



SITUATION REPORT FEBRUARY 2020 ISSUE NO.2 Yemen Update



A total of 29 patients, travelled with medical companions to receive the treatment they need abroad through the medical air bridge operation, part of the UN's ongoing humanitarian assistance in Yemen. C: WHO



24.1 MILLION*
IN NEED



14.3 MILLION **
IN ACUTE NEED



69,426 *** CHOLERA
SUSPECTED CASES



19.7 M ****
IN NEED FOR HEALTH CARE

WHO

HIGHLIGHTS



191 ambulances are set to be distributed across Yemen ensuring critical transportation for patients to health facilities and hospitals is readily available and allowing for patients' treatment even in the most remote areas in the country through mobile medical support. C: WHO

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 FEBRUARY	
161,672	MEDICAL CONSULTATIONS

- Yemen currently has no cases of COVID-19, and WHO is scaling up preparedness and response efforts in coordination with health authorities in the country, in the event a case is confirmed.
- On 3 February, UN launched the first medical air bridge flight carrying a group of six ill children followed by a second flight on 8 February of 23 patients and their travel companions from Sana'a to Amman, Jordan for treatment that is not available in the country.
- Humanitarian partners of United Nations agencies, international non-governmental organizations (INGOs) and donors reaffirm commitment to Yemen amid concerns on shrinking operating space in Brussels meeting.
- As conflict rages in Marib, Al Jawf and Sana'a Yemeni governorates, UN calls for protection of civilians as 34 civilians including 26 children and 6 women and were killed and 23 other civilians including 18 children and one woman were injured in Al Jawf Governorate on 15 February.
- WHO and humanitarian partners are scaling up the response of cholera ahead the rainy season in Yemen.

* Yemen HNO 2019
 ** Yemen HNO 2019
 *** Cholera bulletin as of February 2020
 **** Yemen- HRP 2019

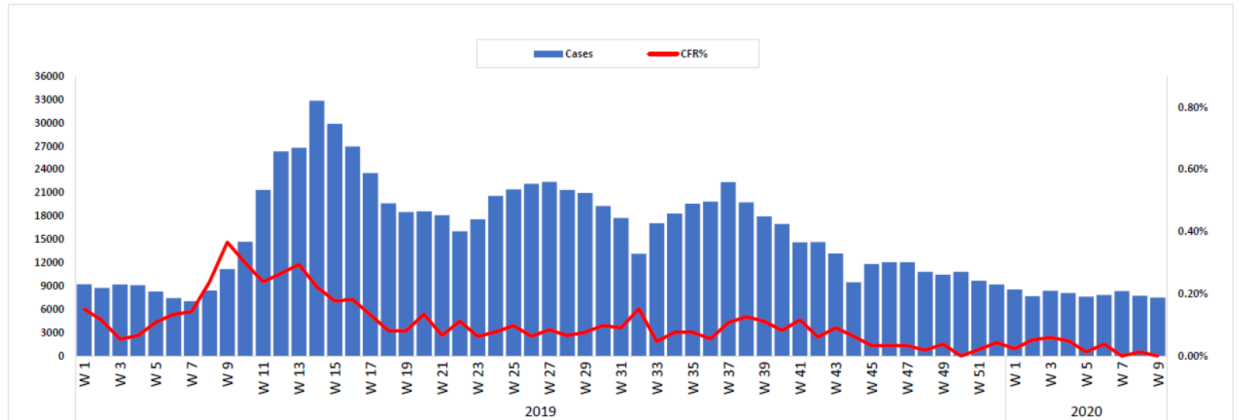
Situation update

- **Medical air bridge launched:** on 3 February, with senior UN leadership in Yemen, including UN Special Envoy, Mr. Martin Griffiths, the UN Humanitarian Coordinator, Ms. Lise Grande and the WHO Representative, Altaf Musani and the cooperation of Jordan, Egypt and Saudi Arabia governments, the first flight of the medical air bridge was launched carrying a group of six chronically ill children and their travel companions from Sana'a to Amman, Jordan for treatment. A second plane carrying 23 sick men, women and children and their companions followed on 8 February. The flights are part of a United Nations/World Health Organization (WHO) medical airbridge operation transporting chronically ill Yemenis who cannot get the treatment they need within country. Many suffer from different types of cancers, kidney disease, congenital anomalies and other conditions that require specialist treatment.
- **Conflict:** As conflict rages in Marib, Al Jawf and Sana'a governorates, UN calls for protection of civilians. Several airstrikes hit the Al Hayjah area in Al Maslub District, Al Jawf Governorate on 15 February killing 34 civilians including 26 children and 6 women and injuring 23 other civilians including 18 children and one woman. On 7 February, the Al Jafra Hospital and Al Saudi Field Hospital were badly damaged by fighting in the Majzer District of Marib Governorate, and a paramedic was also injured. Both facilities, which serve a population of about 15,000 people, were closed for security reasons at the time they were hit. Fighting across the three governorates has caused further displacement, with an estimated 35,000 people having fled their homes between 19 January and 17 February and humanitarian partners continued to respond to needs. Most of those displaced persons are in Marib City and surrounding areas staying in overcrowded public buildings, in displacement sites and with the local community. Nearly 5,000 are scattered in Nihm and Bani Hushaysh Ddistrict in Sana'a Governorate. The actual number of IDPs is likely to be higher as many families are staying with the host families and may not have been included in estimates. Access to Nihm was limited due to security concerns and in parts of Al Jawf, the response is hindered by lack of access, mobile telecommunications and partner capacity.
- **Brussels Meeting, 13 February 2020:** The European Commission and Sweden hosted a Humanitarian Senior Officials meeting on the humanitarian crisis in Yemen in Brussels. All participants at the meeting, who included donors, United Nations agencies and international non-governmental organizations (INGOs), reaffirm commitment to Yemen amid concerns on shrinking operating space. In a joint statement, they called on all parties to actively support the UN led negotiations aimed at a peaceful solution to the crisis, to protect civilians and to comply with International Humanitarian Law. Donors reaffirm their full support for the UN, INGOs and other humanitarian organizations operating in Yemen.
- **COVID-19:** Yemen currently has no cases of COVID-19, and WHO is scaling up preparedness and response efforts in coordination with health authorities in the country, in the event a case is confirmed.
- **Cholera:** Since 1 January 2020 to 29 February 2020, a total of 69,426 suspected cases of cholera, including 19 associated deaths (CFR 0.03%), have been reported. WHO and humanitarian partners are scaling up the response ahead the rainy season in Yemen by implementing capacity building activities, coordinating prevention and preparedness efforts in hotspots, and reviewing best practices and lessons learned from 2019 to improve the effectiveness of the response.

Cholera

- From 1 January to 29 February 2020:** a total of 69,426, suspected cases of cholera, including 19 associated deaths (CFR 0.03%), have been reported. Children under the age of five continue to represent 22.8% of the total number of suspected cases. As of 29 February, 82% (n=273) of the 333 districts in Yemen have reported suspected cholera cases.

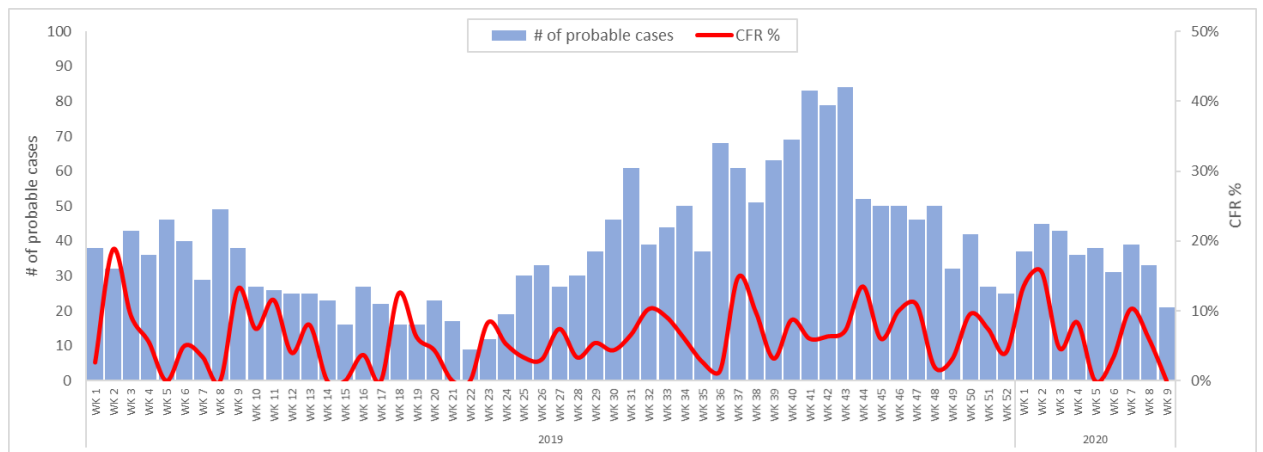
The trend in suspected cases between epidemiological weeks 1, 2019 – 9, 2020



Diphtheria

- From 1 January to 29 February 2020:** a total of 323 probable diphtheria cases, including 24 associated deaths, have been reported. As of 29 Feb, 30% (n=101) of the 333 districts in Yemen have reported suspected diphtheria cases. During last four weeks 64%% were reported from five governorates: Amanat Al Asimah (16%), Sa’ada (16%), Almokala (13%), Abyan (10%) and Hajjah (9%).

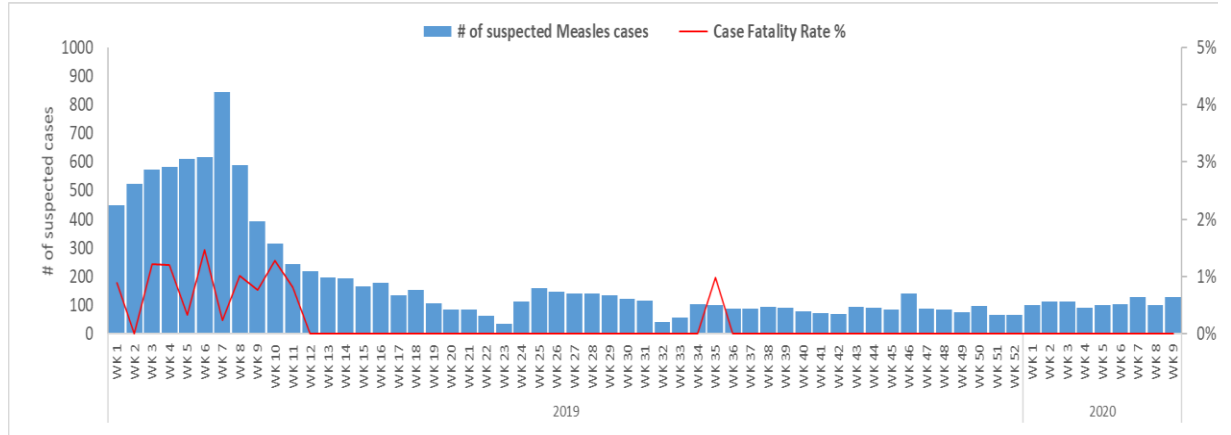
The trend in probable cases between epidemiological weeks 1, 2019 to 9, 2020



Measles

- From 1 January to 29 February 2020:** a total of 983 suspected measles cases have been reported, without associated deaths. Within the last 4 epidemiological weeks, 55% of suspected cases were reported from four governorates: Amanat Al Asimah (22%), Aden (19%), Ibb (7%) and Hajjah (7%). Children under the age of five represent 68% of the total suspected cases.

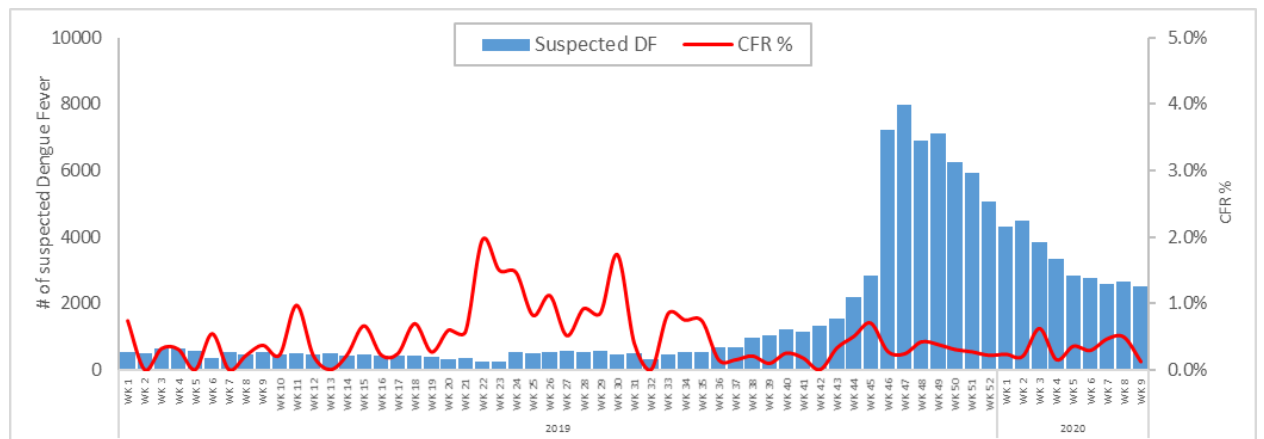
The trend in suspected cases between epidemiological weeks 1,2019 -9,2020



Dengue Fever

- From 1 January to 29 February 2020:** there have been 29,283 suspected dengue cases reported including 94 associated deaths (CFR 0.3%). Within the last four weeks, 153 districts have reported suspected cases, with 87% of these being reported from three governorates Al Hodeida (72%), Aden (10%) and Taizz (5%). The highest proportion of cases is being reported from districts where access is challenging due to insecurity. Overall, the trend is declining since the cases peaked in week 47 of last year.

The trend in suspected cases between epidemiological weeks 1, 2020 – 9, 2020



Trauma Care and General Emergency Services

- **Incentives Payments to keep health system functioning:** WHO supports 58 surgical teams in 19 governorates and 52 health facility based primary health care teams in 16 governorates with incentives payment, in addition to 1 Emergency Mobile Medical Team (EMMT) in Hodeida governorate.
- **Medical and Surgical consultations:** in February, health facilities based primary health care teams performed 133,118 consultations, the Surgical teams performed 27,341 surgeries, while the supported EMMT performed 1,213 consultations.
- **Fuel provision to health facilities:** WHO continues supporting the targeted health facilities with fuel provision to ensure functionality and continuous provision of life-saving health care services. A quantity of 352,253 liters of Fuel were delivered to 90 health facilities across the country.

Reproductive Maternal, Neonatal, Child Health (RMNCH) Program

- A technical meeting on strengthening new-borns and child health priority interventions for Yemen was conducted in Cairo, 9 – 12 February 2020.
- The meeting brought together approximately 30 participants with diverse backgrounds and expertise with inclusion of high-level officials of the Ministry of Health and Population in Yemen, representatives of partner organizations such as UNICEF, as well as WHO staff members from the regional and country offices.
- In addition to the discussion of child and neonatal health care services at the three service levels, the primary health care, the secondary health care and the community care with challenges and priorities, the team also discussed the ICCM component (Integrated Community Case Management) program in Yemen. The MoH identified priority areas for improving child health and accordingly the next steps were agreed upon to take the recommendations forward.

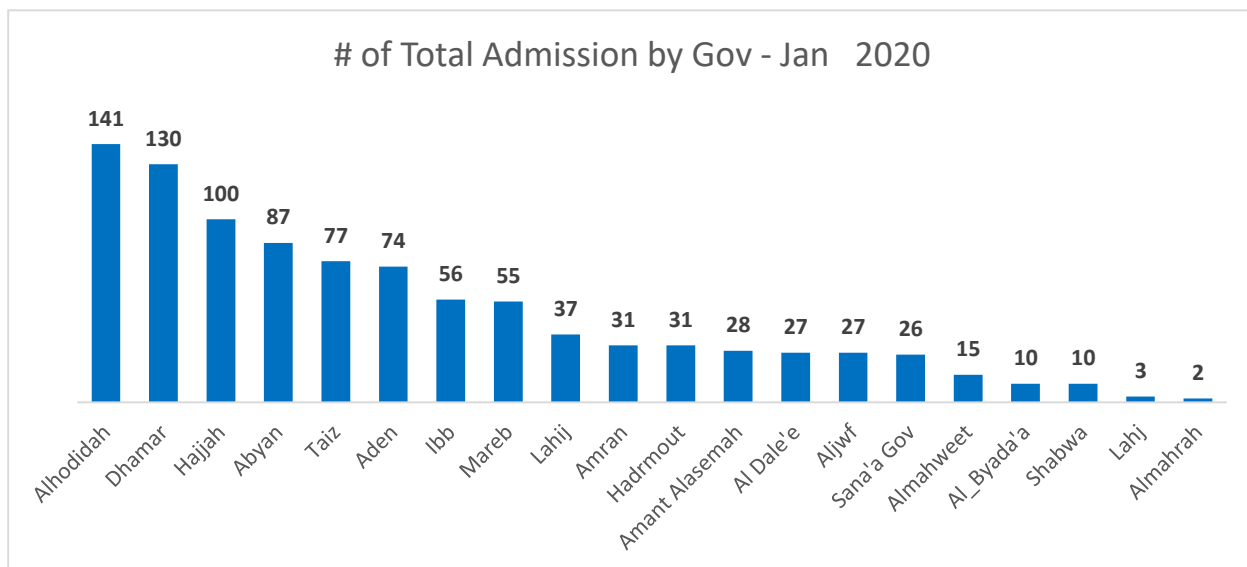
Non-Communicable Diseases

- WHO distributed 18,336 Sodium Chloride 9% IV infusion 500 ml to 13 dialysis centers in 7 governorates (Aden, Hadramout, Taiz, Ma'rib, Shabowa, Aldal'a, and Almahrah). This quantity meets the needs of 1400 renal failure patients for one month.
- Also, WHO distributed 9,180 ampules Calcium Gluconate 10 ml to 8 dialysis centers in 5 governorates (Hadramout, Taiz, Ma'rib, Shabowa, and Almahrah). Responding to the need of 1000 renal failure patients for about 3 months.

Nutrition (January)

- **Children Admitted:** In January 2020, a total of 967 children were admitted to 75 WHO-supported Therapeutic Feeding Centers (TFCs) for treatment of Severe Acute Malnutrition (SAM) with medical complications. The cure rate was noted at 90.4 % (n=813) with a case fatality ratio of 2.6% (n=23).

- **Capacity Building:** In addition to the case-management in TFCs, preventive activities were conducted represented by Infant and Young Child Feeding (IYCF) counselling. Also, 967 mothers were counselled on IYCF best practices across all TFCs. Each month an average of 20 counselling sessions/ TFCs are conducted for caregivers accompanying their children in admission, with average of 5 sessions per mother per admission period.



- **Nutrition Surveillance System:** a total of 21,746 children under five (0-59 months) were screened at the 72 nutrition surveillance reporting sentinel sites in January 2020. The 72 sites currently cover 13 Governorates. The performance of nutritional surveillance sites has improved across the 72 sentinel sites in priority districts between November 2018 and Jan 2020. This has led to better-quality of screening for all forms of malnutrition. Overall, a steady increase in the number of children screened each month was observed, which may suggest progresses in service utilization.

Partnership/
Health Cluster

- **Health cluster coordination meetings:** In February, Yemen health cluster on National and Subnational Level, conducted a total of 8 cluster coordination meetings as follows, in which the cluster discussed many epidemiological / health interventions situation, Discuss the scale up of health interventions, health facilities support with medication & management protocols as well as the main challenges facing partners in the field.
 - 2 National Health Cluster coordination meetings
 - 1 Subnational health cluster coordination meetings in Ibb/Taizz Hub
 - 1 Subnational health cluster coordination meetings in Sa'da Hub
 - 1 Health Cluster coordination meeting in AL Hudaydah
 - 1 Joint Health and Nutrition meeting in Sana'a
 - 2 Health Cluster coordination meeting in Aden in which the cluster presented a situation over view on the latest epidemiological situation regarding cholera, measles, Dengue fever, SARI and the ConVid19 updates and taken measurements in preparedness for the COVID19.

- **Technical working groups and bi-lateral meetings:** Yemen Health cluster have coordinated a total number of 11 meetings for the technical working groups such as RH, MHPSS, ICCM, HCT and physical support team. Moreover, the health cluster on national and subnational level have conducted a total of 31 bi-lateral meetings with the partners and authorities to discuss partner's interventions, response, Gaps, needs and challenges.
- **Field Visits:** cluster coordinators have conducted a total of 13 field visit to monitor and assist the health partners' response in the health facilities as well evaluating the quality of services provided in the health Facilities. Sana'a Subnational cluster have conducted 2 filed visits for the Quality Task Team to discuss and agree on the pilot quality assessment plan.
- **Others:** Health Cluster Subnational Health cluster coordinators have participated in developing the distribution plans of the requested Kits, biweekly RCT Meetings Subnational Cluster WASH, Nutrition and education in the Hubs and ASMT meetings.

Challenges, concerns and needs (as reported by Health Cluster partners

- **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.



Contacts:

Altat Musani, WHO Representative for Yemen: Musania@who.int
 Roy Cosico, Health Emergency Lead for WHO Yemen: cosicor@who.int
 Muneera Mahdli, communications WHO Yemen: almahdlim@who.int