

HIGHLIGHTS

- No outbreaks of infectious diseases have been reported.
- Authorities report a slight increase in cases of seasonal diarrhoea and zoonotic diseases.
- Assessments showed no evidence of malnutrition.
- The humanitarian health response increasingly focuses on recovery efforts.
- Capacity to provide mental health and psychosocial support services has been enhanced.
- Coordination and promotion of standards and best practices are priorities for the health cluster at the national and field levels.

HEALTH IMPACT¹

- A slight increase in seasonal diarrhoea cases is related to the hot weather, and the poor drinking-water quality resulting from poorly maintained water pipes and polluted surface water.
- Zoonotic diseases have increased slightly; 16 cases of anthrax were registered in Jalal-Abad oblast and patients have been hospitalized. Cases of brucellosis and echinococcosis have been registered, associated with farmers' practice of not using veterinary services due to lack of money. The Ministry of Health considers the increase within the normal range.
- Assessments showed no evidence of malnutrition, although micronutrient deficiencies might be a problem among children aged under 5 years. Food prices are high, but are expected to decrease once bazaars and shops reopen.
- While infant formula has been distributed, continuous breastfeeding is encouraged.
- One of the facilities in Osh city registered 18 cases of sexual violence. Gender-based and sexual violence may be underreported.

HEALTH STATISTICS

- As of 5 July 2010, the Ministry of Health gave the following totals of deaths and injuries reported from Osh, Jalal-Abad and Bishkek oblasts since the beginning of the clashes (see table). According to the Ministry, five patients from the Jalal-Abad oblast and a few from Osh oblast remain in hospital in Andijan, Uzbekistan for treatment.

¹ Source: Ministry of Health of Kyrgyzstan.

Status	22 June	24 June	29 June	5 July
Deaths ^a	251	261	294 ^b	309
Injuries				
Hospital inpatients	1033	1040	1050 (185 still in hospital)	1075 (141 still in hospital)
Outpatients	1139	1200	–	1243
Total	2192	2231	2231	2318

^a The number of deaths is estimated to be about 10 times these figures.

^b Men suffered 215 of these deaths.

HEALTH SECTOR RESPONSE

- Two meetings were held on 5 July at United Nations House in Bishkek. WHO chaired the most recent health cluster coordination meeting, attended by 22 representatives of 11 organizations, and led the second meeting of the mental health working group, attended by 21 representatives of 11 organizations.
- The first coordination meeting of the health cluster and the mental health working group was held in Osh on Saturday, 3 June; 11 representatives of 8 organizations attended. The participants decided to hold such meetings weekly.

WHO RESPONSE

- WHO opened a field office in Osh city and is strengthening its operational capacity. For security reasons, it had to relocate the office to Lenin Str. No. 121.
- From 29 June to 3 July, WHO, the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF) carried out a joint needs assessment of health facilities in Osh and Jalal-Abad oblasts and cities, and visited both Uzbek and Kyrgyz communities in villages and settlements. The assessment teams are finishing their report; it will soon be published online (<http://kg.humanitarianresponse.info>) and shared with partners and donors.
- According to the preliminary results, health care facilities did not suffer substantial damage and are functioning normally. Five ambulances were destroyed. Nevertheless, Uzbek communities are reluctant to use facilities run by Kyrgyz health staff. As a result, the number of home births has increased in the Uzbek population. In addition, Kyrgyz medical staff are hesitant to visit and serve Uzbek settlements.
- WHO held meetings with the Ministry of Health and the Centre for Psychiatric Health in Bishkek to gather information on existing plans, available staff and the needs for training and assistance to strengthen the health authorities' capacity to provide mental health and psychosocial support services. WHO agreed to provide further support to assist with training and capacity building.
- The next health cluster meeting will be held on Saturday, 10 July, at 15:00.

HUMANITARIAN AID

- Humanitarian supplies were distributed to facilities in Osh: the city hospital (1 trauma kit), and the oblast centre for family medicine and maternity hospital. Another trauma kit is stored at the United Nations warehouse and will be released as required.
- WHO keeps a list of medical kits distributed to health facilities. As of 2 July, WHO had distributed 5 interagency emergency health kits (IEHK) basic units and 1 supplementary unit, 2 trauma kits to the Osh city hospital, 5 IEHK basic units and 600 ampoules of oxytocin to the oblast maternity hospital, and 3200 tablets of albendazole (collected from the basic units) to the Osh oblast sanitary–epidemiological services (SES), for urgent treatment of 38 patients with echinococcosis.
- More and more national and international partners are taking part in providing psychosocial support services to the population groups affected by the unrest. The resulting need for stronger coordination, capacity building and adherence to national standards is to be addressed by the health cluster.
- With the Ministry of Health, WHO is collecting information to keep track of humanitarian health donations.

MINISTRY OF HEALTH RESPONSE

- Hospitals in Osh and Jalal-Abad are operational; stocks of medical supplies are reported to be sufficient to address current needs.
- All refugees and most patients have returned from Uzbekistan. According to the Ministry of Health's figures, as of 7 July, 5 patients from Jalal-Abad and a few from Osh oblast were still hospitalized in Andijan.
- SES in the southern part of Kyrgyzstan are fully operational.
- Storage facilities are functioning; vaccine stocks are stored properly, with the cold chain intact.
- A health needs assessment will examine vaccine storage at the primary health care level (polyclinics) and needs/requests per visited facility.
- The Government sent 400 children to holiday resorts in northern Kyrgyzstan, where psychosocial support services are available.
- The Ministry of Health will share information with WHO and health cluster partners on available psychologists/psychiatrists in both oblasts and agreed to develop training plans with them.

URGENT NEEDS

- Mental health support to all ethnic groups needs stronger coordination and further strengthening to provide services for acute mental disorders and to prevent post-traumatic stress disorder.
- One ton of chlorine and one ton of hyperchloride calcium were requested for the Osh oblast SES for water purification. Poor maintenance of water pipes and polluted surface water are the main reasons for the poor water quality. Through the water and sanitation cluster, UNICEF was requested to provide the required supplies.
- Although stocks of drugs and medical supplies are sufficient, problems with distribution have caused some gaps in primary health care facilities.

- Up until 3 July, the central pharmacy was the only facility providing pharmaceuticals in Osh. This triggered drug supply problems for patients with chronic diseases and interruptions in their treatment.
- The humanitarian health response increasingly focuses on recovery efforts. Nevertheless, some gaps remain, including drugs for chronic diseases and undersupply of primary health care facilities with essential drugs, dressing materials and basic equipment.
- The partners involved in the mental health working group request that the psychological training modules be standardized to comply with international guidelines. WHO is working with the Ministry of Health to support training and capacity building.

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