Floods in the Balkans:



Bosnia and Herzegovina, Croatia and Serbia Situation Report No. 2

3 June 2014

SITUATION OVERVIEW









- In Bosnia and Herzegovina, 23 people died, 19 500 people are displaced and 1 million affected. 1384 people are accommodated in 42 temporary accommodation facilities. In Croatia, two people died, 15 000 are displaced and 30 000 need assistance. In Serbia, 34 people died, 32 000 people are displaced and 180 000 need assistance; 1.6 million live in the 39 affected municipalities. The number of collective shelters is decreasing, with around 2500 people still accommodated in shelters in Belgrade.
- While transition from the response to the recovery phase is under way, families are returning to their homes, to start cleaning and repairing them.
- The water levels have been falling in most areas, but stagnating in some.
- Rural areas sustained extensive agricultural losses, including of livestock and crops in all three countries.
- Owing to significant infrastructure damage, water supply is still hampered in large parts of the affected areas. The
 electricity supply has been re-established in most areas. Cleaning, debris removal and disinfection work are under
 way.
- Humanitarian assistance and help from friends and family are in general meeting the needs for food and drinking-
- In Bosnia and Herzegovina, the risk from dislodged mines remains high. While unexploded ordnance has not yet caused any deaths or injuries, three explosions have been reported so far. Activities to raise awareness of the risk are under way. This is also an issue in some parts of Croatia: Gunja and Vrbanja municipalities.
- The floods triggered a large number of landslides and mudslides: around 2600 in Bosnia and Herzegovina alone.
- Discussions continue among Bosnia and Herzegovina, Croatia and Serbia on the mosquito-control measures to be undertaken in the flood-affected areas.

HEALTH IMPACTS

- The epidemiological situation is stable and no outbreaks have been reported in flood-affected areas during the last week. Local and national health authorities are conducting enhanced epidemiological surveillance.
- In Bosnia and Herzegovina, preliminary reports suggest that four primary health care centres and 15 field outposts were damaged; no major damage to hospitals has been reported. In Croatia, seven primary health care centres were damaged. In Serbia, health services for patients with chronic diseases and special needs such as pregnant women, infants, children under 5 years old and disabled people have been partly or completely interrupted in affected areas. Access to health care remains disrupted in some areas, with at least 14 health facilities damaged or destroyed, and stocks of equipment, medications and vaccines were lost, primarily in western areas.
- Debris, waste, standing water and structural damage to institutions pose health risks for returnees and clean-up crews. Many clean-up workers and other people are removing debris without the recommended personal protective equipment, such as hard-soled boots and gloves, while children and others are walking on debris without shoes.
- Damage to the health infrastructure and dislocation of the population have interrupted routine immunization in some areas. National health systems are assessing the effects of the floods and power failures on vaccine stocks in the affected areas.

WHO RESPONSE

- The Emergency Support Team established at the WHO Regional Office for Europe's Emergency Operations Centre continues to support all three countries through their WHO country offices.
- An expert in emergency preparedness and response from the WHO Regional Office for Europe was sent to Bosnia and Herzegovina to support the country office in assessing health needs and starting coordination of the health sector. One expert in emergency management from WHO's global surge roster was sent to Serbia to support the country office. A team of experts (in emergency preparedness and response, environmental health, water and sanitation, chemical hazards, food safety and communicable diseases) from the Regional Office's WHO European Centre for Environment and Health has been deployed to Bosnia and Herzegovina and Serbia to assist in the aftermath of the disaster.

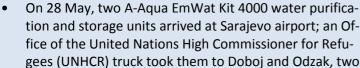




Image 1: Submerged buildings and cars in Obrenovac, the town in Serbia the hardest hit by the floods. © WHO/Miljana Grbic

gees (UNHCR) truck took them to Doboj and Odzak, two of the worst-affected areas in Bosnia and Herzegovina. The unit includes all critical steps for treating highly turbid flood water: coagulation, filtration and disinfection. Each can produce up to 96 000 L drinking-water per day, supplying water for 4800 people.

- Two Interagency Emergency Health Kits (IEHKs) arrived in Bosnia and Herzegovina on 31 May 2014 and were handed over to the health ministries of the Federation of Bosnia and Herzegovina and Republic Srpska on 2 June. One IEHK, one interagency diarrhoeal disease kit and one water purification kit arrived in Croatia on 30 May. In Serbia, two IEHKs and water purification kits were expected to arrive on 3 June. WHO provided all kits with financial support from Italy, Norway and the Russian Federation.
- Health sector coordination meetings were conducted in Bosnia and Herzegovina on 27 May and Serbia on 3 June, facilitated by the health ministries and WHO.
- In Croatia, 50 000 leaflets and 500 posters with public health advice were printed, shipped and distributed in the affected areas.
- In Serbia, 25 000 leaflets, with public health advice developed by WHO, were distributed.



Image 2: Water purification and storage units arriving at Sarajevo airport. © WHO

- In Bosnia and Herzegovina, workshops on preparing the in-depth, multisectoral, post-disaster needs assessment were conducted on 29 and 30 May with expert support from WHO.
- Experts from WHO and the European Centre for Disease Prevention and Control provide technical advice on vector-control measures to all three countries. WHO facilitated the donation of laboratory equipment from the Norwegian Institute of Public Health to the Institute of Public Health of Serbia.
- A donor proposal was submitted to the United Nations Central Emergency Response Fund (CERF) to support life-saving health interventions in Serbia.
- The Government of Norway pledged Nkr 5 million to support WHO's activities in Serbia through coordinated public health interventions. Further financial support will be required to expand WHO's support to the affected countries.

HEALTH PRIORITIES

- The lack of access to safe drinking-water and the displacement of communities to temporary shelters pose a serious risk of outbreaks of communicable disease. Surveillance and early warning systems for communicable diseases in the affected areas need to be further strengthened and enhanced. The increased mosquito breeding in a region that experienced West Nile activity in the previous years is of particular concern.
- Dislodged landmines pose a serious risk of injury In Bosnia and Herzegovina and some parts of Croatia.
- Continuing the removal of dead livestock and decontamination of soil are priorities, and health services need to be re-established and damaged health facilities repaired. Mental health and psychosocial support services need to be provided to people affected by the disaster.



Image 3: WHO staff on site visit in a shelter for flood evacuees located at the Belgrade Fair ground in Belgrade. At the time of the WHO visit, there were 450 evacuated persons accommodated in this shelter, which at its peak occupancy held more than 700 persons. © WHO/Miljana Grbic

More information and advice on preparing for and responding to emergencies, including flooding, can be found on the WHO/Europe website (http://www.euro.who.int/emergencies).

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