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Operation Update Report no. 2

Yemen: Dengue Fever Outbreak

 International Federation
of Red Cross and Red Crescent Societies

DREF n° MDRYE008	GLIDE n° EP-2019-000178-YEM
Operation update n° 2; 30 June 2020	Timeframe covered by this update: January – June 2020
Operation start date: 26 December 2019	Operation timeframe: 8 months (until 30 August 2020) Extension 2 months included (from 30 June 2020)
Funding requirements (CHF): 278,498	DREF amount initially allocated: CHF 278,498
N° of people being assisted: 35,000 people (approximately 5,000 HHs)	
Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC) and International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: Ministry of Public Health and Population (MoPHP), National Malaria Control Programme, World Health Organization (WHO) and local government authorities.	

Summary of major revisions made to emergency plan of action:

The DREF operation was exceptionally extended by two months until 30 August 2020. The extension was to ensure the completion of the activities in this operation which have been delayed or suspended following COVID-19 pandemic restriction measures imposed by the authorities in Yemen since March 2020. The current movement restrictions have been affecting field implementation of community activities in the targeted governorates which are essential for the completion of the operation; especially related to community awareness and hygiene promotion. In addition to the COVID-19 situation in country, the delivery of items faced important delays related to the availability in the market and transportation.

This extension will facilitate the final distribution stage of hygiene kits and remaining fogging machines and materials for Yemen Red Crescent Society (YRCS) branches and complete the remained activities in the operation. The items remain relevant in the response as cases continue to sustain in some of the the targeted governorates where response has been limited. The need for the hygiene kits are even more imperative now, despite the delays, as the impact of insufficient funding in-country for health and water, sanitation and hygiene activities are resulting in widening gaps and increased risks for already vulnerable communities compounded by the COVID-19 outbreak.

YRCS will keep monitoring the situation and adapting their response accordingly, nevertheless, if restrictions continue, this might cause further rescheduling of activities and/or its cancelation if it is not possible to implement. The total budget will remain as per the original, with minor changes in some of the activities related to fogging materials (Deltamethrin) which came as a request from the health authorities due to limited availability and support from other humanitarian partners in the specific locations. The number of mosquito nets was also increased to cover the needs of 2,000 families during the distribution.

A. SITUATION ANALYSIS

Description of the disaster

A significant increase in dengue cases was observed from 18 November – 8 December 2019 (epidemiological reporting Weeks 47,48,49) in the country, and this was further confirmed on 18 December 2019, with 22,003 cases and 60 deaths reported. Dengue outbreaks affected 174 of 333 total districts (54%) in 22 of 23 governorates of the country. The governorates with highest number of suspected dengue cases are from Hudaidah,

Taiz, Aden, Hajjah and Lahj and deaths reported from Hudaidah, Aden, Hajjah, Lahj, Shabwa, Marib and Rayma. Most reported cases are concentrated in urban areas. The number of affected governorates increased due to the collapse of the health system in Yemen resulting from ongoing complex and protracted conflict, the poor water and hygiene condition in the most affected areas, with limited access to humanitarian support to the most vulnerable and affected populations.

In view of the dengue outbreak in the country, the Ministry of Public Health and Population (MoPHP) requested the support of Yemen Red Crescent Society (YRCS) and other humanitarian partners to participate in the prevention and control of dengue outbreaks. YRCS was requested to respond to the Dengue outbreak from MoPHP offices in the governorates of Shabwa and Hajjah where maximum cases were reported at the time.

Five months since the onset of the outbreak, dengue suspected cases to date are more than four times the cases in comparison 2019, and six times the reported numbers in 2018, according to the Yemen [Health Cluster](#) (table on the right).

According to the latest epidemiological bulletin¹ issued on 23 June (covering up 1-7 June, epi week 23), Hudaidah remains the most affected, recording 113 cases out of the country's 724 cases in that week alone.

Overview of Dengue Fever From Wk1-WK17,2018,2019 and 2020

Indicators	Year 2018	Year 2019	Year 2020
Suspected Cases	6,797	8,512	40,983
Death Cases	6	26	131
CFR %	0.1%	0.3%	0.3%
AR/10,000	2.3	2.8	13.6
Positive RDTs	133	318	1,099
% from total tested	51% from total tested (263)	50% from total tested (641)	36% from total tested (3,049)
Affected Governorates	21 Governorates (91%)	20 Governorates (87%)	22 Governorates (96%)
Affected Districts	113 Districts (34%)	126 Districts (38%)	194 Districts (58%)

Summary of current response

Since the outbreak, YRCS have and continue to coordinate with MoPHP at national level through Health Cluster Coordination meetings when the outbreak was reported and closely monitored the reports with information from branches. MoPHP requested support from humanitarian health actors in the country, including YRCS, to respond to dengue outbreak in the country. YRCS, supported by Red Cross Red Crescent (RCRC) Movement partners in Yemen, coordinated and responded to the outbreak collectively. With support from this DREF allocation, YRCS developed and is implementing a plan to provide assistance to up to 35,000 people in the most affected governorates of Shabwah, Hudaidah, Hajjah, Aden, Taiz in through health and hygiene messaging, provision of hygiene kits and mosquito nets as well as fogging in high risk areas. Further information below, reported against the detailed operational plan.

Overview of Host National Society

YRCS is a recognized health humanitarian actor in first aid response and ambulance services and leading in providing first aid trainings and health education activities to local communities by trained community volunteers. YRCS implements integrated health, WASH and PSS activities in emergency and non-emergency situations and covers the needs of the displaced population (IDPs) affected by conflict and natural disasters.

Overview of Red Cross Red Crescent Movement in country

Yemen Red Crescent Society (YRCS) has a nationwide presence in Yemen, with 22 branches in the different governorates across the country. Health humanitarian services are a priority for YRCS including primary health care, community based health and public health in emergencies. With more than 5,000 volunteers throughout the territory, YRCS has the capacity to reach most of the territory and engage in first response actions related to the humanitarian crisis and other situations such as this outbreak.

Movement coordination mechanism in the country is very active with regular strategic, operational and technical levels meetings. Health technical working group is established and meets with the Movement partners in-country regularly every two months and/or as needed for coordination, information sharing, harmonization and standardization of support to YRCS. Aside from IFRC and ICRC, Danish Red Cross, Norwegian Red Cross, German Red Cross and Qatar Red Crescent are present in the country, supporting projects and programmes to the YRCS in Health, WASH, Disaster Management and areas within National Society capacity strengthening.

¹ Not yet available online, received through WASH cluster email on 26 June 2020

Prevention and control of Dengue are incorporated in primary health care services provided by the YRCS, supported by Movement partners. It is also included in the training of epidemic control, hygiene promotion, first aid trainings in operational areas of support. YRCS is coordinating with the in-country Movement partners and ICRC health unit regarding the response of the dengue outbreak and shared the information and request from MoPHP and Health cluster. ICRC is responding to the outbreak through provision of treatment kits/medicines to the government health facilities supported by ICRC in Hudaidah and Taiz.

Overview of other actors in country

MoPHP are implementing treatment campaign in Hudaidah governorate specially in Bait Al Faqeeh district. Also, they are coordinating with the Health Cluster to channel support of the humanitarian actors. YRCS has been attending and participating in the Health Cluster meetings regularly to get the gap analysis, in order to arrange the intervention and avoid any duplication with other stakeholders. MoPHP is leading the response with technical guidance and operational support from WHO coordinated through governorates and district level health systems. Locally supported materials available to humanitarian actors for production and utilization. Local authorities support in coordination and meetings with the community.

Needs analysis and scenario planning

Needs analysis

All of the 22 governorates across Yemen were affected by dengue outbreaks with different rates. The incidence of dengue cases in 2019 was much higher compared to 2018 reported cases. The attack rate of the disease is 19.8 per 10,000 people, with case fatality rate of 0.4%. Since the start of the conflict in Yemen, half of the health facilities in the country collapsed or damaged. The five governorates with highest number of cases reported are: Hudaidah, Taiz, Hajjah, Aden and Shabwa.

YRCS conducted an assessment in the targeted governorate with this operation by the end of April 2019, with a report issued in early May 2019. The assessment aimed to identify worst affected communities which recorded cases and more specifically, remain vulnerable to the Dengue outbreak and verify the data shared. While Hajjah governorate showed a decrease in the number of cases and is receiving support from different humanitarian actors, the YRCS assessment identified that the cases in Al Hudaidah to be increased comparing the outbreak in the other areas, with data corroborated with those from the WASH cluster². However, further analysis and coordination with the National Malaria Control Programme (NMCP) indicate that the mosquito breeding season is anticipated to start again in Hajjah, and as a result, YRCS were requested in May 2019 to continue the planned fogging activities in Hajjah as a preemptive measure to limit, if not completely deter, another outbreak.

Operation Risk Assessment

RISK	DESCRIPTION	PROBABILITY	MITIGATING ACTION
Security situation limiting the implementation of field activities	Ongoing conflict in Yemen limit the access of YRCS volunteers to implement activities in certain situations to affected communities.	High	YRCS will rely on branch volunteers and local communities' leaders, to facilitate access and movement of YRCS staff and volunteers. Coordination with the ICRC and local authorities for safer access. Seek security advice regularly from the ICRC
Adverse weather events	Heavy rains that may results in floods	Medium	YRCS and IFRC to monitor weather forecasting, and direct operations accordingly
Financial difficulties/challenges	Due to ongoing conflict in Yemen, and civil unrest in regional countries, might negatively impact the money transfers Processes to local banks in Yemen	Medium	Proper contingency plan will be drafted, and agreed upon with IFRC country and regional offices
Presence of further pandemic situation	COVID-19 presence in Yemen have a significant impact in operational activities, including immediate measures such as movement restrictions implemented by authorities	High	YRCS business continuity plan in place with support from Movement partners. Volunteers and staff are trained and PPE is provided to ensure protection measures for running essential health activities, while modifying actions that require

² Not yet available online, received through WASH cluster email on 26 June 2020

	to avoid spread of the outbreak. Furthermore, the shortage of PPE in-country further exacerbates the ongoing risks associated with staff and volunteer movement as well as communities to be reached, and subsequently, implementation of activities.		communal activities to ensure safe physical distancing and/or increase in the times an activity is carried out to help ensure limited numbers per gathering.
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B. OPERATIONAL STRATEGY

Proposed strategy

Overall Operational objective:

The overall objective of this operation is to reduce the risks of dengue for 35,000 people in 13 prioritized districts in five affected governorates: Shabwah, Hudaidah, Hajjah, Aden, Taiz, through the implementation of a community mobilization strategy on risk prevention and health hygiene promotion activities.

Intervention strategy:

- Support to public authority response to the outbreaks:** Based on the approved operation strategy, YRCS started with the coordination of the MoPHP at national headquarters' (HQ) as well as branches levels to coordinate implementation of YRCS response with the authorities. With the support of IFRC, YRCS conducted the kick-off meeting for this operation that included participants from the target branches and key staff from HQ who have been managing the operation. The meeting aimed to share the operation objective with the branches and the activity details with the required tools, such as assessment documents. YRCS assigned one focal point in each of the five branches to oversee the implementation of this operation in terms of communication with the HQ and to coordinate with their respected branches. The procurement of items under this operation was implemented through the YRCS with the support of IFRC during the process, the items to be procured under the EPoA were identified locally due to the difficulties of importing items to the country and based on the availability of items in the local markets.
- Enhancing public awareness through health promotion and community mobilization:** The training mentioned in the EPoA for the volunteers in the target branches and the health workers from the MoPHP in the targeted governorates by this operation. The training used the Epidemical Control for Volunteers (ECV) manual as the main reference for the materials during the trainings. 100 volunteers were trained in four governorates namely Al Hudaidah, Taiz, Aden and Shabwa. Considering secondary risks of water-borne diseases in the targeted communities and general community engagement efforts, personal hygiene promotion and hygiene kits will be included in the campaigns and covered under this DREF operation.
- Environmental prevention and management of dengue:** through community vector control activities according to the MoPHP guideline (insecticide spraying/ fogging), which will be conducted by MoPHP staff supported by YRCS volunteers and hygiene promotion, hygiene kits & mosquito net distribution to the most vulnerable affected population.

Progress against the strategy outlined above, are reported against the detailed operational plan below.

C. DETAILED OPERATIONAL PLAN



Health

People reached: 26,920

Male: 13,729

Female: 13,191

Outcome 1: The immediate risks to the health of affected populations are reduced

Indicators:	Target	Actual
# of people reached by NS with services to reduce relevant health risk factors.	35,000	6,740

Output 1.1: Populations living in areas with high incidence of dengue have increased access to information regarding early identification of dengue signs and symptoms, prevention and control.

Indicators:	Target	Actual
# of people reached by community-based health activities 100 of health care workers trained on case management	35,000	26,920

Output 1.2: Epidemic prevention measures carried out in communities

Indicators:	Target	Actual
# of mosquito nets distributed (to reach 1,666 HH under this Operation while the rest of the Mosquito nets will be provided by other partners)	5,000	6,000
# of communities in 13 priority districts in five governorates supported by fogging	13	0

Progress towards outcomes

As part of the start of this operation implementation, YRCS has been coordinating the response with the MoPHP in the country and through the branches in the targeted branches. An assessment was conducted in the targeted locations.

The training for volunteers and health workers in Hudaidah, Shabwa, Taiz and Aden were completed. 100 volunteers were trained on ECV manual on communicable disease surveillance and early identification of cases. On the other hand, 80 health workers from the identified health facilities by the MoPHP in Hudaidah, Shabwa and Taiz. In addition, 20 volunteers from the National Malaria Control program (NMCP) in Taiz was trained on Fogging measures and control disease spreads.

The YRCS volunteers in Taiz branch, together with a team from NMCP, are progressing with their campaigns to remove mosquito breeding spots and fogging high risk areas in the targeted districts within the governate.

Fogging activities in Hajjah, Shabwa and Aden are ongoing, with activities in Hudaidah on hold due to lack of availability of safe and appropriate fogging machines and materials, with procurement delayed due to the impact of the COVID-19 outbreak on availability of items. The procurement of fogging machines is ongoing based on the coordination with the local authorities and the NMCP 15 fogging machine was requested since the rest will be used from the authorities as part of their support to this operation, the materials Deltamethrin that will be used in fogging will be provided by the authorities but also they request YRCS to compensate these materials.

The mosquito nets were delivered to YRCS warehouse due to needs additional 1,000 nets was added to cover 2,000 families (3 per family). Distributions will be carried out to accompany health and hygiene promotion activities that will also incorporated COVID-19 related messages. However, the implementation of this has been delayed due the COVID-19 outbreak and subsequent social distancing measures put in place in the country, slowing down access and capacity to implement.

Overall, the COVID-19 situation continues to impact all operations in Yemen, YRCS shifted its focus on addressing impending needs of people stranded in borders and also staying in quarantine and isolation centers. The activities aim to continue as the situation is within the plans of YRCS for responding to pandemic situations in collaboration with the relevant authorities and humanitarian stakeholders.



Water, sanitation and hygiene

People reached: 157

Male: 80

Female: 77

Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Indicators:	Target	Actual
% of people practicing good water handling practices which includes use of sufficient water storage container	20%	5 %
Output 1.1: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population		
Indicators:	Target	Actual
# of people reached by hygiene promotion activities	35,000	0
Output 1.1: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population		
Indicators:	Target	Actual
# of HHs received hygiene kits	2,000	0

Progress towards outcomes

The procurement process of the hygiene kits was finalized pending the delivery from the supplier to YRCS warehouse that was delayed due to the difficulty in sourcing items locally with the changes in the prices due to the COVID-19 situation and the difficulty of importing items to the country. However, the items remain relevant and needed by the affected households, especially as according to the latest epidemiological bulletin³ issued on 23 June (covering up 1-7 June, epi week 23), Hudaidah remains the most affected, recording 113 cases out of the country's 724 cases in that week alone.

The materials to be used for the hygiene promotion activities were developed jointly and in close coordination with the Communication department in YRCS which ensured the integration of the COVID-19 key messages. The plan is for conducting the hygiene promotion activities and delivery of the messages through different methods given the current movement restriction. The materials are ready and due to movement restriction it was difficult to send that to the branches. 8,000 leaflets and 8,000 posters were developed with providing the volunteers with caps for visitability.

Strategies for Implementation

Outcome S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform

Indicators:	Target	Actual
# of NS to adopt logistics and financial standards procedures during the operation	1	1
Output S1.1.1: National Societies have effective and motivated volunteers who are protected		
Indicators:	Target	Actual
# of volunteers insured and involved in the operation	100	106
Output S1.1.2: Effective and coordinated international disaster response is ensured		
Indicators:	Target	Actual
# of YRCS branches participated in the kick-off workshop by the start of the operation	5	5
Output S1.1.3: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming		

³ Not yet available online, received through WASH cluster email on 26 June 2020

Indicators:	Target	Actual
# of lesson learned report produced and published	1	0
Progress towards outcomes		
<p>This operation was started with kick-off meeting with the five branches along with the relevant staff from the HQ participated. The kick-off meeting was an opportunity for YRCS to explain to the branches on the objective of the operation and the activities to be implemented in order to prevent dengue outbreak in country.</p> <p>The PPEs procurement for the volunteers was also finalized and items were delivered, masks, gloves, gowns, rubber gloves and boots were procured to ensure the maximum protection of volunteers during the implementation of the activities of this operation vulnerable to the risk of COVID-19 outbreak.</p> <p>During the reporting period 106 volunteers were involved in the trainings and to support the training of the health workers in their respective governorates.</p>		

D. Financial Report

The total budget remains the same with slight changes in the activities including the increase in the mosquito nets, decrease the number of fogging machine and including the Deltamethrin material for fogging.

Reference documents



Click here for:

- [Previous Appeals and updates](#)
- [Emergency Plan of Action \(EPoA\)](#)

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives.
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and peace.