub in Dubai.
- 2,300 kits for severe acute malnutrition delivered to treat 28 000 children.
- 28 mobile teams and 15 hospitals supported to provide critical, life-saving services.



3-year-old Mahmud weighed only 6.8 kg when he was admitted to Port Sudan Paediatric Hospital in April 2024. He showed signs of severe wasting and had persistent diarrhoea and vomiting.

At a WHO-supported stabilization centre, Mahmud was diagnosed with severe acute malnutrition with medical complications. He was given therapeutic and medical treatment and his infection cleared within days.

Within a week, he gained 1.6 kg and was well enough to be discharged for follow up support at the outpatient therapeutic programme managed by nutrition partners.

“I am beyond happy that my baby has recovered. The staff in this hospital were very good to us: in addition to treating Mahmud, they taught me how to avoid this type of illness in the future. I will do my best to do as I was taught,” Mahmud’s mother said.

The stabilization centre at Port Sudan Paediatric Hospital is one of 104 centres that receive WHO emergency health and nutrition supplies, including medicines for the management of severe acute malnutrition with medical complications. In addition to this and staff capacity strengthening, in 2023, WHO covered operations cost for 42 stabilization centres and is supporting 11 stabilization centres up to April 2024. This support includes incentive for health and nutrition providers, hygiene and sanitation accessories, and food for caregivers, among others.

WHO’s support to stabilization centres in Sudan was made possible through the generous financial contributions of Italy, Japan, Sudan Humanitarian Fund, USAID and USAID Bureau of Humanitarian Assistance (BHA) and United Nations Central Emergency Response Fund (CERF).

HEALTH SITUATION

After more than 13 years of conflict, the Syrian Arab Republic grapples with a crisis of unprecedented magnitude. There are currently more Syrians in need of assistance than any other time since the conflict began.

The country's health system, which was already heavily disrupted, has been further impacted by factors including decreasing humanitarian support, outbreaks of measles and cholera, and the 7.8 magnitude earthquake that hit Türkiye and the Syrian Arab Republic in February 2023. This added an additional burden to the health system and increased the suffering of an estimated 8 million people affected by the disaster.

Since October 2023, the level of hostilities across many areas of the country – particularly the north-west and north-east – has been described as reaching “the worst point in four years” by the UN Commission of Inquiry on the Syrian Arab Republic and has worsened health access as a result.



16.7_m

PEOPLE IN NEED
OF HUMANITARIAN
ASSISTANCE

14.9_m

PEOPLE - 65% OF THE
POPULATION - NEED
HEALTH ASSISTANCE

90%

OF THE POPULATION LIVES
IN POVERTY AND IS
UNABLE TO ADDRESS
BASIC NEEDS

228

HEALTH FACILITIES
DESTROYED OR DAMAGED
IN THE FEBRUARY 2023
EARTHQUAKE

570%

INCREASE IN STRESS-
RELATED DISORDERS
AMONG THE ENTIRE
POPULATION

63%

OF HOSPITALS ACROSS
SYRIA FULLY OPERATIONAL



2024 HEALTH PRIORITIES

-
- Support the continuity of essential health services and improve the access, availability, functionality and quality of health services across Syria.
-
- Strengthen the health system's capacity to prepare for, prevent, detect and respond to diseases of epidemic potential.
-
- Support and enhance the resilience of the health system through improved infrastructure, strengthened supply chain and health information systems, expanded community engagement and a focus on the quality and adherence to national and international guidelines.
-

13 MILLION PEOPLE
TARGETED

79.8 ^{US\$}
m FUNDING
REQUIRED

COST OF INACTION

- 6 million people, including 1.5 million in northwest Syria, will face disruptions in access to life-saving services for emergency and trauma care, mental health, noncommunicable diseases, and reproductive health.
- More than 500,000 pregnant women will not have access to ante-natal care and safe deliveries.
- 8,000 patients with kidney failure will be unable to access life-saving treatment.
- Over 50 percent of cancer patients will be unable to complete their treatment regimens due to shortages of medicines and service disruption.
- 200 mobile health units/teams will cease to function, depriving displaced people and host communities of life-saving services across Syria.

WHO RESPONSE IN 2023

- 2.08 million outpatient consultations provided
- 17.4 million treatment courses provided
- 3,023 tons of health supplies delivered across the country
- 21 public health facilities rehabilitated, with an additional 7 projects are under way.
- 37,000 healthcare providers trained
- 874,000 consultations provided for mental health
- 10,600 referrals for reproductive and child health services.
- 3,551 complicated cases of severe acute malnutrition treated in 23 stabilization centres across the country.



Aya, a 20-year-old from rural Homs Governorate, was diagnosed with kidney disease at the age of 17. Since then, she has had to undergo life-saving dialysis three times a week.

"Learning that I would need dialysis was shocking news. I've had to accept that the dialysis machine is now my lifeline," said Aya. "Although my medical condition is part of my life, it's not the whole story. My dreams remain intact, and I am determined to do something meaningful with my life."

Aya lost her older brother to kidney failure three years ago. Her father does not have a steady job, and her mother is battling cancer. Like most Syrians, the family struggles to make ends meet and cannot afford the cost of health care.

"I am so grateful to the Afia Fund Association (AFA) for subsidizing my dialysis treatment and medicines," said Aya. "The centre is my second home, and the staff are like family to me."

Aya is one of many patients with kidney disease who are receiving free medical treatment at the WHO-supported AFA Medical Centre. WHO's support has been made possible thanks to generous funding from the European Commission Directorate-General for Humanitarian Aid and Civil Protection (ECHO).

The funds provided by ECHO have allowed WHO to support seven NGOs and one private hospital in the governorates of Aleppo, Al-Hasakeh, Homs and Rural Damascus to provide life-saving, essential health services to those in need.

HEALTH SITUATION

Yemen entered its tenth year of conflict in 2024, with half of the country's population facing poverty, hunger, and limited access to health care and in desperate need of humanitarian aid.

Vulnerable groups, such as internally displaced persons, women and children, the elderly, people with disabilities and mental health conditions, and marginalized communities, continue to bear the brunt of the crisis.

Among countries most vulnerable to climate emergencies, climate change-induced disasters will further exacerbate health vulnerabilities in Yemen. While health needs are urgent in Yemen, funding shortages are chronic.



18.2_m

PEOPLE NEED HUMANITARIAN ASSISTANCE

17.8_m

PEOPLE REQUIRE HEALTH ASSISTANCE, 50% OF THEM CHILDREN

17.6_m

PEOPLE ESTIMATED TO EXPERIENCE SEVERE FOOD INSECURITY

7_m

PEOPLE NEED SOME FORM OF MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

540,000

CHILDREN UNDER FIVE SUFFERING FROM SEVERE WASTING, INCLUDING 54,000 CHILDREN WITH SEVERE ACUTE MALNUTRITION WITH MEDICAL COMPLICATIONS

12.4_m

LACK SUFFICIENT ACCESS TO SAFE WATER SOURCES, INCREASING THE RISK OF INFECTIOUS DISEASES SUCH AS CHOLERA

55%

OF HEALTH FACILITIES FUNCTIONING AT FULL CAPACITY



2024 HEALTH PRIORITIES

-
- Provide health care to promote universal health coverage with a focus on the most vulnerable.
 - Protect the population by preparing for, detecting and responding to health emergencies.
 - Promote healthier lives and well-being using a multisectoral approach to promote community health and address the determinants of health and risk factors.
 - Promote a health and peace dividend to support resilient communities and health systems and foster community engagement, equity, social cohesion, partnerships and collaboration.
-

1 MILLION PEOPLE
TARGETED

77 US\$
m FUNDING
REQUIRED

COST OF INACTION

- In 2023, WHO supported 110 therapeutic feeding centres (TFCs) providing life-saving services to around 70% of the annual Nutrition Cluster target. WHO suspended support for 18 TFCs due to the shortage of funds—those TFCs cover 404,893 children under the age of five from 33 districts. The left-out children include 213,400 with acute malnutrition, 10–15% of whom are estimated to develop medical complications.
- WHO's cholera outbreak plan requires US\$ 8 million to cover the response activities efficiently for 6 months, only US\$ 1.7 million was received—a 79% funding gap.
- In 2023, WHO could only sustain providing (compared to 2022):
 - 47.7 million litres of water to 82 health facilities compared to 312.5 million litres to 244 health facilities.
 - 6.5 million litres of oxygen to 161 facilities compared to 13.7 million litres per day to 228 facilities.
 - US\$ 9.24 million worth of healthcare workers incentives in 3,883 health facilities compared to US\$ 19.8 million for healthcare workers from 4,569.

WHO RESPONSE IN 2023

- More than 2.5 million people reached with overall health assistance.
- Almost 894,000 infants under 1 year vaccinated as part of routine immunization, more than 1.2 million children under 5 years against polio, and administered measles vaccines to more than 1.1 children aged 6 months to 5 years.
- 333 Rapid Response Teams deployed across all districts to respond to disease outbreaks.
- 96 therapeutic feeding centers supported.
- 114 emergency obstetric and newborn care facilities supported.
- 47 mental health units supported in 20 governorates.



Displaced from a rural village in Taiz Governorate, Bilquis Suleiman, 37, has been in Aden, Yemen for almost five years. Pregnant with her third child, both she and her husband lack steady employment. They share one small room, together with their two daughters, in the house of her husband's parents.

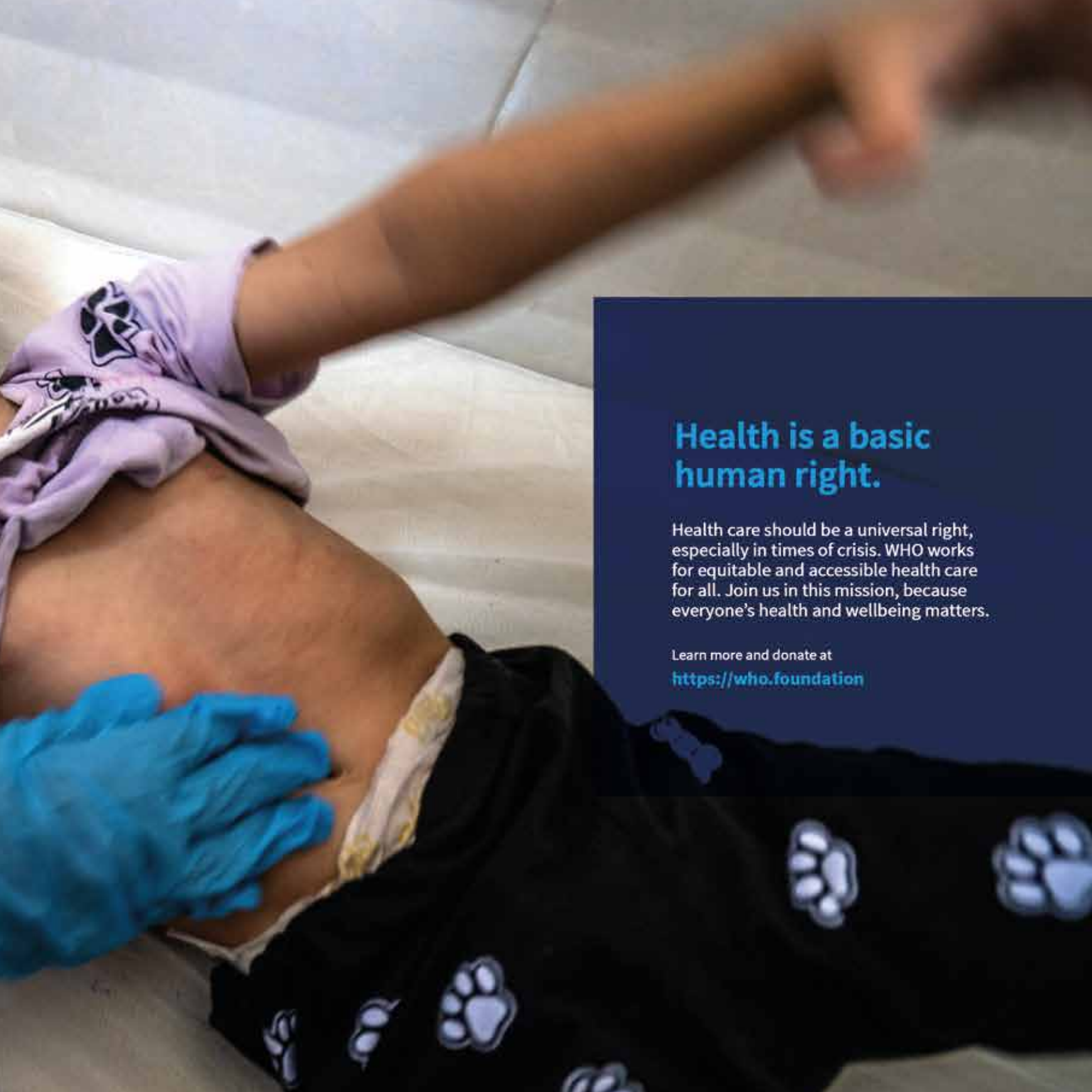
“Although we have a very modest income, I want all of my children to be healthy, live a good life, learn, and grow strong,” Bilquis says. Bilquis received potentially life-saving health information from a community volunteer during the first and continuing months of her current pregnancy. Through a KSrelief-funded project, WHO trains and supports community health volunteers conducting house-to-house visits and group consultation sessions on nutrition, maternal health, and hygiene – to improve health literacy among most-vulnerable women.

Bilquis quickly learned that a tetanus vaccination would protect her baby from neonatal tetanus, and that taking vitamins would support her baby's brain growth.

She also came to understand how her first several days of breastfeeding provide nutrient-dense colostrum for building her newborn's immune system, and why she should practice exclusive breastfeeding thereafter.

“All my questions were answered, and I found her [the community volunteer] so sweet and patient,” says Bilquis. “Both as a woman and a pregnant mother, I understood the importance of the knowledge she gave me. Now I am trying my best to spread the word and provide other mothers with the same information.”





Health is a basic human right.

Health care should be a universal right, especially in times of crisis. WHO works for equitable and accessible health care for all. Join us in this mission, because everyone's health and wellbeing matters.

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<https://who.foundation>



**World Health
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REGIONAL OFFICE FOR THE **Eastern Mediterranean**

