

FISCAL YEAR (FY) 2018

HEALTH SECTOR UPDATE



An IMC health worker conducts an examination at CAR's *Pointe Kilométrique 3* displacement site. Photo by Patrick Meinhardt/IMC.

Providing Health Care in CAR

USAID/OFDA continues to support emergency health care services for conflict-affected people in the Central African Republic (CAR). Escalating conflict in CAR's Basse-Kotto and Haute-Kotto prefectures since May 2017 generated significant displacement and resultant humanitarian needs, particularly in neighboring Ouaka Prefecture and Haute-Kotto's Bria town, where internally displaced persons lack access to health care and other basic services.

In response to increasing health needs, USAID/OFDA supports International Medical Corps (IMC) to provide health care through mobile clinics and community health centers in Haute-Kotto and to bolster the capacity of health facilities in Ouaka, aiming to reach more than 60,000 people. With nearly \$3.5 million in USAID/OFDA support, IMC is promoting the integration of mental health care into primary health services by training providers in the management and treatment of mental health concerns. IMC also provides health care and psychosocial support sessions to gender-based violence survivors.

Improving Cholera Response Efforts in Yemen

Conflict in Yemen has contributed to a cholera outbreak that began in October 2016 and resurged in April 2017. As of September 2018, health actors had recorded more than 1.2 million suspected cholera cases and 2,500 associated

USAID/OFDA Health Activities

FY 2018 FUNDING

Standalone Global and Regional Health Programs	\$8,287,061
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Health Interventions Worldwide	\$337,925,301
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\$346,212,362¹

Sector Overview

USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA) remains at the forefront of the humanitarian community's efforts to alleviate mortality and morbidity during crises by supporting a wide range of health interventions. USAID/OFDA-supported initiatives include life-saving medical assistance, immunization campaigns, disease surveillance systems, vector-control activities, and capacity-building trainings for local health workers. Recognizing the inextricable link between health and other core humanitarian sectors, particularly nutrition and water, sanitation, and hygiene (WASH), USAID/OFDA supports integrated programs that simultaneously address multiple determinants of health in emergencies, such as access to health facilities, food security, and the availability of safe drinking water.

¹ USAID/OFDA FY 2018 health sector funding supported activities in 23 countries, including Democratic Republic of the Congo, Ethiopia, Sudan, and Syria.

deaths. In response to the outbreak, the UN and non-governmental organizations established treatment protocols, cholera treatment centers, oral rehydration points, and referral pathways to treat cholera patients. Although stakeholders track epidemiological data across health facilities, ongoing bureaucratic impediments and access constraints have led to uncertainty regarding the ability of the surveillance system to accurately capture cholera case numbers and fatality rates and the success of intervention programs in Yemen.

With more than \$249,000 in FY 2018 funding, USAID/OFDA is supporting Johns Hopkins University to identify lessons learned from cholera response efforts in Yemen during the 2016–2017 outbreak and provide recommendations for responding to future epidemics in Yemen and other complex emergency settings. By examining and assessing the effectiveness of response decisions made by health and WASH actors and analyzing response logistics, coordination, and financing, the study will allow USAID/OFDA and other stakeholders to make informed response decisions in Yemen and other countries experiencing cholera epidemics in conflict settings.

Expanding Adolescents' Access to Emergency Health Care

With \$450,000 in FY 2018 funding, USAID/OFDA is supporting the International Rescue Committee (IRC) to understand and increase adolescents' access to health care in complex emergencies. The IRC is conducting operational research by piloting different intervention packages in Nigeria and South Sudan to determine which are the most effective in expanding access to services and increasing adolescent engagement in health programs. Reaching approximately 26,000 people and 9,400 people in Nigeria and South Sudan, respectively, the IRC works with health centers to conduct various activities, including awareness sessions, community mobilization, and participatory research. The pilot programs will generate lessons for humanitarian stakeholders to improve health programming for adolescents in humanitarian crises.

Preventing and Mitigating the Impact of Attacks on Emergency Health Facilities

In FY 2018, USAID/OFDA provided \$500,000 to the UN World Health Organization to research the impact of targeted attacks on health care workers and facilities to document best practices for preventing such attacks and mitigating the consequences on service provision. The project aims to develop an understanding of the short- and long-term consequences of health care attacks on service accessibility, delivery, and quality, while providing evidence to inform policymakers and stakeholders on methods to prevent attacks and minimize service delivery disruptions. In recent years, relief actors have recorded an increasing number of attacks against health workers and facilities in complex emergency settings, including in Syria, where attacks impacting health facilities resulted in the deaths of 97 people, including 17 health care providers, from January–September 2018.

Supporting the IRC to Lead Global Learning on Responding to NCDs

With USAID/OFDA support, the IRC is coordinating with a consortium of humanitarian organizations globally to develop, review, and validate non-communicable disease (NCD) resource materials to train staff operating in humanitarian response settings. The project will also evaluate the use of interagency emergency health kits for NCDs—which include medicine, medical devices, and supplies to manage common NCDs—in at least two countries. In addition, the IRC will support the inclusion of the NCD toolkit in humanitarian operational guidance for use in field settings, while collecting information regarding the utility and challenges associated with the tool.

Improving Health Outcomes Through Cash-Based Relief Programs

USAID/OFDA is funding operational research alongside cash transfer programs in Cameroon and Pakistan to determine how often and by what means crisis-affected households use cash assistance to increase access to health care. The study will use surveys to capture the expenditure patterns of households receiving cash assistance grants, specifically focusing on direct and indirect health expenditures over a six-month period. The results will help relief actors assess the appropriateness of cash-for-health services in humanitarian settings and expand the international community's understanding of the modality.