



World Health Organization

Regional Office for the Eastern Mediterranean

Situation report number 13
16 AUGUST – 30 AUGUST 2015

Yemen conflict



Photo: © WHO/P Ajello
WHO staff checking contents of medical supplies before loading to trucks destined to Taiz governorate to support the response to the health needs of the communities



21.1 MILLION*
IN NEED



1.4 MILLION**
INTERNALLY
DISPLACED



250 000***
REFUGEES



23 970****
INJURED



4 628
DEATHS

WHO



Photo: © WHO/P Ajello
A patient undergoing kidney dialysis at Al Jumuri hospital, over 1500 patients require dialysis services in Yemen, the closure of these facilities in some governorates has left hundreds at risk

82 WHO STAFF IN COUNTRY

HEALTH SECTOR

20 HEALTH CLUSTER PARTNERS

15.2 M TARGETED POPULATION

MEDICINES DELIVERED TO HEALTH FACILITIES/PARTNERS 18 MAY - 30 AUGUST '15



200 TONS OF MEDICINES AND MEDICAL SUPPLIES

800 000 LITRES OF FUEL TO HOSPITALS

DISEASE EARLY WARNING SYSTEM



400 E-DEWS SENTINEL SITES

FUNDING US\$ FOR 2015 RESPONSE PLAN



105 M REQUESTED

19 M FUNDED

82% FUNDING GAP

HIGHLIGHTS

- WHO and partners vaccinated 4.4 million out of the targeted 5 039 936 million children under the age of 5 years against polio and over 1.5 million out of the targeted 1.8 million children aged 6 months to 15 years against measles in high-risk areas.
- WHO donated local trauma kits sufficient to conduct 1000 surgeries, surgical supply kit, dressing kits, first aid bags and anesthesia medicines to respond to the critical health needs in Taiz governorate.
- WHO has also donated Emergency Trauma kits, Interagency Emergency Health Kits and other medical supplies to Al Thawra hospital and Bajel Renal dialysis in Hodeida governorate and Tehama region.
- A total of 28 598 facility based casualties including 4628 deaths and 23 970 injuries have been reported from 21 governorates for the reporting period 19 March to 20 August 2015.

* 2015 Yemen Humanitarian Response Plan- Revised version
** UNOCHA
*** UNHCR website
**** Data as of 20 August 2015

- Over the past few weeks clashes in Taiz and Hodeida have intensified limiting health partners' ability to access populations who are in urgent need of health assistance. More than 3.2 million people in Taiz have been left with limited accessibility to health care resulting to humanitarian crisis. Thousands are in desperate need of treatment but are unable to receive it due to accessibility issues, closure or extensive damage to health facilities.
- In Taiz, health staff, patients and health facilities bear the burden of the crisis. One X-Ray technician died and one assistant worker and two patients were severely injured as a direct result of the crisis; Al-Jumhoori Hospital one of the main referral hospitals in the governorate has also been seriously damaged.
- In Yemen international hospital in Taiz, patients were evacuated and the hospital closed to avoid death and injury as the health facility was at the frontline of the crisis. An estimated 60 inpatients were transferred to Al-Refa'ay Hospital while others were taken by relatives, whereas the whereabouts of others have not yet been established.
- WHO, health authorities and partners are exploring new ways to reach unvaccinated children against polio, measles and rubella in hard to reach areas in Taiz. Several hundred children in seven districts of Taiz namely: Sala, Almudhafar, Alqahera, Altaizia, Saber, Mashraa & Hadnan and Gabal Habashi could not be vaccinated due to insecurity during the just concluded national vaccination campaign launched on 15 August.



- Since 19 March to August 2015, a total of 28 598 facility based casualties including 4628 deaths and 23 970 injuries have been recorded from 21 governorates. Aden and Taiz governorates have recorded the highest number of causality cases at 9794 and 5985 respectively. Trauma management remains one of the biggest public health challenges currently facing the health sector in Yemen.

Epidemiological update

- A spike in the number of dengue fever cases has been reported in Taiz over the past two weeks rising from 145 cases in week 32 to 421 in week 33. These numbers are higher as compared to cases reported in the same period of time in 2014, (see figures 1 and 2).

Fig 1. Total dengue fever cases in Tiaz governorate in 2014

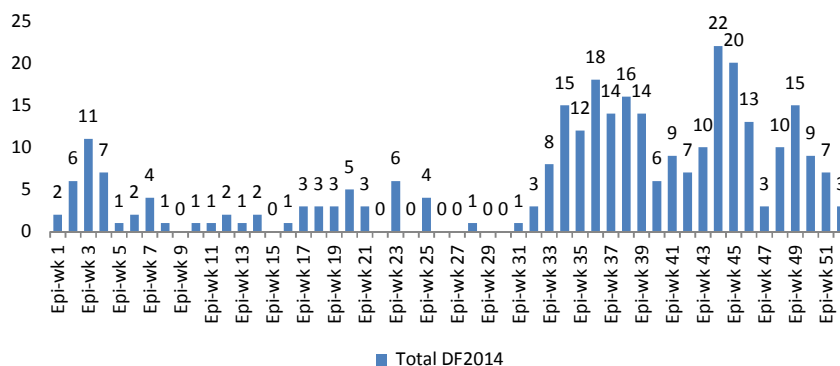


Fig 2. Suspected Dengue Cases in Taiz in 2015



- The spike could partially be associated to several factors among them: proliferation of the vector population especially in abandoned homes, limited accessibility of health facilities and treatment sites for the cases of dengue fever, escalation of the conflict in the governorate, increased population displacement and closure of health facilities which is limiting access by those in need of treatment. Other factors are: high levels of insecurity, scarcity of water leading to storage in open containers, lack of supportive treatment, difficulty in conducting relevant health education for the communities due to high security risk and population instability, as well as over crowdedness in camps, makeshift shelters and within host communities.
- Response measures have been initiated by the Ministry of Public Health and Population, National Malaria Control Program and partners including fogging households and distributing 10000 Long Lasting Insecticide Treated Mosquito bed nets worth protecting 20 000 people. However insecurity is limiting the ongoing response.

Public health concerns

- Reduced health services in all public and private hospitals, especially operating theatres and intensive care units.
- Disrupted immunisation activities increasing risk of outbreaks for measles and polio.
- Limited life-saving medicines and supplies, including trauma, diarrhoea disease kits and medicines for chronic diseases.
- Limited access to health care services and a breakdown in safe water supply and sanitation services facilitating the spread of endemic diseases such as malaria and dengue fever, as well as acute diarrheal diseases.
- Limited communications possibilities are hampering the functionality of the disease early warning alert and reporting system.
- Cases of dengue fever in Taiz and malaria continues to be a public health concern.
- Grave concern over the safety of health facilities and health personnel.

Health priorities

- Support mass casualty management in conflict affected governorates, including provision of trauma kits, medical and surgical supplies, deployment of surgical teams and referral services, and ambulance services.
- Provide integrated primary health care services in all the affected governorates, including mental health care, routine immunization, screening and treatment of childhood illnesses

through health facilities, outreach and mobile services, all accompanied by social mobilization activities.

- Procure, stockpile, and distribute lifesaving medicines and supplies including Interagency Emergency health kits, Trauma kits, Interagency Diarrhoea Disease kits and blood bags to health facilities in the highly affected governorates, namely, Sada'a, Amran, Taiz, Aden, Lahej and Hajja.
- Update information systems and field reporting to ensure timely and effective response and avoid duplication of efforts.

Health
response
and
WHO action

- WHO and partners supported health authorities to vaccinate 4.4 million children under the age of 5 against polio and 1.5 million children aged 6 months to 15 years against measles and rubella during a national immunization campaign launched on 15 August. WHO provided technical support and financial support estimated at US \$ 2 million to cover the operational costs for micro-planning, supervision, monitoring and incentives for vaccinators.
- On 20 August 2015, WHO donated to health partner trauma kits sufficient for 1000 surgical interventions, surgical supply kits, dressing kits, first aid bags and anaesthesia medicines to treat the increasing numbers of injured patients in Taiz.
- In Hodeida governorate and Tehama region, where the crisis has equally escalated, WHO donated Emergency Trauma kits, Interagency Emergency Health Kits and other medical supplies to Al Thawra hospital and Bajel Renal dialysis to address the immediate health needs. Shortly after the delivery of the supplies to the hospital, 25 major surgeries were carried out as a lifesaving intervention for the injured.
- WHO supported health authorities to investigate 86 alerts generated through the Electronic Disease Early Warning and Response System in week 34, 2015; of these 84 alerts were verified as true for further investigations and appropriate response. The alerts included: measles, bloody diarrhoea, acute viral hepatitis, dengue fever and cutaneous leishmaniasis. Other were: pertussis and acute flaccid paralysis, Meningitis, Schistosomiasis, acute diarrhoea, neonatal tetanus and viral haemorrhagic fever.

Resource
mobilization

The Revised Yemen Humanitarian Response Plan requires US \$ 152 million to meet life-saving and protection needs of 15 million people affected by the escalating conflict in Yemen. WHO requires US \$ 105 to cover the health needs of 10.3 million people, however the agency has only received US \$ 19 million leaving a gap of 82%. WHO's response to the crisis in Yemen has been supported by the Governments of Japan, Kingdom of Saudi Arabia and the Central Emergency Response Fund.

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