

Yemen: WFP forced to cut Food Rations in Half

The World Food Programme (WFP) has been forced to reduce food rations to internally displaced persons (IDPs) in Yemen by 50 percent due to lack of funding. The reduction will take effect at the beginning of May and will allow the limited food stocks to last through the end of August. The cut will affect all IDPs in the country who will receive only 1,040 kcal per person per day, rather than the 2,100 kcal required for an active and healthy life.

WFP in Yemen is facing a shortfall of 75 percent of its requirements for all its operations in 2010. Out of a planned budget of US\$103 million, \$78 million still needs to be resourced.

WFP's decision, taken in consultation with the Government of Yemen and partner NGO Islamic Relief, was to avoid an absolute stop of assistance after June. Planned nutrition support to 50,000 IDP children under 5 years of age will be maintained until the end of August.

"The regular assistance by WFP and partners has contributed to stabilize the levels of acute malnutrition and morbidity among the IDP population, particularly in the camps. However, this ration cut and the subsequent closure of the operation (unless additional support is received) will reverse this progress and lead to a major humanitarian crisis," WFP said in a statement.

Since the outbreak of the sixth round of fighting last year and up till 21 April 2010, WFP has reached 269,000 persons with food in Hajjah, Sa'ada, Al Jawf, Sana'a and Amran governorates. See also <http://ochaonline.un.org/yemen>

Few internally displaced Persons in Yemen ready to return

More than two months after the ceasefire between the Government and armed groups was announced in Yemen, internally displaced persons (IDPs) remain reluctant to return to their areas of origin citing risk of renewed conflict and land mines.

in this issue

- P.2** Kyrgyzstan receives CERF Funding
- P.2** \$555 Million to fend off Floods in Morocco
- P.3** Bad Weather hampers Response in Afghanistan
- P.4** One Year of Pandemic Influenza
- P.5** Disaster Management Training in Saudi Arabia



Health post in Mazrak camp I in Yemen. Funding levels for the response to internal displacement is critically low. Photo: OCHA ROMENACA

The Government estimates that there are 350,000 displaced people throughout the conflict-affected governorates of Hajjah, Amran, Sa'ada, Al-Jawf and Sana'a. In Sa'ada Governorate alone there are an estimated 100,000 displaced.

Some 7,000 of the uprooted civilians sheltering in camps at Al Mazraq in Hajjah governorate have visited their homes in the north to assess damage to their farms and property, but the UN High Commissioner for Refugees (UNHCR) says that only one quarter have decided to stay in their home villages. There is therefore a need to continue to provide humanitarian assistance to IDPs in displacement areas both inside and outside the IDP camps.

Humanitarian organizations have an operational plan outlining intervention in Sa'ada Governorate and parts of Amran and Al-Jawf Governorates, but access has not been granted yet with the exception of Sa'ada City. Limited assistance is being provided in Sa'ada City and surrounding areas as well as in Baqim District on the border with the Kingdom of Saudi Arabia.



The Humanitarian Country Team is calling for unimpeded access to all areas, but the Government is concerned that it cannot guarantee the security of humanitarian partners in many districts of Sa'ada Governorate. Furthermore, the presence of landmines remains a major risk.

Lack of funding for humanitarian relief work remains a major concern in Yemen. The 2010 Yemen Humanitarian Response Plan (YHRP) is only 20 percent funded (US\$ 36 million out of \$177 million) and agencies in all sectors have significantly reduced their activities.

Humanitarian Country Team in Kyrgyzstan receives CERF Funding

President Bakiyev of Kyrgyzstan was ousted following violent demonstrations in the beginning of April and went into exile while an interim Government was instated. At the end of the month, the situation had calmed down considerably but some humanitarian implications prevail and the Humanitarian Country Team (HCT) in Kyrgyzstan has been closely monitoring the situation.

Responding to requests for assistance from the interim Government, the HCT in Kyrgyzstan will receive close to US\$1 million from the Central Emergency Response Fund (CERF) to meet immediate life-saving and time-critical needs arising from the crisis in the country.

The health sector of the HCT will support some 500 victims of violence with medical supplies and medicines. The protection sector will provide food support and sanitary items for 900 refugees and asylum seekers, while the food sector will supply emergency supplementary food for some 7,000 beneficiaries in residential institutions and fertilizers for 8,000 vulnerable farming households.

There may be a need to scale up ongoing food assistance in Kyrgyzstan because of the impact the instability and subsequent border closures have had on the planting season. The food security sector is also concerned about the effect of price increases on the most vulnerable and is closely monitoring the price of food and other basic commodities in the market. The possibilities for increasing the size of rations and the number of beneficiaries are being explored.

In response to a polio outbreak in neighbouring Tajikistan, a polio immunization campaign has begun in Kyrgyzstan led by the Ministry of Health. There is particular concern about unregistered internal migrants, stateless people, and the children of recently arrived refugees and asylum seekers who may not have been immunized. Sufficient polio vaccines

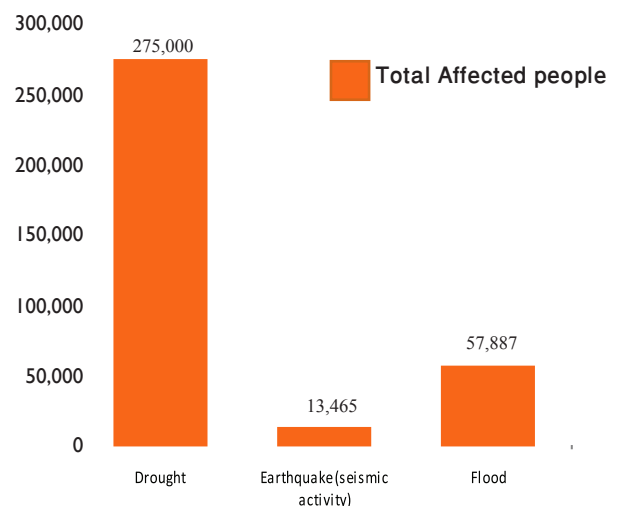
are available in Kyrgyzstan for this. Funding is however still being sought for the procurement of vaccines for general immunization.

The protection group of the HCT remains concerned about inter-ethnic tension, land grabs, the proliferation of weapons (particularly in Talas Province and Bishkek) and increases in crime levels. There are also ongoing discussions on the possibility to provide psycho-social support to children traumatized by violence.

\$555 Million to fend off Floods in Morocco in 2010

The Government of Morocco has embarked on a series of construction projects in areas vulnerable to floods under the multi-year Disaster Assistance Plan and Protection of Areas prone to Flooding. The plan has an overall budget of 25 billion dirham (almost US\$3 billion) and runs up to 2020.

Based on a study prepared by the State Secretary of Water and Environment, 400 sites were identified as being vulnerable to floods. The study prioritized 50 sites which will cost 6 million dirhams (\$716 million) to make safe from flooding. This year the share of the disaster assistance plan costs 4.67 billion dirhams (\$555 million), of which more than a third were allocated during the month of April 2010.



Over the past decade there has been 12 floods, one earthquake and one drought in Morocco.

The Government aims at finding sustainable solutions to prevent flooding through dam constructing projects. The Western Plateau of the country will receive the largest tranche of the budget for the second consecutive year: two large dams in Sebu and in the downstream of Wadi Beht, as well as two medium-sized dams which will be launched in 2010.



Twenty-five smaller projects are also planned between April and the end of the year. Prevention measures will also focus on rehabilitation and dredging of trenches, early warning and monitoring mechanisms, including the extension of meteorological radar systems.

The second aspect of the programme comprises the rehabilitation of infrastructure such as roads and bridges damaged by previous floods and the restoration of an emergency stock of non-food items. It has allocated funds to assist communities affected by floods with non-food items, food, agricultural inputs and compensation for flood-damaged houses.

Over the past decade (1999-2010) floods were the most recurrent natural disaster event that affected the country, but Morocco is also highly prone to droughts and earthquakes. While drought and earthquakes accounted for most of the financial loss and number of the affected people, floods accounted for most of the loss of human life.

International donors such as the Swiss Development Cooperation (SDC), the Spanish International Cooperation Agency (AECI) and the World Bank have been involved in initiatives in support of national disaster preparedness and risk reduction in Morocco. For more data on the effects of natural disasters in Morocco and globally see: www.emdat.be

Bad Weather hampers Response to Earthquake in Afghanistan



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

5.3 on the Richter scale at a depth of 10km hit Samangan province

An earthquake measuring 5.3 on the Richter scale at a depth of 10km hit Samangan province in northern Afghanistan in the early morning of 19 April. The earthquake and several aftershocks affected the districts of Dara-i-Sufi Payin, Ruyi du Ab and Dara-i-Sufi Bala, where 100 percent of buildings reportedly were destroyed. The total estimated population in the three districts is 254,000.

The quake killed seven people but the number of injuries was low, according to reports from local authorities. Some 3,000 homes and public buildings such as schools and mosques were destroyed and heavy rains further damaged many buildings. The rain and heavy snowfall also made it difficult to reach the affected areas. According to responders in the area, one of the immediate needs was mobile medical teams and supplies to attend to the injured. At the time of the quake, there were no ambulances in any of the three districts.

There was no safe drinking water in the affected districts immediately following the quake. While water is plentiful, many of the wells were contaminated and people began using the muddy river water for drinking, increasing the risk of water borne diseases. UNICEF responded by providing water bladders and trucking fresh water.

WFP sent a food convoy carrying wheat, flour, pulses, oil and salt to the affected areas while non-food items and tarpaulins were provided by other UN agencies and international NGOs. Local mosques served as distribution points in villages.

The OCHA sub-office in Mazar-i-Sharif coordinated the humanitarian response in support of the local government.

Campaign for Immunization in Iraq

Iraq carried out its first National Vaccination Week - a campaign to inform about the value of immunization and further improve access to vaccination in Iraq - from 24 to 30 April.

Iraq maintains a polio-free status since 2000, and four in five children receive all recommended vaccinations by the age of 12 months. Coverage of infant measles vaccination improved from 70 percent in 2007 to above 90 percent in 2009, and smallpox was eradicated in 1978.

The mass communication campaign focused on immunization as an investment for a better life and the responsibility and role of the family and local communities in providing protection against diseases.



FOCUS: One turbulent Year of Pandemic Influenza

One year ago, a few villagers in rural Mexico began to cough, sneeze and get the fever. Within weeks, Casualties start to appear in other countries. Scientists were at first puzzled by this new type of influenza that spread rapidly and with fatal consequences. It was later to be known as H1N1.

As the H1N1 pandemic swept the world, the avian influenza strain (H5N1) remained endemic in many countries, particularly in Asia. Fortunately, neither has resulted in massive human mortality, and today the spread of the disease has slowed down. Public health officials, however, are still very concerned about H1N1.



Avian Flu remains endemic in many Asian countries such as Bangladesh. Photo from Dhaka in 2008 by IRIN

Most countries in the Middle East and North Africa region have national pandemic preparedness plans with a principal focus on planning the response in the health sector, led by Ministries of Health and Agriculture. While this remains a critical priority, international organizations have advocated and supported response plans that goes beyond health and includes a multitude of other sectors.

This is significant as a pandemic will affect many aspects of a society including security, transport, education, employment and social services in addition to the health sector. Many countries in the region are already vulnerable due to factors such as water scarcity, drought and desertification, food insecurity and simmering political and social unrest, and a pandemic outbreak can overwhelm authorities and be devastating for the whole of society.

In 2010 - in line with directions being adopted by the international community - governments and their international partners have been encouraged by the UN to increasingly shift focus from just influenza preparedness and towards a stronger multi-sector preparedness approach for a range of emerging infectious diseases with pandemic potential. The integration of national pandemic plans into existing disaster management structures -

which most plans today hardly make reference to - is essential to ensure efficiency and sustainability of preparedness in the region.

At the 1-year mark of the outbreak of H1N1, progress has been made and influenza-related threats to public health are far more widely appreciated now than during the 2005 avian flu outbreak. However, the involvement of all sectors in the planning remains a key challenge. To draw lessons from the pandemic influenza experience, WHO will shortly begin a review process to examine preparedness and response to the current pandemic. This process will be spearheaded by an independent group of experts who will identify lessons learned and what countries and organizations need to do to improve preparedness and response to future pandemics and other large scale global public health threats.

Over 1,000 H1N1 Deaths in the MENACA Region

H1N1 was first discovered in a small Mexican town in April 2009. It quickly spread across the United States, Europe, Asia, Africa, the Middle East and Central and South America. The World Health Organization (WHO) declared it a pandemic on 11 June 2009. As of 18 April 2010, more than 214 countries and overseas territories and communities have reported laboratory confirmed cases of pandemic influenza H1N1. Of the 17,853 deaths reported, 1,019 (5.7%) have occurred in the MENACA region.

Syria has most deaths compared to the number of reported cases with a case fatality rate of more than 25 percent. Pakistan has a fatality rate of 9 percent and the United Arab Emirates over 7 percent. Iran, Yemen and Afghanistan all have a fatality rate below 4 percent. Saudi Arabia has the highest number of confirmed laboratory cases comprising 25 percent of all cases in the region, followed by Kuwait, Egypt, and Oman.

Cooperation is Key to fighting Pandemics

At the Hanoi International Ministerial Conference on Animal and Pandemic Influenza on 20-21 April 2010, over 70 countries agreed on the way forward in responding to avian influenza, preparing for pandemics and tackling new emerging infectious diseases.

Drawing on the lessons from the responses to H5N1 avian influenza and H1N1 pandemic influenza, the Hanoi Declaration recognizes the necessity for continued and strengthened international and regional cooperation against diseases for which there may be no human immunity and which can cross borders in a matter of hours or days. Read the declaration here: <http://www.imcapi-hanoi-2010.org/documents/en/>



Disaster Management Training in Saudi Arabia



The training drew on the expertise of a wide range of organizations and news media (from left to right): Office for the Coordination of Humanitarian Affairs (OCHA), Integrated Regional Information Network (IRIN), Saudi media, Ataa Representative, the International Committee of the Red Cross, and Qatar Charity Representative.

Disaster preparedness, disaster risk reduction, volunteers in disaster response and the role of media were the main topics at the OCHA-supported Fourth Voluntary Leaders Forum and disaster management training from 18 to 21 April in Jeddah, Kingdom of Saudi Arabia.

The forum and training was divided between two days focusing on volunteerism and three days dedicated to disaster management. It was carried out under the auspices of H.E. Minister of Social Affairs Dr. Yusuf Bin Ahmed 'Uthaymeen.

At the training, the participants agreed that community participation in mapping hazards and vulnerabilities is the best preparedness measure to mitigate disasters and reduce risks, a view that was echoed by the training facilitators who advocated an approach based on Community Based Disaster Management CBDM as the best preparation to combat disasters.

Saudi Arabia is prone to various disasters including earthquakes, small-scale floods and pandemics. In the last year, Saudi Arabia has been struck by two floods and an earthquake.

Upcoming Events:

- 5 May: Syria - Training on principals of humanitarian reporting.
- 2-3 May: Libya - Influenza Pandemic Workshop and Simulation Exercise
- 3-7 May: Syria – Discussion of the requirements for a Community-Based Disaster Response Management Training
- 17-20 May: Lebanon – Twenty-sixth Ministerial Session
- 23-27 May: oPt - Emergency Simulation exercise
- 24-28 May: Geneva - Emergency Preparedness Section (EPS) Forum

For more information, please contact:

Jens Laerke, OCHA Cairo, 0020195 558 662,

laerke@un.org