



WORLD HEALTH ORGANIZATION
NOTE FOR THE PRESS



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FLOODING EMERGENCY IN THE HORN OF AFRICA: MAJOR HEALTH RISKS

Nairobi/Geneva - The World Health Organization (WHO) continues to be deeply concerned by the health situation of people living in the flood affected areas in the Horn of Africa. Since October, unusually heavy rains have caused major flooding in Ethiopia, Kenya and Somalia. The flooding is expected to continue, putting people's health at major risk. A combination of displacement, living in crowding conditions, lack of clean, safe water and the destruction of sanitation systems, is putting between 1.5 to 1.8 million people at risk of infectious diseases, such as cholera, measles, malaria as well as nutrition deficiencies.

"The floods are expected to continue until at least the end of December if not into early next year. We are already experiencing a serious situation where people are dying from diseases related to the water and sanitation situation. Malaria will become a very serious problem in the weeks to come" said Dr David Okello, Representative of WHO in Kenya.

The three countries share similar health profiles. In Ethiopia, some 40 000 cases of acute watery diarrhoea have been reported, including 403 deaths. In Somalia, one hundred cases have occurred, particularly in children under five years of age. Insecurity in Somalia is escalating and people fleeing the conflict are seeking refuge in Kenya. This will sharply increase the number of people living in camps and increase the potential for health risks.

The water and sanitation systems are disrupted and normal water sources have become unsafe for drinking due to the impact of flood waters and other contaminants. "In one of the worst affected regions in Kenya, the Garrissa district, people were forced to get water from contaminated sources as the two liters per person that were available did not meet their basic needs. The recommended quantity is ten times more," said Dr Michelle Gayer, a WHO communicable diseases expert, after a visit to the area. "Many roads are cut off, some people have reached temporary camps while others are stuck in their homes without enough food or medical care."

The number of medical consultations in Garrissa have doubled and even tripled over the last week compared to the pre-flood period. The three leading reasons for consultations are diarrhoeal diseases, malaria and acute respiratory infections. The cases have increased 2-3 fold compared to before the flooding. Outbreaks of cholera, with deaths, have been reported and can be expected to continue in the near future.

The region is known to be endemic for many health problems, including cholera, diarrhea, malaria, shigellosis, Rift Valley fever, measles, meningitis and malnutrition. Many health indicators are worryingly low, including vaccination coverage rates.

Access to health centres is hampered by the damage caused to roads and other infrastructure. Many health workers cannot report to work and patients cannot get to health centres. This leads to the interruption of routine health care, especially for children, the elderly, pregnant women and people suffering from chronic and communicable conditions. Due to previous droughts, people in the region have experienced severe food shortages and high rates of malnutrition. People's immunity is weakened, making them more vulnerable to diseases.

"The WHO priorities in the region are to improve the water and sanitation systems, the surveillance of disease outbreaks, the running of health services and food and nutrition. We will also institute indoor residual spraying to fight malaria, and immunize children in the camps at least against measles, one of the top child killers," said Dr Okello. WHO is fully engaged with the Government and partners to provide its assistance to people in need.

"WHO is ensuring a stockpile of essential drugs for the treatment of waterborne diseases and equipment for laboratories and others. WHO is also helping the Ministry of Health in controlling the water quality," he added.

A key WHO concern is the major gap in outbreak preparedness. The region lacks laboratory capacity for confirmation of epidemic-prone diseases and stockpiling of emergency medicines and equipment. No isolation facilities have been identified while the health facilities have poor infection control.

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