



HIGHLIGHTS

- On 10 June civil unrest flared up again in the city of Osh, with violent clashes between ethnic groups and looting.
- Violence has since spread to other rayons in southern Kyrgyzstan, including Djalalabad, and the security situation further deteriorated.
- 114 people are reported dead, and over 800 were hospitalized, mainly trauma cases with injuries.
- Health services in Osh, Djalalabad and surrounding towns lack certain medicines and supplies.
- Ethnic Uzbeks – mainly women, children and old people – have been reported to flee the violence and to cross the border to Uzbekistan.
- The Kyrgyz Government has declared a state of emergency in Osh and appealed to the Russian Federation for support to restore order.
- United Nations agencies in Uzbekistan have joined the Ministry of Foreign Affairs to assess the needs of the displaced people in the region bordering Kyrgyzstan.
- WHO is working with the health ministries of Kyrgyzstan and Uzbekistan to limit the potential impact of the security situation and displacement on the supplementary immunization activities under way following the recent poliomyelitis outbreak in Tajikistan.
- The United Nations security phase remains phase 2 for all of Kyrgyzstan, but is expected to be raised to phase 3 for the Osh region.

HEALTH IMPACT¹

- 114 people were killed in violent clashes, and over 800 hospitalized, 556 of them in hospitals in Osh city; 46 were hospitalized in Djalalabad and Suzak hospitals.
- Health supplies are being deployed to Osh and Djalalabad, but health authorities face problems with local logistics and transport owing to the tense security situation.
- Health services remain functional, but report gaps in medicines and medical supplies – and security for health workers and patients is a concern.

¹ Source: Ministry of Health of Kyrgyzstan.

HEALTH SECTOR RESPONSE

- Some 50 health professionals have been deployed from other parts of Kyrgyzstan to strengthen the health services in Osh and surrounding areas.
- Pre-positioned medicines and medical supplies are being sent from Bishkek to support hospitals in Osh that are treating injured people.
- An updated list of urgently needed medicines and medical supplies was compiled and shared with health partners.
- The National Red Crescent Society is supporting hospitals in Osh with supplies and food items.
- The International Committee of the Red Cross (ICRC) has provided trauma supplies to local hospitals.

WHO RESPONSE

- The WHO Country Office, Kyrgyzstan holds regular health coordination meetings with the Ministry of Health involving all health partners, with health-sector interagency response planning in progress.
- Local WHO disaster preparedness and response staff in Kyrgyzstan are collecting information updates from health facilities, jointly with health authorities and nongovernmental organization (NGO) partners, on health conditions, patient flow, urgently needed supplies (food items and energy supply) and pharmaceuticals.
- The needs for food supplies in affected hospitals and transport of food items are jointly addressed with the World Food Programme (WFP), the Ministry of Health and NGO partners.
- The WHO Country Office, Kyrgyzstan – with logistical support from WHO headquarters and CERF (Central Emergency Response Fund) funding – is mobilizing additional essential medical supplies to fill current gaps.
- One trauma kit (with supplies to treat 100 trauma cases), funded with support from the Italian Government, has been sent to Osh.
- The Head of the WHO Country Office, Uzbekistan has joined in the making of a multisectoral assessment to determine the health needs of displaced people in the region bordering Kyrgyzstan.
- The WHO Regional Office for Europe has deployed an expert in disaster preparedness and response to Bishkek to strengthen the Country Office and to support assessment and coordination.

URGENT NEEDS

- There are some evolving gaps in medicines, medical equipment and other supplies; lists of urgently needed items are regularly updated.
- The tense security situation is creating problems with local distribution of medical supplies and humanitarian goods.
- Lack of ambulances and the tense security situation of health workers are an increasing challenge for the transport, referral and treatment of trauma victims.
- The capacity to provide psychosocial support is limited.

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