HIGHLIGHTS

- No outbreaks of infectious diseases have been reported.
- Health authorities report a slight increase in cases of seasonal diarrhoea.
- Provision of mental health and psychosocial support services remains a priority need.
- WHO and health partners are extremely concerned that urgently needed health interventions remain unaddressed due to limited funding for Health Cluster activities.

OVERVIEW

The overall security situation in the southern provinces of Osh and Jalal-Abad has stabilized but some tension remains. In light of the beginning of Ramadan the Government lifted the state of emergency, which had still been enforced for the southern provinces.

On 5 August several thousand protesters attempted to march to Bishkek to articulate their support for politician Urmatbek Baryktabasov. Baryktabasov was arrested and charged with attempting to overthrow the government. Parliamentary elections are scheduled for 10 October 2010.

The continuation of humanitarian aid supply is at risk due to substantial funding gaps. Only 20% of the requested USD 7,778.148 for urgently needed health cluster activities, as outlined in the Flash Appeal, has been mobilized so far. If funding gaps persist, WHO activities, mainly focusing on health cluster coordination, surveillance, psychosocial support and mental health will have to be substantially reduced.

HEALTH IMPACT

No outbreaks of infectious diseases and no cases of acute malnutrition have been reported. However there is a slight increase of seasonal diarrhoea cases. This might be related to the low quality of drinking-water resulting from poorly maintained water pipes and polluted surface water. According to the Ministry of Health - Department of Sanitarian and Epidemiological Surveillance (SES), there is no change in the number of cases of anthrax, which is endemic in the country, as compared to previous weeks.

HEALTH STATISTICS

As of 09 August 2010 the Ministry of Health of Kyrgyzstan reported 371 people killed due to the civil unrest, which commenced 10 June 2010. In Osh and Jalal-Abad a total of 2,326 persons received medical treatment. 1,084 people were hospitalized, out of which 900 were discharged. Outpatient services treated 1,243 people.

HEALTH CLUSTER RESPONSE

WHO is working closely with the protection cluster to ensure access to health services for all ethnic population groups. On 28 July, WHO, OCHA and UNHCR met with military representatives in Osh, and on 30 July WHO had a formal meeting with the newly appointed Minister of Health. At
the request of the MOH, all security check points in and around the hospitals were removed, effective 1 August.

CitiHope is conducting a hygiene campaign to encourage the population to boil water before using. In addition CitiHope is supporting 20 psychiatrists to work with affected communities and is gathering data on reproductive health.

ICRC and the Red Crescent Society of Kyrgyzstan are planning to hold a one week training of trainers workshop on specific mental health and psychosocial interventions, starting 23 August 2010. Subsequent to the workshop, the 17 participants from the MOH and NGOs will train other psychiatrists and psychologists and sensitize health workers about psychosocial and mental health needs.

MSF is continuing to provide assistance to the affected populations via mobile medical teams.

UNICEF is focusing on training of health care workers in clinical management of diarrheal diseases. UNICEF has trained 1.216 health care workers in the Osh province and 460 in Jalal-Abad province. This training provided an opportunity for reconciliation and restoration of trust among health care workers of different ethnicities. UNICEF is also involved in psycho-social training of staff working in UNICEF child friendly spaces in Osh.

WHO RESPONSE

WHO is actively supporting the coordination of the gender based violence (GBV) sub-cluster activities in Osh. WHO will assist the GBV sub-cluster to identify relevant health facilities, which have the capacity to screen GBV cases and to provide the appropriate clinical management and care.

WHO translated a summary version of the guidelines on asbestos (Asbestos in emergencies) into Russian. UNHCR plans to purchase protective material for construction workers handling asbestos.

WHO has started procurement, in collaboration with the Ministry of Health, of urgently needed equipment for sanitary–epidemiological stations (SES) in the southern province to strengthen surveillance and outbreak control measures. In addition, a surveillance specialist from Russia will conduct seminars for SES staff in Osh and Jalal-Abad to enhance their capacities and capabilities to detect and contain outbreaks.

MINISTRY OF HEALTH RESPONSE

The new Minister of Health H.E. Dr. Sabirjan Abdikerimov, together with Dr. Dinara Saginbaeva, the Health Coordinator from the MoH and Ms. Elena Bayalieva from the Press Service of MoH, attended the Health Cluster Meeting in Bishkek on August 09, 2010.

H.E. Dr. Abdikerimov thanked all international organizations for providing valuable assistance during the civil unrest. H.E. Dr. Abdikerimov encouraged all health cluster partners to continue closely coordinating their activities with the Ministry of Health.

URGENT NEEDS

Mental health and psycho-social support for all affected victims of the conflict, especially for children, remains a top priority. Health cluster partners are in need of resources to continue activities in mental health and psychosocial support at various levels of interventions.

Health facilities in the region are still lacking basic equipment. The Osh oblast hospital needs an Ultra Sound machine, ECG monitor, and laboratory equipment to perform routine blood analysis.
As many victims of the civil unrest suffered traumatic injuries resulting in physical disabilities, there is an urgent need for prosthesis and physical rehabilitation equipment.

There is also a need for reconstruction work and equipment at the Osh oblast Tuberculosis Hospital, which was affected during the unrest. As a further consequence of the civil unrest, the Osh oblast forensic department requested additional forensic equipment.

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