

Sudan HealthSector *bulletin*

FLOOD RESPONSE UPDATE | 31 AUGUST 2013



Environmental health officers from WHO and the Ministry of Health monitoring water sources in Sharq Alneel, Khartoum

Photo by WHO/C. Banluta

Situation

According to the Humanitarian Aid Commission (HAC) the number of people affected by flooding has reached 340 000. As of 31 August 2013, 49 localities have been affected in 14 states, adding White Nile State which reported heavy rains that led to property destruction.

Over the last few days, Blue Nile State did not witness heavy rains. Relative stability and improvement have been observed in all affected areas. Some of the affected populations have started returning to their original villages and settlements.

One of the major health concerns during this emergency is the collapse of 54 661 latrines that pose serious risks to public health. The Federal Ministry of Health (FMoH) reported gaps related to water chlorination, water quality testing and environmental sanitation. Around 1 665 water sources out of 2 024 were so far chlorinated. Operational funding for the next two months is considered a gap.

Waste and garbage accumulated over the last two weeks pose another health hazard. To date, 127 out of the targeted 137 garbage collection campaigns have been implemented.

More than half of the identified breeding sites showed presence of larvae which will develop into mature flies in the next few days or weeks, if vector control interventions are not initiated. According to FMoH, 3 734 breeding sites have so far been sprayed and treated.

Health sector response

Khartoum

Affected population — 182 500

- Al-Asifiaa Medical Organization is supporting nine fixed centers and five mobile clinics in Sharq Alneel, Umbada particularly in the villages of Almarabee, Tawidat, BarakaRam Allah, Alnasr, Umdawalban. Preparations are underway to initiate provision of health services through mobile health facilities in Omdurman.
- Islamic Relief Worldwide has briefed that it will receive emergency funds to support distribution of mosquito nets and hygiene kits and conduct hygiene campaign in affected areas in Khartoum.
- Patient Helping Fund (PHF) has two mobile health facilities serving the flood affected population in Khartoum (Karari, Sharq Alneel).
- Albir Waltawasul has deployed 65 volunteers who will take part in sanitation activities in Khartoum.
- AlAsfiaa NGO has 20 volunteers trained in water chlorination and will be available to participate in water chlorination in affected localities of Khartoum state.
- In collaboration with World Vision, Kitra is organizing mobile clinics in Khartoum for two months. Medicines and supplies for the mobile facilities have been identified as a gap, and to help fill the gap, discussions were conducted between Kitra, WHO and UNICEF.
- Sudanese Islamic Medical Association (SIMA) has mobile health facilities serving communities in the localities of Sharq Alneel and Umbada. SIMA is now preparing for additional health facility to cover the Alfateh area of Umbada locality.
- Pancare is running a mobile facility in Sharq Alneel, Khartoum.
- Omdurman Hospital Care has deployed four mobile health clinics in Umbada, Khartoum.
- Global Health Foundation (GHF) has also one mobile facility in Umbada, Khartoum.

Blue Nile

Affected population — 125 010

- Pancare is providing mobile clinic services that include: consultations, dispensing of medicines, laboratory services, nutrition and reproductive mobile clinic services. WHO is providing medicines and supplies to Pancare.
- With support from UNICEF, the State Ministry of Health (SMoH) is conducting nutrition education campaigns, managing malnourished cases and is distributing plumpy nuts to flood affected populations.
- UNFPA supported SMoH with 71 clean delivery kits, as well provided assistance to conduct ante-natal care sessions for pregnant women.
- Several mobile health clinics are running in the flood affected localities in Blue Nile. Services provided by a mobile facility include treatment of simple cases, free medicines, health education, reproductive health, nutrition, and breastfeeding.
- In Bau, Pancare is providing full health package including treatment of cases, free medicines & nutrition services.
- In Damazine, WHO and UNICEF are providing support to SMoH to run health facilities in the villages of Almak Nail, Alzebair, Alsikka Hadid, and Almurbaata. For the village of Althawra, health services are provided by Atibaa Aber Algarat.
- In El Roseires, the medical mission from Medical & Health National Council has provided the needed health support of the population affected by floods in Hai Dar Alsalam, El Roseires Hospital, Hai Geissan, new towns 3 & 4

South Kordofan

Affected population— 6 685

- To provide services to affected populations, 1 200 mosquito nets were provided by UNICEF.
- Emergency medicines and supplies were provided by WHO and UNICEF through MoH to health facilities in Hajer Elamak, Algadisyia and Alba
- WHO is supporting vector control activities in the areas of Hajer Elamak, Algadisyia, as well as Alban Jadeed.

South Darfur

Affected population— 55 000

- American Refugee Committee (ARC) is establishing a temporary medical shelter in Kalma camp to provide health services to the new IDPs arrivals in Kalma camp – sector 8, who are severely affected by the ongoing floods. The new temporary health facility is being constructed to respond to the increasing health services needs for the IDPs in Kalma camp with priority to those affected by the ongoing floods. The medical shelter is estimated to serve 12 000 population, and is funded by USAID/OFDA. Additionally, WHO and UNFPA are supporting ARC's facility.

North Darfur

Affected population— 19 135

- Relief International (RI) is running four mobile clinics in the state, and health staff have been trained on communicable diseases. In addition, RI supported MoH with medicines and supplies to be distributed in affected villages. With support from Islamic Relief Organization, RI will implement flood activities in El Fasher town and rural areas, as well as Zamzam IDP camp for eight months.
- Anhar distributed 100 000 chlorine tabs and 10800 bars soap for 1778 affected households in El Fasher. Anhar received support from WHO and WES.
- Plan Sudan supported mobile media for health promotion targeting affected residential areas.
- The MoH has activated daily reporting of all health facilities across the state to allow proper monitoring of diseases and timely response to any outbreaks. The MoH, with support from UNICEF, conducted workshop on health promotion for 50 community health promoters from EL Fasher and started the 50-days health promotion campaign in El Fasher town. In addition, MoH also conducted water chlorination of water sources in El Fasher, garbage collection, vector control and entomological surveys in collaboration with Malaria Porgamme. WHO is logistically and technically supporting vector control and entomological survey activities in the State.
- Together with MoH-Environmental Health and WES, WHO is supporting water quality and vector control activities. In addition, medicines and supplies including laboratory reagents to cover 30 000 patients for two months were provided to El Fasher Teaching and Maternity Hospitals. After assessing the needs of El Kuma rural hospital, medicines and supplies were immediately transported to the hospital. WHO has also provided health facility in ElMalha with medicines and supplies to cover the needs of flood-affected households.
- UNICEF provided El Fasher Maternity hospital and Abushouk clinic with three primary health (PHC) kits estimated to cover 9 000 patients for month. In Mellit and Sayah, one primary healthcare kit for each area was provided, while two kits were given to Tawilla locality. Each kit is estimated to cover 6 000 population for one month. In El Kuma, one oxygen concentrator was donated.
- UNFPA provided reproductive health kits and commodities i.e. clean delivery kits and infection prevention materials estimated to cover 10 000 patients for three months to El Fasher Maternity Hospital. Additionally, UNFPA supported WES in its hygiene and sanitation campaign. WES received ten cartons of soap for more than 15 000 displaced population in Zamzam IDP camp. While Anhar distributed 60 cartons of soap distributed to affected households.

Gaps

The table below shows details of flood response gaps as identified by partners in the health sector.

Activity	Need	Response to-date	Gap	Funding needed in USD
Water chlorination	Chlorination of 3543 water sources	Chlorination of around 2908 water sources has been on-going since 7 August 2013 Operational funding to sustain this activity for the next two months is not available.	Chlorination of 3 543 water sources for 60 days	US\$ 983,200
Vector control for 48 localities for 60 days (each campaign can possibly spray 50 breeding sites per day)	2 443 campaigns over a period of three months	299 vector control campaigns have been implemented during the last two weeks	Gap is 2 144 campaigns. Fund needed is for 384 campaigns	US\$ 812,333
hygiene promotion (1campaign / week/ locality) for 8 weeks	768 campaigns over a period of three months	183 hygiene promotion campaigns have been implemented during the last two weeks	Gap is 585 campaigns. Support for 384 campaigns is needed.	US\$ 1,399,851
Solid waste management (1 campaign / week/ locality) for 8 weeks	862 campaign over a period of three months	391 campaigns have been implemented during the last two weeks and additional 86 will be implemented in the coming few days by FMOH	Gap is 471 and the priority campaigns are 384 campaigns.	US\$ 946,034
Running cost for 47 emergency clinics for 8 weeks	All affected states need 113 emergency clinics	66 have been covered by MOH	Support for 47 emergency mobile clinics required	US\$ 225,600
Measles campaign in the 48 localities for children under 15 years (8,303,221)				US\$ 3,000,000



Sudan Health Sector

Dr Jamshed Tanoli

Health Sector Coordinator
tanolij@sud.emro.who.int

Dr Nageeb Ibrahim

Health Sector National Coordinator
ibrahimn@sud.emro.who.int

Christina Banluta

Communications Officer
banlutac@sud.emro.who.int

