Public health area
Main issues of concern

Communicable diseases

People living in conflict areas and facing disruptions in safe water and sanitation services are at risk of waterborne diseases such as typhoid fever and cholera. People living in camp settings and areas hosting large numbers of displaced persons are especially at risk.

Vaccine shortages, low vaccination rates and disruption to the cold chain can also lead to increased cases of vaccine-preventable diseases such as polio. Children who have been displaced or have been previous un-vaccinated or under-vaccinated are especially at risk.

Gender

Women and adolescent girls, especially those in fragile or hostile settings, face gender-based marginalization, including sexual violence. These can increase during emergencies, resulting in early pregnancies that further threaten girls' lives.

Migrant health

Displaced populations fleeing conflict usually require emergency and trauma health care, while others with chronic conditions coupled with population movement and overcrowded living conditions among refugees increase the risk of disease outbreaks.

Noncommunicable diseases

Patients already suffering from chronic diseases, such as cardiovascular diseases, kidney disorders, diabetes and cancers prior to an emergency may have severe exacerbations due to the inability to access medications or facilities for treatment.

Persons with disabilities

Persons living with disabilities are they less likely to receive the aid they need during a humanitarian crisis, and are sometimes even turned away from shelters and refugees camps due to a perception that they need “complex medical” services.

Maternal, newborn, child and adolescent health

In crisis settings women and girls often lack access to basic health services, such as family planning, prenatal care, delivery services, immunization and vaccine-preventable diseases, and adolescents need access to education and health care services, including contraception.

Mental health

Programmes for the proper rehabilitation of patients suffering from mental health disorders should be initiated as early as possible. This includes addressing the mental health needs of refugees and displaced persons, and planning for the rehabilitation of patients suffering from mental health disorders who have been displaced due to the stress of rebuilding and resettling in an area that is known to be disaster or war prone.

Nutrition

Acute disasters, whether major with long-term impact or temporary, may highlight or worsen a pre-existing malnutrition crisis. This is especially true for individuals with disabilities, and individuals with chronic illnesses (e.g. patients suffering from tuberculosis).

Trauma and surgical care

Increased numbers of injured patients can face challenges finding trauma care and surgical services as a result of shortages in qualified health staff, medicines, and medical supplies. The availability of referral services may also be limited.

Water Sanitation and Health

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Disrupted water and sanitation systems limit the supply of safe water for populations and health facilities.