SITUATION REPORT FOR THE INCREASED SUSPECTED DENGUE FEVER CASES IN AL HUDAYDAH GOVERNORATE

January 2020

1. A BRIEF REPORT ON THE SUSPECTED DENGUE FEVER CASES UNTIL THE END OF 2019 IN AL HUDAYDAH GOVERNORATE:

   • The Cumulative Total Number of Suspected DF Cases is 25726 with 106 associated deaths.
   
   • 7 districts reported the highest number of suspected DF cases as the following: Al Garrahi 5210, Bayt Al Faqih 3840, Al Qanawis 2318, Zabid 2157, Al Hawak 1690, Az Zuhrah 1654 and Al Hali 1081.
   
   • In last three weeks of 2019, the suspected DF cases increased in Al Garrahi 1416, Bayt Al Faqih 1340, Al Hawak 1055, Al Qanawis 709, Al Mina 636 and Al Hali 622 cases.
   
   • Most of the deaths were reported in the following districts: Bayt Al Faqih 25, Zabid 21, Az Zuhrah 20, Al Garrahi 15, Az Zaydiyah 6 deaths.

2. A BRIEF REPORT ON THE SUSPECTED DENGUE FEVER CASES in W1/2020 IN AL HUDAYDAH GOVERNORATE:

   • More than 2690 suspected dengue fever cases were reported with 4 associated deaths in following districts, As Sukhnah 2, Az Zaydiyah 1 and At Tuhaytah.
   
   • The districts that reported the highest number of suspected DF cases in the first week (W1) of January/2020 are Bait Al Faqih, Al Hali, Al Qanawis, As Sukhnah, Az Zaydiyah, Ad Dehi, Al Mansouriyah, Al Garrahi and Bajil districts (395, 323, 232, 229, 228, 416, 356, 141 and 160 cases respectively).
3. A BRIEF REPORT ON THE SUSPECTED DENGUE FEVER CASES UNTIL W2/2020 IN AL HUĐAYDÂH GOVERNORATE:

- The cumulative total number of suspected DF cases is 5524 with 11 associated deaths
- 19 out of 26 districts reported the highest number of suspected DF cases, the 7 districts that have the highest cases of these districts are Bayt Al Faqih 828, Al Hawak 782, Al Hali 677, Ad Dehi 556, Al Qanawis 526, Az Zaydiyah 429 and Al Mansouryiah 316 cases.
- The HFs that reported the highest cases in the above districts are: Bayt Al Faqih Rural hospital and Tehama hospital in Bayt al Faqih hospital, Al Thawrah Public hospital and Ghollil HC in Al Hawak district, Zaid HC in Al Hali district, Ad Dehi Rural hospital, Al Qanawis hospital, Al Mansouryiah Rural hospital
- Most of the deaths were reported in: Bayt Al Faqih 5 deaths followed by As Sukhnah, Az Zaydiyah and At Tuhaytah districts 2 deaths for each, while Bajil and Zabid districts 1 death for each.
HEALTH CLUSTER RESPONSE for Suspected Dengue Fever Cases

- The next Sub National Health Cluster OF Al Hudaydah Hub meeting will be conducted in the next week aiming to activate Dengue fever task force which going to conduct regular meetings on biweekly basis to utilize existing systematic coordination mechanisms for outbreak preparedness and response within the health sector and across sectors and clarity of agency roles and responsibilities during outbreak preparedness, including intersectoral collaboration to place source reduction on the agenda of other ministries.

WHO RESPONSE:

- An ad-hoc bilateral meeting has been held on 29 October between Health Cluster & WHO Team with Al Hudaydah GHO DG Dr Abdulrahman Garallah discussing the epidemiological situation of the Vector Control Diseases (Dengue / Malaria) in Al Hudaydah Governorate, the urgent GHO health needs, the current ongoing response, the roles of the RRTs who are supported by WHO and ways forward.

- A meeting with the vice prime minister and Al-Hodeidah Governor for DF response on Monday 12 Nov 19.

- A meeting with dengue fever supervisors the six members were nominated by GHO in dengue fever response. The purpose on this meeting was for preparing a mission to ensure that the health staff are fully aware about the cases to learn the best practice of case management in the rural areas to prevent further mortalities.

- An ad-hoc bilateral meeting has been held on 13 November 2019 between Health Cluster, WHO Team, OCHA & UNICEF discussing the epidemiological situation of the Vector Control Diseases (Dengue / Malaria) in Al Hudaydah Governorate, the urgent GHO health needs, the current ongoing response, the roles of the RRTs who are supported by WHO and ways forward.

- A meeting with GHO supervisory team to discuss the plan of field visit 19 Nov 2019.

FIELD SUPERVISION:

- WHO team (Epidemiologist and Emergency field coordinator) with GHO team (supported by WHO) moved urgently on Saturday 2nd Nov to Al-Garrahi for outbreak investigation, technical support for RRT

- Supervision Field Visits on Sunday 17 Nov 19 to Al Garrahi and Zabid to conduct on job training for HWs and eDEWS focal points.

ON JOB TRAINING:
• On job training to six specialists of GHO on case definition and management of DF and those specialists will conduct such training to the HWS in the affected areas 13-14 Nov 2019.

• A training on case definition and management of DF for 26th surveillance focal points in RRTs at 26th districts/Al-Hodeidah gov.

**ACTIONS TAKEN:**

• Supporting fogging spray campaign in Al Hudaydah on 22 June 2020.

• 500 IV fluids and 15 IEHK, Basic kits have been delivered urgently on 1st Nov as rapid response.

• Launching the IRS campaign on Tuesday 12-23 Nov 19 in 22 Districted.

• Strengthening the surveillance system and activation of EOC for rapid and regular reporting in addition to ensure the availability of RDTs and records.

• Technical support for RRT/Al-Garrahi to ensure a good performance on the field.

• Supporting the NPHL at Al-Hodeidah by lab reagents.

• Coordination with eDEWS for sharing the data on daily basis.

• WHO is supporting the HFs in the high-risk districts mentioned with the table below:

<table>
<thead>
<tr>
<th>District</th>
<th>HFs</th>
<th>Qty of IEHK, Basic</th>
<th>I.V Fluids</th>
</tr>
</thead>
<tbody>
<tr>
<td>Al Garrahi</td>
<td>Al Garrahi Hospital</td>
<td>10</td>
<td>300</td>
</tr>
<tr>
<td>Al Zuhrah</td>
<td>(Al Zuhrah Hospital</td>
<td>9</td>
<td>300</td>
</tr>
<tr>
<td>Al Zuhrah</td>
<td>Al Khoshm HC</td>
<td>3</td>
<td>100</td>
</tr>
<tr>
<td>Al Zuhrah</td>
<td>Khamis Al Wa’adhat HC</td>
<td>3</td>
<td>100</td>
</tr>
<tr>
<td>Al Qanawis</td>
<td>Al Qanawis Hospital</td>
<td>5</td>
<td>300</td>
</tr>
<tr>
<td>Al Qanawis</td>
<td>Emergency Center</td>
<td>3</td>
<td>100</td>
</tr>
<tr>
<td>Bayt Al Faqih</td>
<td>Bayt Al Faqih Hospital</td>
<td>10</td>
<td>500</td>
</tr>
<tr>
<td>Zabid</td>
<td>Zabid Hospital</td>
<td>7</td>
<td>200</td>
</tr>
<tr>
<td>Jabal Ra’as</td>
<td>Jabal Ra’as C</td>
<td>5</td>
<td>200</td>
</tr>
<tr>
<td>Al Zaydiyah</td>
<td>Al Zayddiah Rural Hospital</td>
<td>5</td>
<td>100</td>
</tr>
</tbody>
</table>

**WHO Ongoing Monthly Updates:**

• Supplying 32 HFs in Al-Hudaydah hub with total of 241,600 liter of fuel in monthly basis.

• Supplying 46 HF in Al-Hudaydah hub with total of 6,111,250 liter of water in monthly basis.

• Supporting 421 of eDEWS sites and 71 Rapid response teams in the four governorates in Al-Hudaydah hub.

• Supporting surgical and medical teams in 10 HFs in Al-Hudaydah hub.

• Supporting the National Public Health Laboratory staff with incentives.

• Supporting 113 HFs with MSP project in Al-Hudaydah hub through 10 implementing partners.

• Supporting the operational cost for 6 ambulances in Al-Hudaydah governate.

• Supporting the EOCs in Al-Hudaydah, Hajjah, Raymah and Al Mahweet GHOs.

• Supporting 22 DTCs in Al-Hudaydah hub.

• Supporting for 15 TFCs in Al-Hudaydah hub.

• Supporting IRS campaign as a part of Dengue fever control for 9 days started in 6 districts in Hajjah governate (Abs, Aslam, Khayran Al-Moharaq, Mostaba, Bani Qais & Kouaidenah district), implemented by Hajjah GHO.

• Supporting Al-Thawrah hospital in Al-Hudaydah governate with 40 IEHK kits and Bani Hassan HC in Hajjah governator with 15 IEHK kits.

• Conduct field assist to assess the health and WASH needs in Al Salam Center.

• Supporting Al-Thawrah public hospital in Al-Hudaydah governate with Laboratory supplies, reagents and Solutions.

**UNICEF RESPONSE:**
UNICEF (C4D) has supported for health education sessions for the affected districts in Hajjah and Hudaydah through GHO as an implementing partner aiming to Strengthening Public Health Education & Community Involvement in risk reduction activities:

- The Health Education activities started on 11 November 2019.
- UNICEF informed GHO to use medications supported by UNICEF for Dengue Fever campaign as needed with coordination with the health cluster and GHO.

UNICEF has supported Al Garrahi District with EMMT from 16 Nov 2019 up to the end of Dec 2019 through an implementing Partner (BFD).

**BFD RESPONSE:**

- BFD has been responded promptly to health cluster request to intervene in Al Garrahi district with the following:
  - BFD worked to equip an integrated medical team for rapid response to face the epidemic.
  - BFD Team stay for three days starting from 6-8 November 2019.
  - The team was supplied and equipped with the required IV Fluids, Medications & Medical Supplies, Lab devices, Lab reagents following medical instruments, and intravenous solutions:
  - BFD supported the referral cases with two ambulances to transport cases that need to be referred to the rural hospital Zabid or rural hospital Beit al-Faqih after coordination with GHO/DHOs.
  - BFD supported the health education through 25 CHWs community health volunteers working for the Foundation were summoned as part of the Health and Nutrition Project implemented by the Foundation in the district to educate citizens and raise awareness among citizens by defining the situation and ways of transmission, treatment and prevention.

**ACF RESPONSE:**

- Increase supply of IV fluid in monthly HF's restocking has been delivered.
- Increase antimalarial in monthly HF's restocking has been delivered.
- 1244 Mosquito net has been delivered to Al Garrahi, Az Zuhrah and Bajil during last week of nov.2019 (It was distributed to BlWs BNFs list in targeted HF's).
- Enhance referral system to secondary health care level for the most complicated cases in 4 targeted District.

**SCI RESPONSE:**

- Distribution medication to most health facilities and Bey AlFaqih hospital.
- Procurement of Dengue and Malaria medication, which will be arrived in coming week from Sana’a.
- Capacity building for 58 laboratory technicians in all 48 SCI targeted health facilities in five districts, Al Hali- Alhawak-Almina-Bajel and Bayt Al Faqih, which done in Hodeida central lab. **For two days, 21-22/12/2019 on:**
  - how take the sample and fill the surveillance form of the sample case and how transport the sample to central lab, and practical part done in health facilities, AlThawrah hospital and the central lab.
  - Discussion on challenges in field and how cover come them.
- Capacity building for 108 health workers in 48 SCI targeted health facilities (same districts) for two days divided in two group (23-25/12/2019) in AlThawrah Hospital:
  - Epidemiological features of Dengue and Malaria in Hodeida.
  - Diagnosis and management Dengue and Malaria cases.
  - Referral Criteria for the critical cases.
  - Practical part will be in AlThawrah Hospital.

**PU-AMI RESPONSE:**

- Plans to train 89 health workers and health facilities to raise awareness about dengue, malaria and cholera management on job training We have a health team working in health facilities supported by the PU-AMI organization in the Mansouryah HC, Al Shojinah HC and Al Meghlaif HC.
- Provide adequate medicines to the supported health centers.
- Providing some anti-malarial and dengue medicine to the Public Health and Population Office in Hodeidah.
- plan to print 6000 brochures on awareness, malaria and dengue management. We also plan to print the dengue manual on health teams when available.
- Supporting four health teams each consisting of 3 nurses, 2 midwives, 1 technical laboratory, 1 pharmacist and 3 cleaners working in health centers supported in treating moderate and confirmed malaria cases and referring to suspected dengue or critical malaria.

**International Rescue Committee Response:**

- Training in response to management of dengue cases and preventive measures in the directorates of Beit Al Faqih, Mansouryah, Al Marawah and Bajil, for 30 workers at Beit Al Faqih Hospital, and 20 workers in other supported hospitals in the remaining three regions.
- The shipment of medicines and medical supplies will be transported to Beit Al Faqih Hospital on December 5, 2019.
- Print posters to manage cases.
- Garbage Collection Campaign that disposed of 6,500 tons of garbage was conducted from November 7 to November 12, 2019.
- Cleaning will be done for Al Mansouriyah District in the coming days.

**ORCS RESPONSE:**
- Provided support (malaria medicine, Ringer lactate infusion and intravenous cannula) to GHO in Al Hudaydah Governorate, in response to their request to participate in the response to dengue and malaria epidemics, as follows in the table below:

<table>
<thead>
<tr>
<th>No.</th>
<th>Item</th>
<th>Unit</th>
<th>Quantity of units</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Artemether 20mg Amp.</td>
<td>Ampule</td>
<td>900</td>
</tr>
<tr>
<td>2</td>
<td>Artemether 40mg Amp.</td>
<td>Ampule</td>
<td>900</td>
</tr>
<tr>
<td>3</td>
<td>Artemether 80mg Amp.</td>
<td>Ampule</td>
<td>900</td>
</tr>
<tr>
<td>4</td>
<td>Ringer Lactate Infusion, 500 ml</td>
<td>Bottle</td>
<td>1000</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
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<th>Unit</th>
<th>Quantity of units</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>IV Cannula 22G</td>
<td>Packet</td>
<td>100</td>
</tr>
<tr>
<td>2</td>
<td>IV Cannula 24G</td>
<td>Packet</td>
<td>100</td>
</tr>
</tbody>
</table>

- In addition to the interventions of the Qatar Red Crescent Society in Al Mina District to support and improve health services in 3 health facilities, which are: Al Tahrir Health Center, Al Qalaa Health Center and Al Oomaihealth Center within the Minimum Health Services Package Project.

**IOM RESPONSE:**
- Promote and support the referral system to the secondary health care level for more complicated and complicated cases in Al Garrahi and Zabid districts to the Al Thawrah General Hospital Authority in Hodeidah.
- Support an ambulatory mobile medical team to visit some surgical areas including the rural surgical hospital. The team consists of a doctor, medical assistance, pharmacist and laboratory technician who perform medical consultations, supportive treatment and laboratory tests (CBC), health education and refer complicated cases to Zabid Hospital or to hospitals in Al Hudaydah.
- The medical team was provided with the necessary equipment, an ambulance from the health office, with mobile laboratory checks and medications such as paracetamol and intravenous fluids, Artemether malaria treatment, Vit C amp, and Vit B complex.
- The International Organization for Migration is already supporting the Zabid al-Rifi Hospital through the Minimum Health Services Package project and responding to the outbreak of dengue fever by:
  - Support IOM with additional drugs such as paracetamol vial and ampoule, intravenous fluids, artemether ampoules and other related drugs and deploy a mobile team to visit some areas of the Zabid district.

**NRC:**
- Waste Elimination Campaign was carried out in Al-Zahra and Al Luhayiah district.

**Islamic Relief Yemen:**
- Distribution of mosquito nets in Al-Zahra and Al Luhayiah districts.
- Distribution of posters in Al-Zahra and Al Luhayiah
- Training of cadres in 20 health units on IMCI - obstetric emergencies and dengue
- Support 20 units with a healthy midwife in Al-Zahra and Al Luhayiah.
- Support 20 units with essential medicines in the units that were involved in nutrition.

**Local NGOs Response:**

**Tamdeeen Youth Foundation Response:**
- Garbage Collection Campaign of 5000 tons of waste was lifted in Beit al-Faqih and cleaning sewage.

**Yemen ACT Foundation:**
- Awareness sessions in Al Hali districts.
Qudrat Foundation for Development:
- Training 200 volunteers in four districts (Zabid, Beit al-Faqih, Al Qanawis and Al-Zahra).
- Raise awareness and education in schools and from house to house.
- Distribution of 2000 mosquito nets in the four districts.

• Health cluster partners in health facilities where they are involved were urged to promote capacity building of health workers through the following:
  - Providing health facilities with medicines and medical supplies sufficient to face the increasing cases of Dengue Fever.
  - Review of current operational procedures (health) including the inclusion of infection control (health, water and environmental sanitation).
  - Training of health workers about the standard definition of cases and cases management.
  - Support the referral mechanism (revision of system guidelines).
  - Conducting refresher and periodic training programs.
  - Focus on training of trainers.

Challenges & Gaps:
- In the most affected districts with DF and Malaria cases, there is a need for more assessment and interventions (On-job training on case definition and Management) as well as providing drugs and WASH intervention.
- Case definition should be strictly observed,
- Data management: lack of an electronic system to manage line lists at health facility level.
- Data entry errors at different levels as well as completeness and timeliness of data management.
- Lack of DF/Malaria Medications: Anti Malaria Drugs, RDTs for DF/Malaria, Cannulas, Paracetamol Infusion.

Recommendations:
- Provide Malaria medications.
- Health education campaign.
- Governorate RRT should participate in rapid assessment interventions in this districts.
- Distribution of LLINs.
- Urgent mobilization of emergency stock of IV fluids, Paracetamol infusion and Cannulas 22G, 24G
- Need to make sure that more cases are diagnosed with the SN1 rapid test which is the best way to confirm (and differentiate from West Nile or Chikungunya).
- Larval source reduction is the main tool for vector control. Effective control requires a concerted effort among the government agencies, NGOs and communities.
- Community understanding and involvement remains the key for implementation of preventive and control activities. The control measures should be implemented at personal, community and institutional levels.
- Exploring with UNICEF and Ministry of Education to repeat last years’ experience with school children
- Need to increase community education on prevention.
- Need to increase awareness so that suspected cases are seen at health facilities, and early, so that they can receive appropriate care.

• Case management:
  - Timely and effective management of dengue cases at all levels of health service delivery is essential to reduce mortality from the disease. Guidelines for case management and referral should be based on clinical judgement and local context, rather than diagnostics alone.
  - Develop country-specific guidelines on dengue case management in conjunction with the local situation and evidence. These should include referral pathways and warning signs for deterioration.
  - Document and publish, where possible, details of atypical dengue cases to share key learning.
  - Improve access to appropriate health services.

• Training
  - Community and hospital-based clinicians require regular training in effective case management, utilizing country-specific guidelines.
  - Regular dengue case management training could be provided for clinicians in all levels of care through the setting up of a national core group of trainers (from community/outpatient to hospital settings, including ICU-level and private sector health-care providers).