

Health Sector Update

OCTOBER 2015

SECTOR OVERVIEW

Populations affected by natural disasters and complex emergencies experience diverse public health challenges, often complicated by displacement and the disruption of basic services. USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA) remains at the forefront of the humanitarian community's efforts to mitigate mortality and morbidity during crises by supporting a wide range of health interventions. USAID/OFDA-supported initiatives include life-saving medical assistance, immunization campaigns, disease surveillance systems, vector-control activities, and capacity-building trainings for local health workers. Recognizing the inextricable link between health and other core humanitarian sectors, particularly nutrition and water, sanitation, and hygiene, USAID/OFDA supports integrated programs that simultaneously address multiple determinants of health in emergencies, such as access to health facilities, food security, and the availability of safe drinking water. In Fiscal Year (FY) 2015, USAID/OFDA provided nearly \$704 million to mitigate and prevent adverse effects of natural and man-made crises on the health of affected populations. Assistance included nearly \$700 million for health interventions in more than 20 countries and approximately \$3.7 million for global and regional health initiatives.

PROTECTING CAREGIVERS AGAINST EBOLA IN SIERRA LEONE WITH INTERIM CARE KITS



A man receives an interim care kit and is now able to better protect himself from Ebola. Photo by Paloma Clohossey/USAID.

In May 2014, health officials reported the first Ebola virus disease (EVD) case in Sierra Leone—connected to the outbreak that began in December 2013 in neighboring Guinea. As of September 2015, the UN World Health Organization had reported nearly 14,000 confirmed, suspected, and probable EVD cases in Sierra Leone, including more than 3,900 total deaths. Insufficient isolation bed capacity early in the outbreak increased EVD transmission risks, as families were forced to care for EVD patients at home. Without adequate medical supplies or training, caregivers risked contracting the disease through exposure to a sick person's blood or other bodily fluids, facilitating the spread of EVD.

Through nearly \$1.5 million in FY 2015 support to the International Organization for Migration, USAID/OFDA provided interim care kits to households with suspected EVD cases in three of the hardest-hit areas of Sierra Leone—Bombali, Port Loko, and Western Area Urban districts. The interim care kits—containing bleach, buckets, gloves, oral rehydration salts, soap, water purification tablets, and health and hygiene promotion materials—provided a stopgap measure for individuals awaiting hospital treatment. Combined with other relief efforts, the interim care kits helped reduce EVD transmission among caregivers and slowed the spread of the disease. In total, USAID/OFDA provided more than \$500 million in FY 2015 for health interventions in response to the EVD outbreak in Guinea, Liberia, Mali, and Sierra Leone.

TRAINING COMMUNITY HEALTH WORKERS IN CAR

Instability in the Central African Republic (CAR) descended into widespread conflict in 2013, resulting in large-scale population displacement and forcing more than 2.5 million people to require humanitarian assistance to meet basic needs, including access to health care. Since 2013, health facilities have lost trained medical personnel to violence and displacement, experienced looting, and remained unable to maintain stocks of critical supplies and medicines. People in many areas of the country lack access to basic health care services, causing many people to die or suffer needlessly from preventable diseases. In FY 2015, USAID/OFDA provided nearly \$6.6 million to support life-saving health initiatives for displaced and other conflict-affected individuals in CAR.

Since 2014, USAID/OFDA has supported the MENTOR Initiative (MENTOR) to train community health workers (CHWs) to diagnose and treat common health conditions among populations who lack access to basic health care services. CHWs provide prenatal care and treat acute respiratory infections, malaria, diarrheal diseases, and severe malnutrition in pregnant women and children younger than five years of age—two demographics particularly vulnerable to morbidity and mortality. In addition to providing life-saving health services, CHWs conduct disease surveillance by tracking nutrition status and malaria and diarrhea prevalence among children, providing early warnings of possible outbreaks or health emergencies that would require additional humanitarian assistance. CHWs also educate communities about preventing exposure to health risks and refer patients to more advanced health care facilities as appropriate. In FY 2015, USAID/OFDA supported MENTOR to improve its CHW referral system by bolstering linkages between CHWs and community hospitals. MENTOR coordinated with 10 community hospitals in five sub-prefectures to ensure that more than 230,000 people have access to essential health care services.

CRITICAL HEALTH SUPPORT FOR SYRIANS

The crisis in Syria has resulted in widespread humanitarian needs, including access to health care services, throughout the country. In addition to emergency medical services to treat conflict-related injuries, many Syrians require health assistance that addresses preventable and chronic illnesses. Despite growing insecurity and access constraints, as well as an increased number of attacks targeting health care facilities and medical personnel, USAID/OFDA partners have delivered primary care and emergency health services to more than 2.3 million vulnerable and displaced Syrians. In FY 2015, USAID/OFDA provided more than \$296 million to assist populations affected by the crisis in Syria, including more than \$109 million for life-saving health interventions.

With more than \$3 million in FY 2015 funding, a USAID/OFDA-supported non-governmental organization (NGO) is working to prevent the spread of leishmaniasis in northern Syria's Aleppo governorate. A parasitic disease spread by sand flies, leishmaniasis can cause infectious open wounds, internal bleeding, and death. The USAID/OFDA partner trained health workers to identify, treat, and prevent the spread of leishmaniasis, and provided health facilities with diagnostic and treatment guidelines. The NGO also supported indoor insecticide spraying, facilitated waste removal to inhibit sand fly breeding, and conducted public health awareness campaigns in communities at risk for leishmaniasis.

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