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Operation Update Report

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° 1: 30 April 2020	Timeframe covered by this update: January – April 2020
Operation start date: 26 December 2019	Operation timeframe: 6 months (until 30 June 2020) <i>Extension of 2 months included (from 30 April 2020)</i>
Funding requirements (CHF): 278,498	DREF amount initially allocated: CHF 278,498
N° of people being assisted: 35,000 people (approximately 5,000 households)	
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, World Health Organization (WHO) and local government authorities.	

Summary of major revisions made to emergency plan of action:

The DREF operation is extended by two months until 30 June 2020, to enable completion of activities which have been delayed or suspended following COVID-19 pandemic restriction measures by the Yemen authorities since March 2020. The movement restrictions measures of the authorities that has been affecting field trips and implementation of community activities in the target governorates which are essential for the completion of all planned activities; especially related to community awareness and hygiene promotion. The Yemen Red Crescent Society (YRCS) will keep monitoring the situation and adapting their response accordingly, never-the-less if restrictions continue, this might cause further delays and possible cancelation of activities.

A. SITUATION ANALYSIS

Description of the disaster

A significant increase in dengue cases was observed in the last three weeks of epidemiological reporting (Weeks 47,48,49) in the country and this was furtherly confirmed on the 18th December during the Health Cluster meeting, with 22,003 cases and 60 deaths reported. Children below five years old are 11% of the total caseload and 30% of the total death cases. Dengue outbreaks have affected 174 of 333 total districts (54%) in 22 of 23 governorates of the country. The highest governorates with suspected dengue cases are from Hodeidah, Taiz, Aden, Hajja and Lahj and death cases reported from Hudaidah, Aden, Hajja, Lahj, Shabwa, Marib and Rayma.1 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.

From January to December 2019, 59,486 dengue suspected cases and 219 death cases with case fatality rate (CFR) of 0.4% were reported. Comparing to the same reporting period in 2018, the number of dengue cases has doubled, and death cases has increased with an attack rate of 19.8 per 10,000 population in 2019. During the last three weeks, spike of dengue cases was noted with a total of 22,003 suspected cases and 60 deaths. 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

Hajja where maximum cases were reported during weeks 47,48 and 49. In addition, WHO and MoPHP during the last Health Cluster meeting conducted on 18 December 2019 have reiterated the request for support from humanitarian actors to intervene in the response to Dengue.

Summary of current response

Overview of Host National Society

YRCS is a recognized health partner 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 conditions and caters to the needs of the internally displaced people (IDPs) affected by conflict and natural disasters.

YRCS started 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 to respond to dengue outbreaks with the spike of suspected cases resulting in the need for a DREF now to support YRCS in its response. YRCS health as lead in public health emergency response activated the Task Force meeting with the Red Cross Red Crescent (RCRC) Movement partners in Yemen to coordinate respective response for dengue outbreaks collectively.

Overview of Red Cross Red Crescent Movement in country

Movement coordination mechanism in the country is very active with regular strategic, operational and technical levels meetings. Aside from IFRC and ICRC, Danish Red Cross, Norwegian Red Cross, German Red Cross, Qatar Red Crescent and Turkish Red Crescent are present in the country, supporting projects and programmes to the YRCS in National Society Development, Health, WASH, Disaster Management, Livelihood and Shelter. Other Partner National Societies (PNSs) such as Japanese Red Cross Society, Swedish Red Cross, British Red Cross and The Canadian Red Cross Society are also supporting specific programmes. 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.

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 Hudidah and Taiz.

Overview of non-RCRC actors in country

MoPHP are implementing treatment campaign in Hudidah 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: Hodeidah, Taiz, Hajja, Aden and Shabwa.

YRCS conducted an assessment in the targeted governorate with this operation, the assessment aimed to identify worst affected communities which are vulnerable to the Dengue outbreak and verify the data shared, **Hajja governorate showed decrease in the number of cases and receiving support from different humanitarian actors**. Also, the result of the **YRCS assessment identified the cases in Al Hodeidah to be increased** comparing the outbreak in the other areas.

Operation Risk Assessment

Risk	Description	Probability	Mitigation 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 working closely with branch volunteers and local communities' leaders, to facilitate access and movement of YRCS staff and volunteers. Coordinating with the ICRC for security advice regularly and local authorities for safer access.
(New) Outbreak of Global COVID-19 pandemic in Yemen	COVID-19 presence in Yemen have a significant impact in operational activities. Immediate measures such as movement restrictions are implemented to prevent the spread of virus.	High	YRCS business continuity plan is 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.
Adverse weather events	Heavy rains that may results in floods	Medium	YRCS and IFRC monitoring 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

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 5 affected governorates: Shabwah, Hodeidah, 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 was 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. 60 volunteers were trained in two governorates namely Al Hodeidah 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.

C. DETAILED OPERATIONAL PLAN



Health

People reached:

Male:

Female:

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	0

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	0

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	0
# of communities in 13 priority districts in five governorates supported by fogging	13	0

Progress towards outcomes

As start of this operation, YRCS has been coordinating the response with the MoPHP in the country through its branches in the target governorates. During the reporting period, an assessment was conducted in the target locations and based on the assessment result it was agreed to continue with the four governorates, Al Hodeidah, Shabwa, Aden and Taiz. The Hajja governorate showed decrease in the number of cases and receiving support from other humanitarian actors in the country.

YRCS has completed ECV trainings for 60 volunteers in Al Hodeidah and Shabwa governorates. The volunteers were trained on manual on communicable disease surveillance and early identification of cases. Similarly, MoPHP has trained 60 health workers from the identified health facilities.

The procurement of mosquito nets and the fogging machines is under process. These items will be procured as per YRCS procurements procedures.

Beyond the delays experienced in the procurement process, the outbreak of global pandemic COVID-19 will have catastrophic impacts on the lives of people as well as already overstretched health facilities in the country. Due to growing concerns on its possible presence and widespread in country required an urgent reprioritization of activities. 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 plan of YRCS for responding to pandemic situations in collaboration with the relevant authorities and humanitarian stakeholders.



Water, sanitation and hygiene

People reached:

Male:

Female:

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%	0

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 is under process and expected to be completed in coming month. The procurement of all the items including hygiene kits and PPEs will be done following the YRCS procedures. Following the COVID-19 outbreak, YRCS is working closely with the communication department in order to integrate hygiene promotion messages with the COVID-19 key messages. The plan is prepared between the health and the communication department to ensure delivering of the messages through different methods given the current movement restriction.

Further details will be provided in the next operations update.

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	60

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

Indicators:	Target	Actual
# of lesson learned report produced and published	1	0

Progress towards outcomes

The PPEs materials identified under this operation will be used to ensure the protection of the volunteers who are on the frontline to implement the activities of this operation and vulnerable to the risk of COVID-19 outbreak. During the reporting period 60 volunteers were involved in the trainings and supporting the training of the health workers in their respective governorates.

This operation started with kick-off meeting with the branches in which 5 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.

Further details will be provided in the next operations update.

D. Financial Report

The budget remained the same with no changes in the activities.

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**.