

5 June 2018 – Within a week, 2 record-setting tropical cyclones that formed in the Gulf of Aden made landfall, wreaking widespread havoc in Somalia, Oman and Yemen. The World Health Organization is supporting direct response efforts in Somalia and Yemen, while Oman relies on its preparedness developed in partnership with WHO.

On 19 May, cyclone Sagar made landfall in north-western Somaliland with heavy rainfall, strong winds and flash floods. Subsequent flooding displaced nearly 230 000 people, killed at least 34 people, damaged cropland and infrastructure, and killed livestock. In total, over 750 000 people were affected.

A week later, cyclone Mekunu landed in Oman after having devastated the Yemeni island of Socotra, killing at least 10 people on the island. Mekunu made landfall as the strongest storm Oman has ever seen, with category 3 hurricane strength and wind gusts up to 200 km/h. The cyclone dumped nearly 3 years' worth of rain in a single day on Salalah, Oman's third most populous city, killing an additional 6 people and bringing the total death toll for both storms up to 50.

In Yemen and Somalia, the cyclones have added further pressure to the ongoing complex emergencies, prompting additional emergency response from WHO and other international agencies.

Somalia: pressure mounting on a fragile health system

With the added stress of cyclone Sagar on Somalia's already fragile health system, the need for humanitarian health response has grown even more acute in Somalia. Most pressingly, in several regions of Somalia flooding has cut off access to health facilities and posts, sometimes destroying them altogether. In total, 19 health facilities became inaccessible and 2 health posts were destroyed.

Dr Ghulam Popal, WHO Representative for Somalia, said, "Capacity is stretched here in Somalia, but we are doing what we can with the help and resources available, while requesting additional support from our donors. Our staff are working around the clock to make sure the affected Somali people have the best access to health care possible, and that outbreaks and other emerging threats to health are quickly dealt with."

To do so, WHO Somalia is increasing surveillance and monitoring, training additional health workers, and implementing direct health interventions. For example, to keep track of potential outbreaks, WHO activated 578 health facilities that are included in Somalia's Early Warning and Response Network (EWARN). The health facilities monitor and share data on 14 different water and vector-borne diseases, including cholera, measles, and malaria. In addition, WHO staff are leading on coordination, case management, water supply chlorination, and the trucking in of additional clean water, as well as promoting proper hygiene. Finally, WHO staff are addressing severe acute malnutrition, and have airlifted 44.1 tons of essential medical supplies, and are closely monitoring health needs as they evolve.

Yemen: advocating for increased international support

The heaviest rain and flooding in Yemen hit the island of Socotra and southern coasts starting on 19 May. The storm displaced over 1000 households there, destroyed large parts of food stocks, complicated access to clean drinking-water, and damaged health facilities, in addition to killing 10 people at sea and in traffic accidents. The island community also faces an increased risk of waterborne diseases.

WHO Yemen swiftly deployed 2 field coordinators, in addition to the one already on the island. In addition, around 30 metric tons of essential medicines and medical supplies arrived in Socotra Airport on 31 May, including trauma kits, burn dressing kits, various types of antibiotics and intravenous fluids, malaria kits, and surgical supply kits. Additionally, local partners' emergency mobile teams receive WHO's support. On 29 May, the sub-national health cluster coordinator joined a UN mission to Socotra, to assess the damage, needs and ongoing response.

Dr Nevio Zagaria, WHO Representative for Yemen, said, "In addition to the significant damage and loss of life in Socotra, Yemen's mainland was also affected. In both locations we are responding to the best of our abilities. However, Yemen needs more support from donors to withstand emergencies that occur one after the other, all of which increases the already existing pressure on the health system."

Oman: preparedness pays off

When meteorological reports of cyclone Mekunu first emerged in Oman, the Ministry of Health immediately activated its emergency measures as part of the overall national disaster preparedness and response plan. The hospital in Dhofar governorates' Salala, the hardest hit

city, was evacuated, and other hospitals scaled up their preparedness and readiness in anticipation of new patients. Bed capacity, stockpiling of medicine and medical equipment, and trained personnel were all augmented.

Because of Oman's preparedness, its health system was able to absorb the shock of the storm, even in the face of damage to infrastructure and 6 deaths. According to the latest reports 190 people were rescued (90 Omani citizens and 100 residents) in Dhofar Region alone, and first responders took 233 rescue calls, evacuating patients from mountainous areas to the hospital.

The Minister of Health assessed the damage in health institutions in Dhofar, and restoration work is under way – as well as waste removal to prevent disease outbreaks. A number of patients who were evacuated from Salala have been able to return to the hospital.



Prepare, respond, recover

Although the worst of the 2 cyclones' weather has passed, longer term impacts will affect all 3 of these countries' systems and structures, especially in more vulnerable Somalia and Yemen. Recovering fully from the shock of the storms will be a lengthy process, and to support these endeavours, WHO has requested additional support from donors. In addition, the long term work of building countries' capacity and preparedness continues, to support the readiness of countries' health systems for future events – storms, cyclones, and anything else.

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