



Situation Report DECEMBER 2019 ISSUE NO.12 Yemen Update



For those children who suffer, WHO & World Bank scale up support to mitigate child malnutrition in Yemen through providing 27 tons of Severe Acute Malnutrition kits are sufficient to treat over 13K children in 10 governorates. C: Sadeq Hasan



24.1 MILLION*
IN NEED



14.3 MILLION **
IN ACUTE NEED



858,619 * CHOLERA**
SUSPECTED CASES



19.7 M ****
IN NEED FOR HEALTH CARE

WHO

HIGHLIGHTS



Towards making access to health care available to people in Yemen, WHO supported Al-Saddaqa hospital in Aden with equipment to cover electricity, laboratory, intensive care, operation room, and pediatric ward. C: Nesma Khan

- In 2019, a total of 7,732 suspected SARI cases with 345 SARI-associated deaths, these figures are comparable to those of 2018, when the total number of reported suspected SARI cases was 8,522 with 71 associated deaths. From the beginning of October (week 40, 2019) the number of reported suspected SARI cases began to increase with the start of the winter season.
- In December 2019, WHO and UNICEF conducted a 3-day nationwide polio campaign protecting over 4 million children under the age of 5. The recent campaign spanned 317 out of 333 districts and all 22 governorates across the country.
- In December, a national schistosomiasis and deworming campaign was conducted, contributing ongoing elimination efforts of neglected tropical diseases (NTDs) in Yemen.
- During the month of December 2019, an Integrated Outreach round was conducted in the selected districts/ governorates to vaccinate the target children in the remote areas.

NUMBER OF WHO STAFF & OTHER CONTRACTS MODALITY IN COUNTRY: 300

HEALTH SECTOR

71	HEALTH CLUSTER PARTNERS
15.8 M	TARGETED POPULATION –YHRP 2019
MEDICINES DELIVERED TO HEALTH FACILITIES/PARTNERS SEPTEMBER	
140,817	MEDICAL CONSULTATIONS

* Yemen HNO 2019
 ** Yemen HNO 2019
 *** Cholera bulletin as of 29 December 2019
 **** Yemen- HRP 2019

Situation update

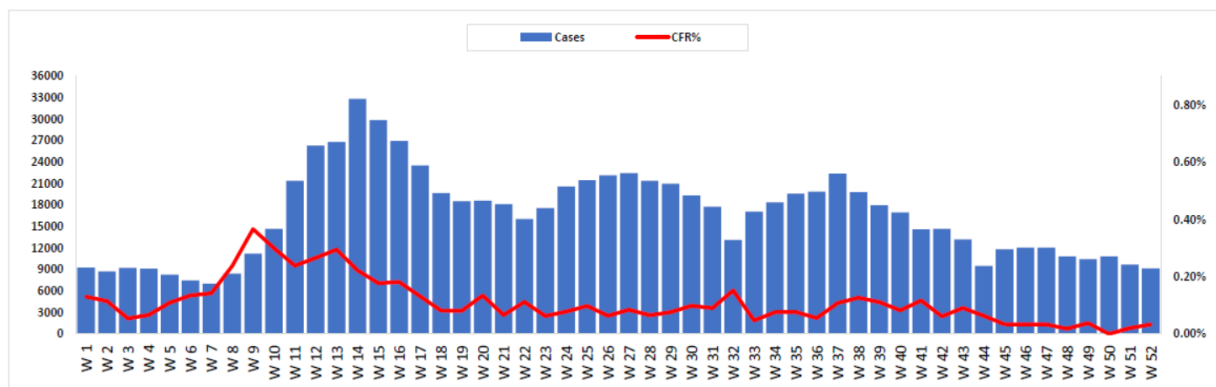
- Conflict update:** As of late December, field reports indicated that an attack on Al Raqw market in Monabbih District in Sa'ada Governorate has left at least 17 civilians dead, including 12 Ethiopian nationals, and injured at least 12 others. Also, conflict in Al Dhale'e governorate was escalated recently.
- Cholera update:** In 2019, a total of 858,619 suspected cases of cholera, including 1,023 associated deaths (CFR 0.12%), have been. Children under the age of five continue to represent 26% of the total number of suspected cases. As of 29 December, 96% (n=318) of the 333 districts in Yemen have reported suspected cholera cases since 2019.
- Flu Update:** According to eDEWS - MOPHP reports, there are 7,732 suspected SARI cases with 345 SARI-associated deaths, these figures are comparable to those of 2018, when the total number of reported suspected SARI cases was 8,522 with 71 associated deaths. From the beginning of October (week 40, 2019) the number of reported suspected SARI cases began to increase with the start of the winter season. From 1 October (week 40) to 29 December 2019 (week 52), eDEWS reported 2,739 SARI cases from 56 out of 333 districts and 14 out of 23 governorates.

Epidemiological Update and Surveillance

Cholera

- From 1 January to 29 December 2019, a total of 858,619 suspected cases of cholera, including 1,023 associated deaths (CFR 0.12%), have been reported. Children under the age of five continue to represent 26% of the total number of suspected cases. As of 29 December, 96% (n=318) of the 333 districts in Yemen have reported suspected cholera cases since 2019.

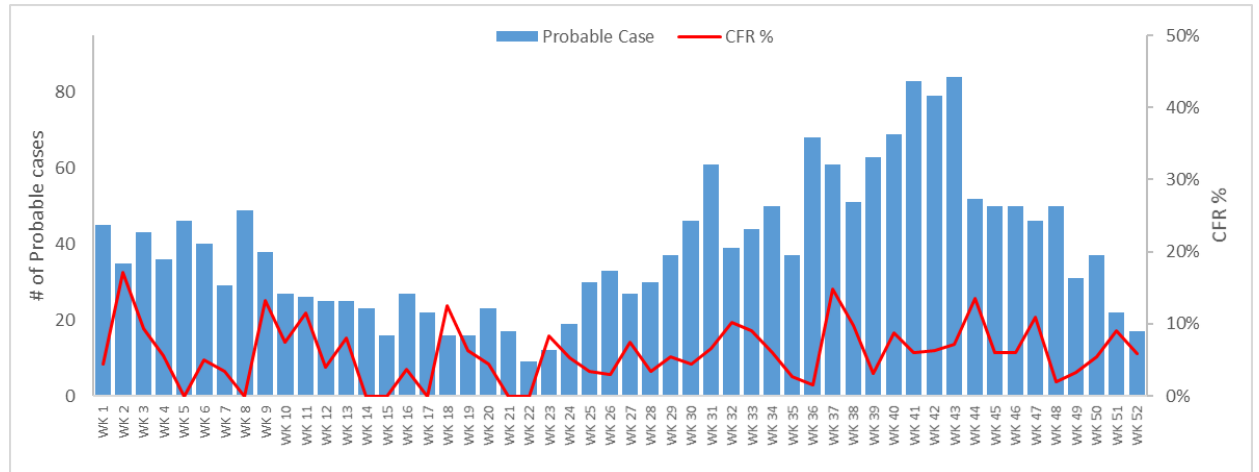
The trend in suspected cases between epidemiological weeks 1 -52



Diphtheria

- From 1 January to 29 December 2019, a total of 2,000 probable cases, including 125 associated deaths, have been reported. As of 29 December, 67% (n=224) of the 333 districts in Yemen have reported suspected diphtheria cases. During last four weeks 79% were reported from four governorates: Al Hodeida (34%), Hajjah (17%), Amanat Al Asimah (15%) and Sa'ada (13%).

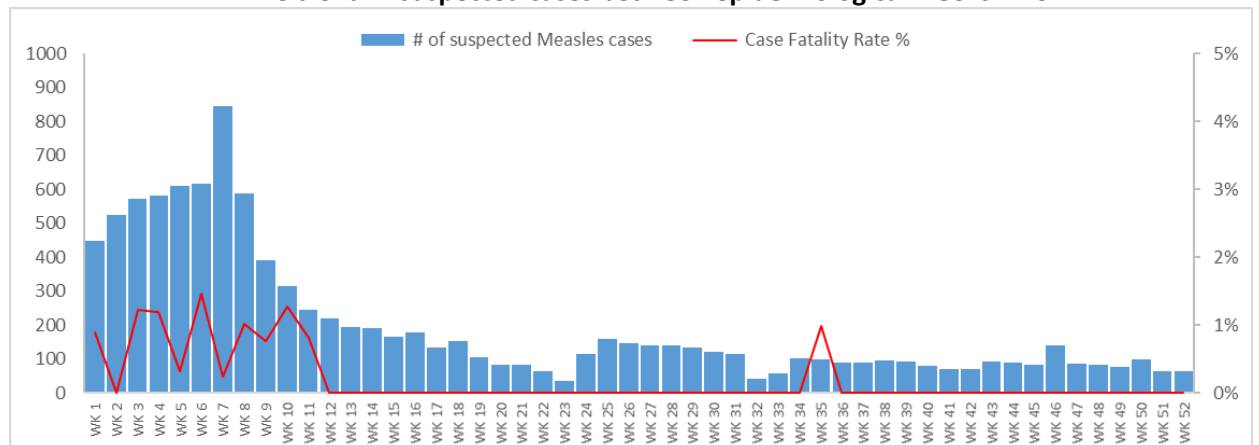
The trend in suspected cases between epidemiological weeks 1 - 52



Measles

- From 1 January to 29 December 2019, a total of 10,221 suspected measles cases have been reported, including 47 associated deaths (CFR 0.5 %). Within the last 4 epidemiological weeks, 65% of suspected cases were reported from 6 governorates: Aden (15%), Amanat Al Asimah (15%), Amran (11%), Ibb (10%), Sa'ada (8%) and Hajjah (6%). Children under the age of five represent 68% of the total suspected cases.

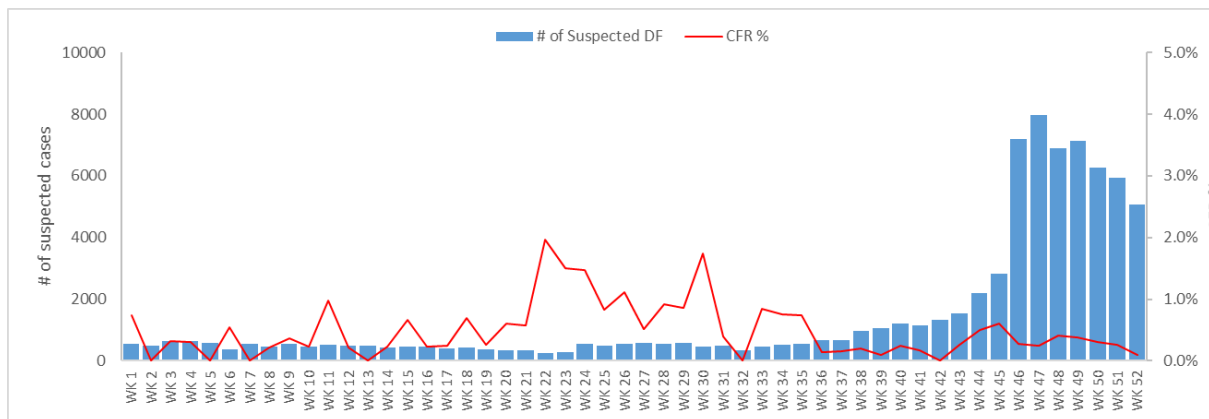
The trend in suspected cases between epidemiological weeks 1 - 52



Dengue Fever

From 1 January to 29 December 2019, there have been a total of 76,768 suspected cases reported including 271 associated deaths (CFR 0.4%). Within the last four weeks, 175 districts have reported suspected cases, with 86% of these being reported from three governorates: Al Hudaydah (65%), Taizz (14%) and Hajjah (7%). The highest proportion of cases is being reported from districts where access is challenging due to insecurity.

The trend in suspected cases between epidemiological weeks 1 – 52



Health Response and WHO Actions in December 2019

Polio Vaccination Campaign:

- In December 2019, WHO and UNICEF conducted a 3-day nationwide polio campaign protecting over 4 million children under the age of 5. The recent campaign spanned 317 out of 333 districts and all 22 governorates across the country.
- During the campaign a total of around 4,538,861 (85%) children less than 5 years of age received polio vaccine with the help of 18,133 House to House vaccination teams and 2,572 fixed teams deployed in health facilities. Availing the opportunity, Vitamin A was also administered to children 6 months to 5 years of age.
- These teams were supervised by 4,667 close supervisors (one close supervisors for 3-5 mobile teams, 630 District Supervisors (2 per district), 132 Governorate Supervisors (6 per Governorate) and 680 supervisors from Local authorities (2 per district and 2 per Governorate). In addition to these 41 Independent Supervisors were deployed by WHO in various high risk areas to support the district/ Governorate in training and implementation of campaign.



Under the Emergency Health and Nutrition Project, WHO, UNICEF, World Bank and health authorities launched ongoing door to door integrated polio & Vitamin (A) campaign yesterday. Aiming to protect 5.5 million children under 5 years of age. C: Omar Nasr

- Independent post campaign assessment was carried out and the preliminary results indicates an overall coverage of 91% with the lowest coverage in Say'oun (68%), Mokala (78%), Aden (79%) and Sana'a city 984%).

Outreach Activities

During the month of December 2019, an Integrated Outreach round was conducted in the selected districts/ governorates to vaccinate the target children in the remote areas. A minimum package of "routine essential health and nutrition services provided to the target children and family planning/ reproductive health services to women of Child bearing age. The services provided include:

- Vaccinations: against 11 childhood vaccine preventable diseases
- Integrated Management of Child Illnesses; treatment of pneumonia, diarrhoea and malaria
- Reproductive Health; ante/post-natal care and family planning
- Nutrition; screening for malnutrition, deworming, micronutrient supplementation and
- Referral services in case required.

Schistosomiasis Campaign

- In December, a national schistosomiasis and deworming campaign was conducted, contributing ongoing elimination efforts of neglected tropical diseases (NTDs) in Yemen.
- NTDs affect over 1 billion people globally and in Yemen, they afflict tens of thousands. An integrated large-scale treatment campaign covered 101 districts in 11 Northern Governorates of the country, targeting 3,340,664 people for two diseases (schistosomiasis and soil-transmitted helminthiasis) supported by local health authorities and the WHO.
- Over 12,000 health care workers, comprising over 5000 teams distributed over 11 million tablets (3,340,664 of Albendazol and 8,017,595 Praziquantel), protecting an estimated 83% of the target population.



The schistosomiasis and soil-transmitted helminthiasis 4-day treatment campaign launched on 15 December & will continue until 19 December in 11 governorates. The campaign aims to protect over 3.5 M children between ages 6-18. C: WHO staff

Dengue Fever

In order to decrease the risk of dengue for 35 000 people across 13 priority districts reporting the highest number of dengue cases, WHO along with local health and government authorities, IFRC and YCRS have implemented a community mobilization strategy on risk prevention and health hygiene promotion activities through supporting local public health actors, strengthening dengue clinical case management and scaling up community engagement and awareness through health promotion and social mobilization activities, as well as source reduction activities at community level focused on environmental prevention and management of dengue.

Flu update

- **Information Education and Communication:** WHO in coordination with MOPHP Influenza Program is going to print and distribute 65,000 awareness brochures, leaflets and posters on seasonal influenza to health facilities, schools and community gathering places.
- **Case Management and Infection Prevention and Control (IPC) and Capacity Building:** a training to increase awareness and influenza risk management among 406 health care workers is ongoing in the governorates of (Al Hudaydah, Hajjah, Sa'ada, Ibb, Dhamar, Amran and Sana'a city). a total of 459 health care workers from governorate and district hospitals were trained on case management and surveillance of five main infectious diseases (measles, rubella, influenza, cholera and diphtheria) with the aim to increase awareness among health staff and performance on case detection, reporting and management. Moreover, case management guidelines have been printed and distributed to health facilities.
- **Medicine Provision:** WHO has supported the MOPHP with the provision of 1,250 oseltamivir (Tamiflu) with additional 7,000 oseltamivir (Tamiflu) were provided to the south and the north. Also, WHO provided MOPHP with 10,000 respirator masks N95 for Sana'a and 5000 for Aden.
- **Epidemiological Surveillance and laboratory support:** WHO supported the central health laboratory with influenza reagents to test the collected samples. Also, WHO provided the influenza program with 2000 nasal swabs for specimen collection. A meeting with related sectors on human-animal influenza (One Health approach) was conducted to update and finalize the national influenza preparedness plan. Moreover, WHO technically supports 4 SARI sentinel sites, and technically and financially supports 1991 HFs reporting to eIDEWS, 333 eIDEWS focal points at district level, 23 eIDEWS at governorate level and around 20 at central level. In addition, WHO supports 333 district RRTs and will activate in 2020 governorate RRTs.
- **Vaccine:** WHO provided MoPHP with 1,200 influenza vaccines to cover high-risk group which is a healthcare worker in referral hospitals. Additional 1500 vaccines are being purchased for current influenza season with a total of 20,000 influenza vaccines for Northern and 10,000 for Southern governorates will be procured before next influenza season starts.



Delivering eDEWs mobiles and electronic equipment to the Ministry of Health in Aden to be distributed to southern eastern governorates, supported by the World Bank: Nesma Khan

Trauma Care and General Emergency Services

- **Incentives Payments to keep the health system functioning:** A total of 47 surgical teams were supported with incentives/per diem payment in 17 governorates and 39 health facility based primary health care teams were supported in 14 governorates. In addition to 1 Emergency Mobile Medical Team (EMMT) in Al Hudaydah governorate.
- **Medical and Surgical consultations:** In December the health facility based primary health care teams performed a total of 114,042 consultations, the surgical teams performed 25,524, while the supported EMMT performed 1,251 consultations.
- **Fuel provision to health facilities:** WHO continued its support to the targeted health facilities with fuel provision to ensure functionality and continuous provision of life-saving health care services. A total of 1,133,400 L of fuel planned to be provided to 189 HFs across the country in December, so far a quantity of 590,863 liters was delivered to 114 health facilities. Delivery of the remaining quantity of 457,463 L to 75 HFs is on the wheels.

Non-Communicable Diseases (NCDs)

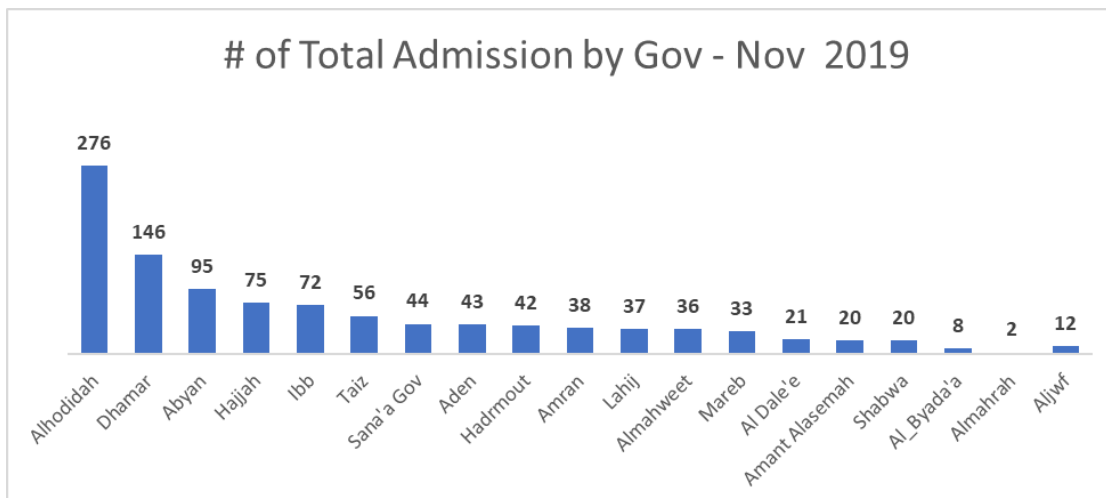
- During December month, WHO supported the incentives payment for more than 600 technical staff in 13 cancer centres in 9 governorates and 21 dialysis centres staff in 13 governorates. The payment is aimed to ensure the continuum and the sustainability of medical care provided for this vulnerable group of patients (cancer, dialysis-dependent chronic renal failure, and patients with mental disorders) and to prevent more brain drain of specialized staff in Non-communicable diseases care.
- A training course for 25 medical staff working at the oncology and dialysis centres in Amanat Al Asimah and Sana'a governorates has been conducted. This course aimed to increase the knowledge of medical staff concerning the various reactions of cancer patients and how to provide the adequate psychological support to patients and their families.

The Emergency Health and Nutrition Project (EHNP) update

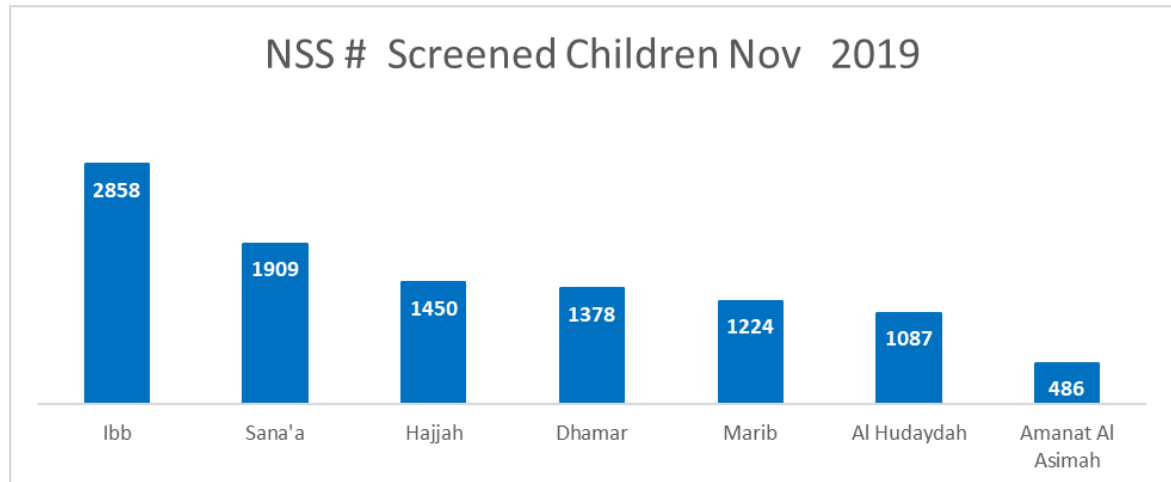
- The Emergency and Health Nutrition Project (EHNP) focuses to improve health services' accessibility at primary and secondary levels, and strengthen referral mechanisms for all levels of care. Together with the World Bank and UNICEF, EHNP also aims to strengthen the health system, with interventions such as improving and institutionalizing health information systems, reducing out of pocket payments, and improving healthcare management capacity. Since its inception, 16 million people have been reached with essential health, nutrition, and population services. Increased functionality and service availability of 1,972 health facilities led to an increase of service utilization of between 36% and 150%. Hospital admissions have increased, with EHNP hospitals constituting over 50% of all admissions in Yemen. WHO alone supports 72 district (44), inter-district (5), and governorate (23) hospitals (Annex 10).

Nutrition (November update)

- Children Admitted:** a total of 1,076 children were admitted to WHO supported 68 therapeutic feeding centers (TFCs) for the treatment of severe acute malnutrition (SAM) with medical complications.
- Capacity Building:** In addition to the case-management in TFCs, preventive activities were conducted represented by IYCF counselling. Thus, a total of 1,076 mothers were counselled on IYCF best practices across all TFCs. Each month, an average of 20 counselling sessions/ TFCs are conducted for care-givers accompanying their children in admission, with average of 5 sessions per mother per admission period.



- Nutrition Surveillance System:** a total of 10,392 children were screened at 46 nutrition surveillance sentinel sites in the month of November. Nutritional surveillance reporting has demonstrated improved reporting across the 46 newly established sentinel sites in priority districts between November 2018 and Nov 2019. Improvements in reporting has facilitated and led to better-quality screening for SAM cases with medical complications.



Partnerships/ Health Cluster

- **Health cluster coordination meetings:** During December, Yemen Health Cluster conducted a total of cluster coordination meetings as follows:
 - 3 National Health Cluster coordination meetings
 - 1 Subnational health cluster coordination meetings in Ibb/Taiz Hub
 - 2 Health Cluster coordination meetings in Al Hudaydah
 - 1 Health Cluster coordination meeting in Sana'a
 - 2 Health Cluster coordination meeting in Aden in which the cluster discussed many epidemiological / health interventions situation as well as the main challenges facing partners in the field.
- **Technical working groups and bi-lateral meetings:** health cluster have coordinated a total number of 5 meetings for the technical working groups such as RH, and ICWG also the health cluster on national and subnational level have conducted a total of 16 bi-lateral meetings with the partners and authorities to discuss partner's interventions, response, Gaps, needs and challenges.
- **Field Visits:** In December, cluster coordinators have conducted a total of 7 field visit to monitor and support HFs, DTCs Hospitals in the Hubs as well as conducting the 4th Quarterly Consultative National Health Cluster Aden 9-16 Dec 2019 and Participate in the 2nd Expert consultative regional meeting for Quality in Extreme Adversity Settings 9 – 14 December 2019 – Doha.
- **Others:** Health Cluster Subnational Health cluster coordinators have participated in RCT, ICWG, Quality, DF response, SNWC and Response for IDPs meetings to ensure the effectiveness in partner's interventions and responses.

Health Response Priorities 2019

WHO leads the health cluster in Yemen and works in collaboration with partners on a two-pronged approach:

- Firstly, addressing two health determinants; WHO will focus on monitoring potable water and sanitation conditions to advocate and leverage partners at directing their efforts where more critically needed; the goal is to decrease water borne diseases such as cholera.

Challenges, Concerns and needs (as reported by health cluster partners)

- The Organization will also significantly enhance surveillance and monitoring for malnutrition, address severe malnutrition as a last resource organization and ensure all partners have access to strategic information for their operations in a timely fashion.
- Secondly, restoring and enhancing preventive programs and access to health services. WHO aims to restore key priority preventive programs such as vaccination and disease surveillance and improving access to health services. While WHO will increase its technical support to the country, it will also restructure its emergency operations to deliver within the security and non-permissive environment conditions.
- **Access issues persist:** Access constraints, authorities restricting implementing partners, thus delaying implementation
- **Bureaucratic impediments:** To importing and transporting medicines and supplies; delays in receiving MOPHP requests for supplies and equipment; increased restrictions and controls at the importation level, with customs, requesting to check and approve cargo manifest for each airlift. Implementing partners face delays in receiving the approval of the sub-agreements by the governorate counterparts further delaying governorate and district level implementation.
- **Customs clearance issues:** Separate administrations regulating clearance of controlled and non-controlled drugs. To authorize the release of medical supplies, every administration needs separate invoices and packing, adding a huge burden to an overstretched system.
- **Capacity building needs:** Training in health education and infection control at health facility level.



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