

HEALTH SECTOR UPDATE – FEBRUARY 2007

SECTOR OVERVIEW

At the forefront of humanitarian health interventions, USAID/OFDA public health initiatives target the most common causes of death and disability in complex emergencies and natural disasters. USAID/OFDA programs promote the use of international guidelines based on best practices in the field of public health as well as support local government capacity to prevent and mitigate the public health consequences of disasters.

In Fiscal Year 2006, USAID/OFDA provided more than \$79 million for public health and preparedness activities in complex emergencies including those in Sudan, the Democratic Republic of the Congo, Iraq, Nepal, Sri Lanka, and Lebanon, as well as in response to natural disasters in Ethiopia, Indonesia, Kenya, and Pakistan. USAID/OFDA provides technical assistance to USAID colleagues and non-governmental organization (NGO) partners to enhance public health programming worldwide.



With USAID/OFDA funds, GOAL staff provide health education sessions to displaced residents in Darfur, Sudan. (Heather Papowitz, USAID)

HORN OF AFRICA: COMMUNICABLE DISEASE OUTBREAK TOOLKIT

Unusually heavy rainfall in 2006 caused widespread flooding across the Horn of Africa, resulting in population displacement, loss of life and livelihoods, and increased incidence of disease. In response, USAID/OFDA supported the U.N. World Health Organization's (WHO) Disease Control in Humanitarian Emergencies (DCE) program. In addition to conducting a health assessment and training stakeholders, WHO produced toolkits for communicable disease control. Each toolkit included a disease profile for the flood-affected countries of Kenya, Somalia, and Ethiopia, as well as a communicable disease risk assessment and a description of proposed interventions in response to the flooding. These documents provided USAID/OFDA and partners with information to prioritize health interventions.

ADDRESSING AVIAN INFLUENZA

In 2005 and 2006, USAID/OFDA provided technical support for the development, purchase, and transport of an avian influenza commodity stockpile to respond to potential avian influenza outbreaks in countries in Southeast Asia, Central Asia, the Middle East, Africa, and Europe. The stockpile, valued at more than \$53 million, contains personal protective equipment, disinfectant, and rapid field diagnostic supplies. USAID/OFDA provided technical assistance to the USAID Avian Influenza Unit to create field guidance, select appropriate commodities, and develop contingency plans for humanitarian assistance in the event of pandemic influenza. In addition, through USAID/OFDA's support for DCE, WHO created and finalized guidelines for Pandemic Influenza in Refugee and Internally Displaced Person (IDP) settings, including a training module for field-based health providers.

LIBERIA: SUPPORTING TRANSITION INITIATIVES

In March 2006, USAID/OFDA and USAID's Bureau for Global Health, Office of Health, Infectious Disease, and Nutrition (USAID/HIDN) developed an action plan to more effectively transition health programs from relief to development. In Liberia, a country that has stabilized after years of civil strife and conflict, USAID/OFDA and USAID/HIDN have been working effectively with USAID/Liberia and the Liberian Ministry of Health and Social Welfare to jointly plan the health sector's transition from relief programs to long-term development activities. Lessons learned and tools developed from this experience will lead to improvements in transition initiatives in other areas, including the Democratic Republic of the Congo and Southern Sudan.

QUALITY ASSURANCE OF PHARMACEUTICALS

Access to safe, effective, and quality medicines is a human right and not a privilege. Unfortunately, in many areas of the developing world, beneficiaries receive sub-standard medicines that are at best ineffective and at worst dangerous. USAID/OFDA is committed to protecting beneficiaries by working to ensure that all essential human and veterinary medicines and vaccines purchased with USAID/OFDA funds meet internationally accepted quality standards. To this end, USAID/OFDA has begun a project to precertify pharmaceutical wholesalers, who must be able to trace each medicine back to the manufacturer. The manufacturer must in turn be able to prove that the medicines are produced under Good Manufacturing Practices (GMP). By tracing the pedigree of each medicine, counterfeit drugs and sub-standard medicines are less likely to enter the drug supply chain and endanger beneficiaries.



Public health educators in Angola teach a community how to prevent cholera. (Alice Ayuma Otiato, USAID)

LECTURE SERIES

USAID/OFDA has initiated a lecture series for staff within USAID/OFDA, USAID's Bureau for Global Health, the Department of State's Bureau of Population, Refugees, and Migration, and NGO staff. This lecture series invites experts in the field of emergency health and nutrition to provide updates on best practices and to establish a forum for discussion of next steps for field implementation. In 2006, USAID/OFDA hosted representatives from WHO, CARE, Concern and Valid International, and the Johns Hopkins School of Public Health to speak on the DCE program and pandemic influenza in refugee and IDP settings, infant and young child feeding in emergencies, community-based therapeutic care, and the use of study design to estimate mortality and nutrition data in emergencies, respectively.