

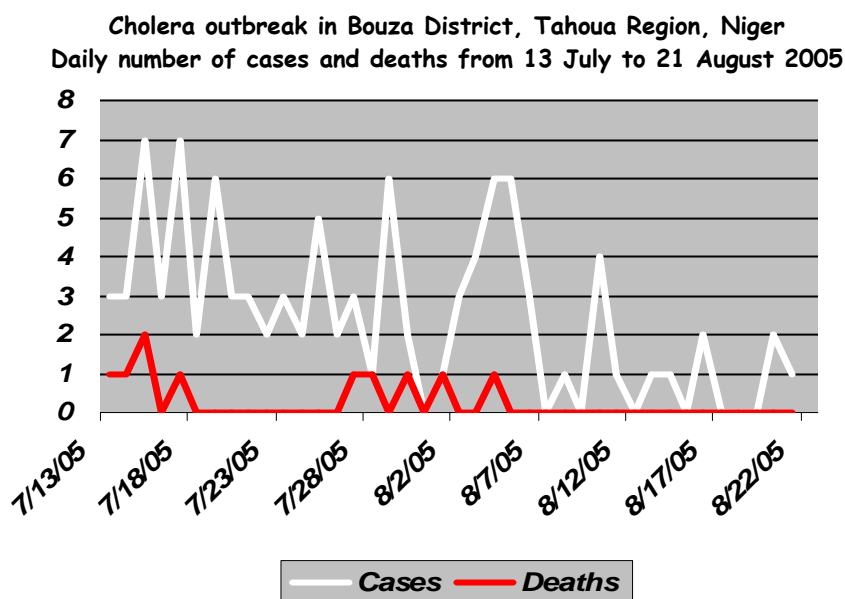
WHO Emergency Health Program for the Food crises in Niger

Situation Report # 2

15 - 22 August 2005

I. Highlights

- During the period 13 July - 21 August 2005, 99 cases of cholera including 10 deaths (case fatality rate 10.1%) have been reported in the District of Bouza, Tahoua Region. No deaths have been reported since the 4th of August. The high case fatality rate observed during the second half of June, could suggest gaps in the early detection of the disease and in proper management of cases.
- A WHO mission assessed the area and delivered oral rehydration salts, IV fluids and antibiotics for the treatment of the most severe cases. Hypochlorite was also delivered to disinfect water sources.
- Cholera kits - designed to treat 100 severe cases - were prepositioned in Tillabery, Niamey and Dosso regions as an outbreak preparedness measure. WHO guidelines on correct management of cases were also distributed. The distribution will continue during the week with the goal of having kits prepositioned in each Region of Niger.



- Second interagency health coordination meeting in Niamey co-chaired with the General Director of the Ministry of Public Health
- Sub-office opened within the premises of the Direction Regionale de la Santé in Maradi. The sub office is staffed with a mobile international team composed by one nutritionist, one epidemiologist and one communication officer
- No contribution received through the UN flash appeal. The entire operation is funded by emergency revolving funds. The shortfall is USD 1.3 million.

II. The WHO emergency program

Axe 1: Enhance capacities to treat severe malnutrition at health centre levels by ensuring that staff receives focused training and that therapeutic food supplies are available.

- A six-day workshop on the management of severe malnutrition started in Tillabery on 22 August. Twenty-four doctors and nurses working in the Integrated Health Centres (CSI) will be trained with a training-for-trainers approach. The workshop is a joint UNICEF/WHO action implemented in agreement with the Ministry of Public Health and is the first of a series of similar training initiatives that will be implemented during the first half of September.
- WHO with UNICEF and the National Bureau of Nutrition is assessing equipment and rehabilitation needs of the existing centres for the treatment of malnutrition (Centre de recuperation nutritionnelle intensif et ambulatories or CRENA/CRENI).
- A training module on nutritional surveillance for community health workers is under preparation with the aim of promoting community-based surveillance and enhancing the capacity for early detection and timely treatment of malnutrition cases before they reach a critical stage.

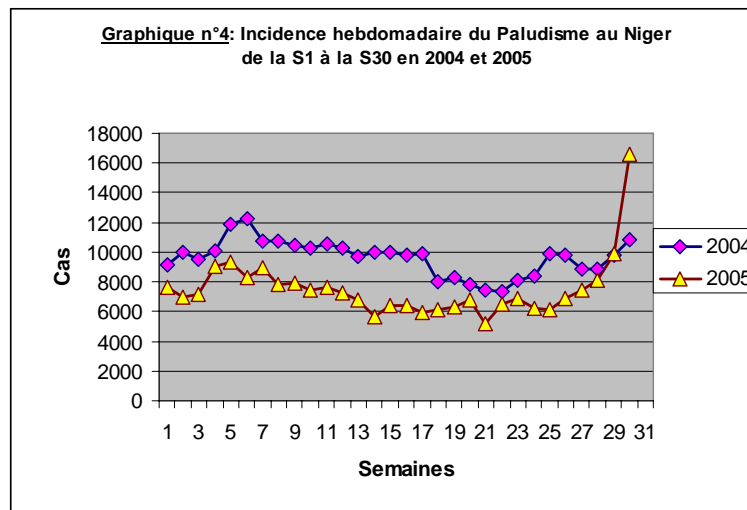
Axe 2 : Strengthen health sector coordination and information management to ensure better targeting and address needs in under-serviced areas

- Second interagency health coordination meeting in Niamey on 17 August. The meeting is co-chaired by the WHO Country Representative and the Director General of the Ministry of Public Health. More than 40 people representing 22 organizations including donors, UN agencies and NGOs were present. The technical focus of the meeting was on malaria outbreak preparedness. The coordinator of the national program for malaria control provided an overview of the current situation and a description of the priority needs. During the meeting, there were brief reports on the activities of the working groups on surveillance of communicable disease (WHO), nutrition (UNICEF) and, health system financing (UNFPA). MSF/Switzerland, France and Belgium and Islamic Relief provided updates on their activities. Meeting minutes and presentation will be disseminated. Next meeting on 25 August in WHO crisis room.
- WHO is regularly attending the weekly meeting of the Interministerial Crisis Group
- WHO communication officer attended the 2nd meeting of the information and communication group chaired by OCHA. A humanitarian Information Centre (HIC) will be set up by OCHA soon.
- The newsletter "Health Action in Niger" has been published

Axe 3 : Early identification and control of suspected outbreaks supporting health partners in surveillance systems and strengthening preparedness for epidemic prone diseases through provision of technical expertise and reposition of medical kits

- WHO, the office of the national health information system (Système national d'information sanitaire, SNIS) and the project "PASEI 2" promoted by the Canadian International Development Agency, have established a working group finalized to the production of a national weekly epidemiological bulletin. The first issue of the bulletin is foreseen within 10 days
- WHO participated in an evaluation exercise of the existing national system for the surveillance of communicable diseases. The evaluation exercise promoted by the Ministry of Public Health recognized the good performance of the system. 100% of completeness and 85% of timeliness in transmitting data from the reporting sites were quoted. However, important gaps were identified in terms of shortage of communication means, lack of information feedback to the peripheral level and shortage of drugs and means for timely outbreak response. Written conclusions will be available next week.
- Order placed for 13 HF radios. The radio, equipped with solar panels, will be distributed to 13 Integrated Health Centres to improve data transmission.

- Malaria, of which 90-95% is due to *P. falciparum*, is responsible for 30% of outpatient consultations and 50% of deaths in children under 5 years with an average of 770,000 cases and 2,000 deaths every year. The majority of the cases and deaths are concentrated during the rainy season from the second half of August until the end of October. Epidemiological data show an increasing number of cases from week 30 which coincides with the start of the rainy season and a tendency to an early outbreak (see graph below). According to data from the national program for malaria control, 585,200 cases are expected from now until the end of the year including 24,000 severe cases.
- The combination of malnutrition and malaria could result in high mortality rates overall in severely malnourished children because their natural defences are already compromised and severe malnutrition often masks the symptoms and signs of malaria provoking crucial delay in diagnosis and treatment.
- A race against time is ongoing to reduce the effects of this deadly combination. The Ministry of Public Health, donors, UN agencies and NGOs are quickly assessing needs and providing initial responses. Procurement and distribution of Insecticide Treated Bed nets, drugs and laboratory tests are ongoing. A WHO mission with experts from the Roll Back Malaria program is expected this week.



Source : DSNIS/MSP/LCE

Axe 4 : Support the development of an emergency policy and strategy to improve reliability of access to and affordability of essential health care

- The meetings between the representatives from the MoPH, the SNIS and the WHO Representative to finalize the strategic orientation document (DOS) for the health response to the food crisis are over and the document has been presented to the MoPH. The DOS will be presented to the Ministers' Council in September.
- A working group for the identification of more equitable health finance mechanisms during the crisis has been established and is meeting on daily bases. The group is chaired by UNFPA and is composed by WHO, UNICEF, the World Bank, the Belgian Cooperation, the French Cooperation, OCHA, a representative from the NGOs, the inter-ministerial Food Crisis Group (CCA) and the Ministry of Public Health. The group works on the implementation of a solidarity fund that would not alter the existing users' fee system.
- The group agreed on the modalities for the transfer of funds, the spheres of expenditure, the replenishment of funds, the long-term perspectives, the financing strategies for health services and the reinforcement of existing health structures in the fight against malnutrition.
- The group aims to launch the solidarity fund before the end of August. A presentation of the proposal will be made Monday 22/8 before the international community. A workshop with representatives of the 19 affected districts will take place as soon as government approval is re-

ceived. At this workshop, the modalities of the use of the fund will be discussed so as to safeguard the mechanisms established to manage the crisis and the capacities that were developed at the level of the local health and management committees.

III. Operations

Staff

- Three international experts in Nutrition, Health system analysis and Communication joined the Task Force

Supply

- 8 cholera kits arrived. Three of them have been already distributed. Distribution finalized next week with each region receiving one