

MSF IN YEMEN

ACTIVITY REPORT 2010



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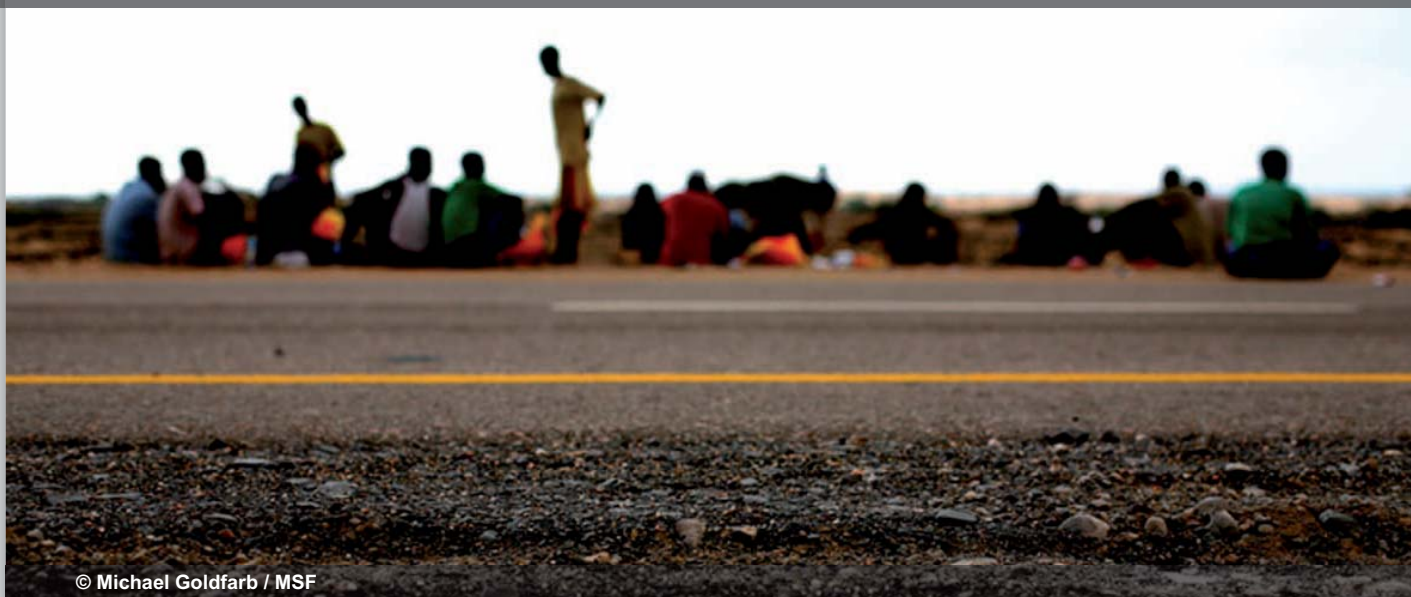
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INTRODUCTION



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Over 2010, MSF has continued to provide medical relief to populations in need in different areas of Yemen.

In the North, where unrest continued to heavily affect access to healthcare for vulnerable populations, MSF teams worked to extend access to quality healthcare for those most in need.

MSF also provided medical care to displaced people in Saada governorate as well as in the neighbouring governorates of Hajjah and Amran and in the capital city of Sana'a. MSF helped offer a free-of-charge access to healthcare including surgery for both displaced and resident populations.

During the past year, MSF teams supported a large-scale measles immunization campaign, and they are currently working in several areas within Saada governorate, including the capital city, to strengthen hospitalisation capacities.

In Haradh, Hajjah governorate, MSF dramatically scaled up its activities in order to help displaced people to access healthcare, including general consultations, maternal and reproductive care, hospitalisations, nutritional rehabilitation, surgery and psycho-social support.

MSF also intervenes in Lahj Governate, to help local authorities to cope with the health needs of a population affected by unrest, in one of the poorest districts in the Governorate.

MSF has also started a partnership with Yemeni Health authorities to improve the treatment and reduce the stigmatisation of HIV / AIDS in the capital city of Sana'a.

Providing quality healthcare to the most vulnerable populations of Yemen has continued to be our constant concern during the last year.

Through the commitment of our national and international staff as well as the collaboration with Yemeni authorities, we hope to continue providing extensive and efficient medical support to Yemeni people.

SAADA GOVERNORATE



RESPONSE TO A MEASLES OUTBREAK

Between January and June 2010, MSF treated more than 1.500 measles cases in the Saada governorate, with 400 hospitalisations.

MSF teams also supported a measles immunisation campaign which involved vaccination of over 120.000 children between 2 and 15 years-old.

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In the aftermath of the sixth round of Saada war, medical needs were still significant in the northern governorate of Saada.

The last six years of war have weakened the local health system and unrest still makes access to healthcare for those most in need extremely complicated.

The conflict has also led to important displacements of people, thus adding pressure on vital resources such as drinkable water for both displaced and resident populations. Endemic diseases such as measles have also reached significant prevalence rates amongst children, who are the most vulnerable.

MSF thus continues to run medical activities in two hospitals and has started a program of nutritional rehabilitation for children under five-year old in Al-Jamouri hospital, Saada.

AL TALH RURAL HOSPITAL

MSF's support to Al Talh hospital was started again in March 2010, after six months of suspension due to intense fighting in the region. In addition to support to the Emergency Room, inpatient department, maternity care as well as programs for children nutritional rehabilitation, MSF progressively extended its support to the outpatient department and to routine immunization activities. In 2010, more than 7.000 consultations were performed, in addition to 4.500 patients brought in the Emergency Room.

150 children have been treated by MSF and MoPH teams during a measles outbreak between April and June 2010.

SAADA GOVERNORATE

RAZEH RURAL HOSPITAL

In April 2010, MSF started again its medical activities in the rural Hospital of Razeh. MSF had been working in this hospital since 2007 but had to interrupt its activities in October 2009 as fighting was directly affecting the hospital. The Razeh rural Hospital is currently providing external consultations, emergency healthcare for life-threatening pathologies, as well as maternity care. Patients in need of hospitalisation are referred either towards Al Talh Hospital or Saada town.

A total of over 13.500 consultations were performed since the reopening of the hospital in 2009, and more than 7.500 emergency cases have been treated. Close to 400 Razeh hospital patients have been referred to other health structures for hospitalisation and/or surgery and 314 women have safely given birth.

RESPONSE TO POPULATION DISPLACEMENTS

An estimated 175 000 people were forced to displace within Saada governorate between August, 2009 and February, 2010. Those people add to the estimated 100 000 people already displaced by the previous rounds of the war. MSF was able to provide healthcare, such as water supply and relief items, to those displaced populations in several areas of the governorate, such as Mandabah and Noshoor amongst others.

A support was also provided to ER and in-patient department of Saada Teaching Hospital during two months.

A total of 29 000 external consultations was provided between January and December, 2010.

SURGICAL CARE TO BE PROVIDED IN AL TALH

Surgical activities are planned to restart soon in Al Talh rural hospital. MSF has been providing free surgical care in Al Talh between October 2008 and September 2009, when the intense fighting caused a suspension of activities.

Our teams are currently working to restart those activities, as well as developing referrals of patients in need of surgical care from other areas of the governorate towards Al Talh hospital.



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AL JAMOURI HOSPITAL, SAADA

In July 2010, MSF opened a nutritional program in Al-Jamouri hospital, Saada town, to respond to the prevalence of malnutrition cases in children under five years-old. This pathology, which results from lack of adapted food both in quantity and quality for the needs of growing children, can easily be treated (when there are no associated diseases) through ambulatory approaches.

Almost 95% of the 820 severely malnourished children admitted in the Al Jamouri Hospital nutritional program have therefore been treated from their home, through therapeutic ready-to-use food.

In 2011, we expect to extend these activities to children severely affected by other life-threatening illnesses, such as measles, malaria or diarrhoea.

AMRAN GOVERNORATE



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In March 2010, MSF teams conducted an assessment of medical needs in Amran governorate, where some 70 000 people had sought haven from the fighting in Saada governorate. After a first intervention in Beit-el-Sultan Health Unit, Amran city, MSF started to support some departments of Al-Salam Hospital, in Khameer, as well as Huth Health Unit, in order to provide healthcare to both resident and displaced population.

AL-SALAAM HOSPITAL, KHAMEER

In this district hospital, MSF started its intervention in April, 2010, to respond to increased medical needs after the displacement of tens of thousands people from the neighbouring governorate of Saada. Activities were also extended to improve access to primary and secondary healthcare to the resident population.

MSF intervenes in the Emergency Room, the 36-beds inpatient department, and has progressively started to run obstetrical care, nutritional rehabilitation as well as surgery.

Outpatient consultations continue to be run by Mo-PHP staff.

Between April and December, 2010, almost 10 000 people received an emergency consultation and more than 900 patients were hospitalised. During the last five months of the year, 313 women could

EXTENDING ACCESS TO HEALTHCARE IN NORTHERN AMRAN

In 2011, MSF teams will start outreach activities through mobile medical teams in Al Qafrah, Al Ashah, Bani Suram and Hurf Sufyan. This is to improve and make easily available free quality healthcare for people of these areas, where both endemic and epidemic diseases, such as malnutrition and malaria, have a strong impact on the most vulnerable.

Free referrals towards Huth Health Unit or Khameer hospital will be also put in place for the patients in need of a hospitalization.

safely give birth in the hospital.

Also, from October to December MSF teams conducted 443 surgical interventions, out of which 105 were linked to violence and 27 were caesarean sections.

AMRAN GOVERNORATE

HUTH HEALTH UNIT

In this Health Unit, MSF supports the Emergency Room, as well as the outpatient department and the maternity, by providing supplementary material, drugs and medical staff. Patients in need of surgery are transferred to Khameer hospital.

Between March and December, 2010, an average of 2 000 external consultations, out of which over 250 emergency consultations, was performed each month. Also, 173 deliveries were performed under medical supervision.

In 2011, MSF and the MoPHP are currently

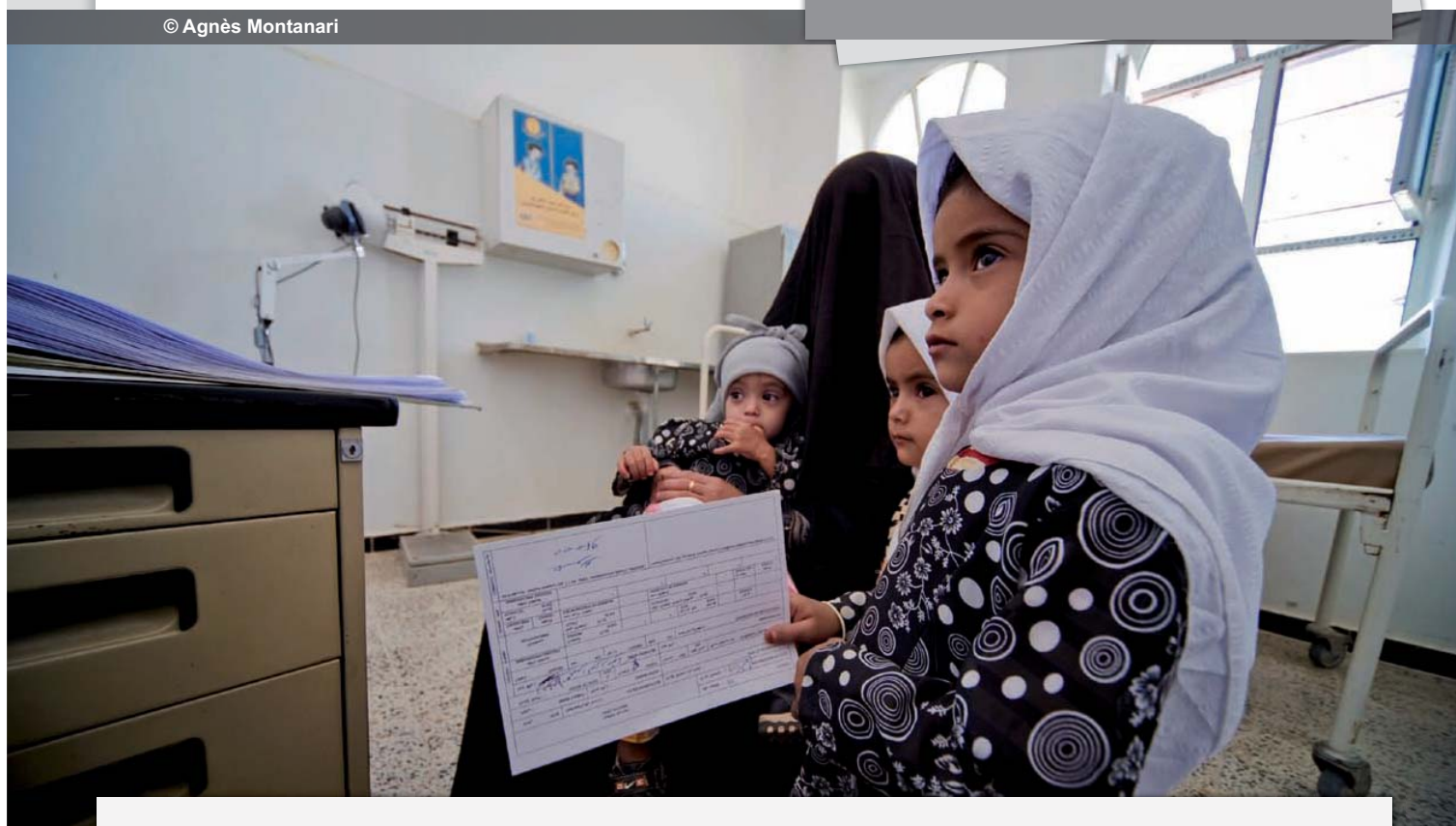
planning to start inpatient activities in this health unit, with 5 to 10 beds allocated to patients in need of a hospitalisation.

SUPPORT TO BEIT-EL-SULTAN HEALTH UNIT

Between March and July 2010, following the arrival of thousands of displaced people in the city of Amran, MSF intervened to help the MoPHP meet their increased medical needs.

In Beit-el-Sultan Health Unit emergency consultations, outpatient consultations and post-natal care were offered free of charge. About 10,000 patients benefitted from these services.

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NUTRITIONAL SERVICES IN KHOMEER

In July 2010, MSF started providing nutritional services for the malnourished children of the northern Amran governorate. In addition to an ambulatory feeding centre, MSF also rehabilitated a ward of Al-Salam hospital in Khameer in order to set up a 12-bed therapeutic feeding centre for malnourished children in need of hospitalisation.

As of December 2010, more than 250 children had benefitted from treatment for malnutrition and its medical complications.

HAJJAH GOVERNORATE

MEASLES VACCINATION CAMPAIGN IN AL MAZRAQ

End of January 2010, several measles cases were diagnosed within IDPs coming from Saada living in Al-Mazraq IDP camps. MSF and MoPHP therefore decided to perform a measles vaccination campaign.

During the seven days of vaccination, beginning of February, 7 849 children from IDPs population were immunized. Coverage was 85%.

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Since August 2009, around 140,000 people fled Sa'ada towards Hajjah governorate, where camps hosting the displaced were set up near Al Mazraq town. Ten months after the cease-fire in Sa'ada, these camps continue to host approximately 25,000 displaced persons.

MSF started providing nutritional services in November 2009 for both the displaced and resident population in the Al Mazraq camps and surrounding settlements. Since March 2010, MSF and the Ministry of Public Health have been providing more comprehensive medical services for the internally displaced people (IDPs) and hosting people from facilities near Camp 3.

NUTRITIONAL ACTIVITIES IN AL MAZRAQ CAMPS

Since December 2009, the Outpatient Therapeutic Program (OTP) for ambulatory treatment of malnutrition has been in place in five locations (Al Mazraq 1, Al Mazraq 2, Al Mazraq 3, Al Gofl settlement, and the village of Mustaba).

The Therapeutic Feeding Centre (TFC) located now in the new Al Mazraq Hospital, provides 24 hour medical care for severely malnourished children with medical complications.

During 2010, more than 3,300 children were admitted in the program, out of which 353 were hospitalized in the therapeutic centre.

AL MAZRAQ HOSPITAL

In August 2010 MSF received permission by the Organisation of Islamic Countries (OIC) and the Qatari Red Crescent Society to manage the prefabricated Hospital that they had constructed amid the IDP camps.

Since then, MSF has been providing free, quality medical care for IDPs and the host population in the Emergency Room, Inpatient Department, laboratory, therapeutic feeding centre and mother and child health care, including a delivery service.

MSF staff performed 3,370 emergency consultations, admitted 642 patients in the inpatient department, and offered antenatal consultations

HAJJAH GOVERNORATE

to 1,767 women. MSF also organises and take care of the referrals of emergency cases requiring surgical treatment to hospitals in Haradh, Hajjah, Al Hodeida and Sana'a.

MENTAL HEALTH ACTIVITIES

MSF runs a mental health programme which provides mental health counselling for groups and individuals, education with respect to mental health issues, and special support for survivors of Sexual and Gender Based Violence (SGBV) as well as for patients and families in the nutritional program. The Mental Health team carried out psycho-educational activities for 2,251 people in the camps, ran 885 individual counselling sessions as well as psychosocial support sessions. A referral system is being organised for patients requiring psychiatric treatment.

AL MAZRAQ 3 OUTPATIENTS CLINIC (OPD)

MSF has provided primary health care to IDPs and the host population in an outpatient Clinic next

to Camp 3 since March 2010. The OPD provides free general medical consultations and treatment, screening for malnutrition, EPI, mental health counselling, and arranges referral of patients requiring hospitalisation to the Al Mazraq Hospital. In 2010, MSF was able to provide free-of-charge outpatient consultations to over 21,558 people.

PROVIDING HEALTHCARE TO MIGRANTS POPULATIONS

Since September 2010, around 3,000 migrants who were trying to cross the Saudi border have found themselves blocked in Haradh town and its surroundings due to increased security at the border. In mid-November, IOM started to organize voluntary repatriation for these persons.

During these months, MSF organized several mobile clinics and regularly treated migrants referred to the hospital. The most frequent pathologies were dehydration and, in some cases, trauma.

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LAHJ GOVERNORATE

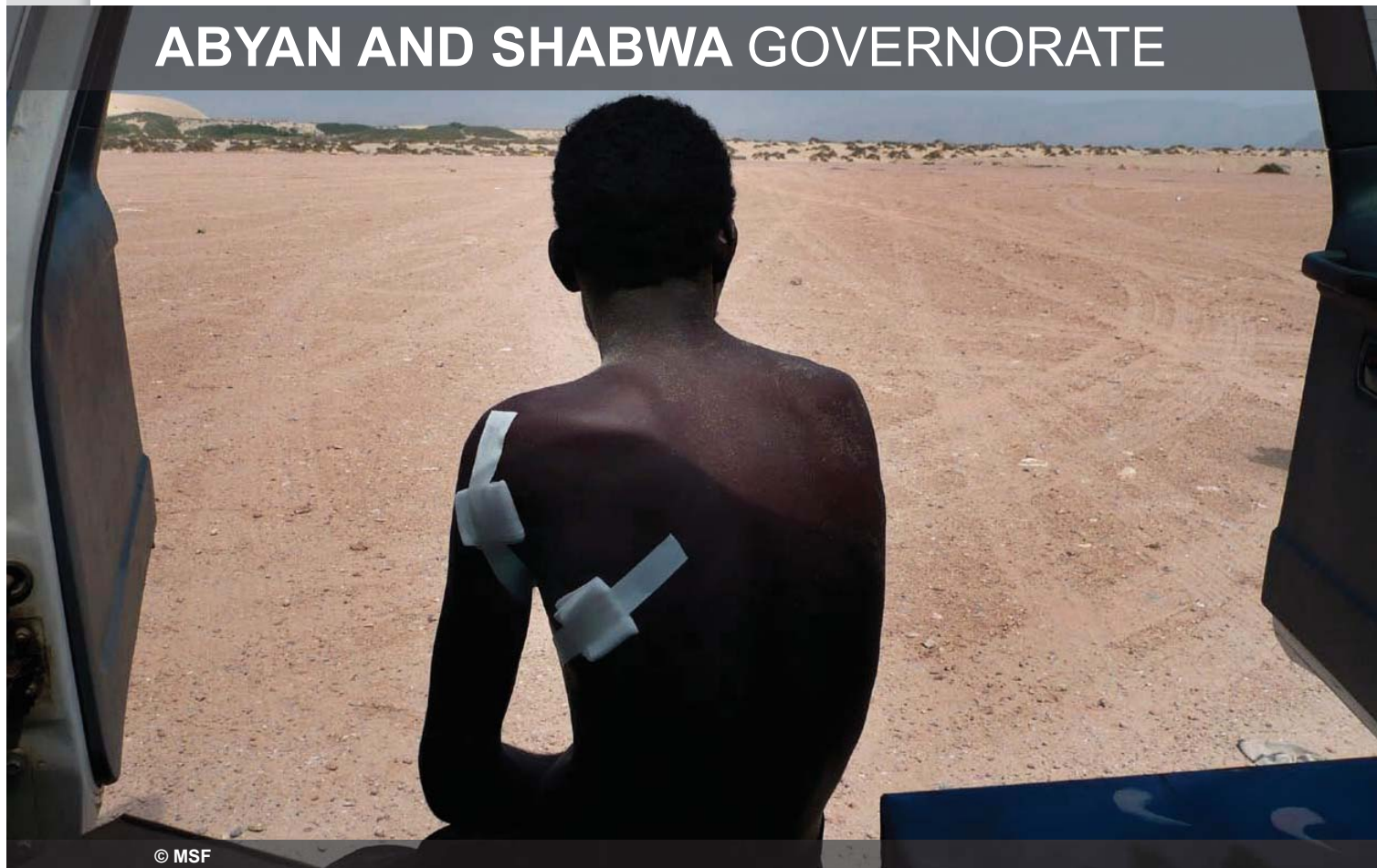
Since July 2010, MSF has started working with the Ministry of Public Health and the local population in Radfan, Lahj Governate. Radfan is one of the poorest districts in the governorate, with a health care system in need of support and a population affected by southern unrest.

RADFAN HOSPITAL

MSF supports the public hospital in Radfan, which is the reference hospital for four districts and serves a population of approximately 160,000 people. Currently MSF teams intervene in the Emergency Room, in-patient department and in providing emergency surgery in the recently refurbished operating theatres. Referrals are also organised by MSF to other hospitals in Lahj and Aden for emergency cases needing further treatment. MoPHP staff runs the outpatient department and MSF provides nutritional treatment for severely malnourished children. Over 5,000 emergency cases have received free treatment since the project started in July, over 300 people have received inpatient care and 392 surgical procedures have been performed.



ABYAN AND SHABWA GOVERNORATE



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In March 2010, MSF organised the handover of its programs to assist migrants and refugees on the southern shores of Yemen. Since September 2007 MSF has been present in Abyan and Shabwa Governorates to provide medical and humanitarian assistance to refugees and migrants arriving at the Yemeni coast.

AHWAR RECEPTION CENTER, AND HOSPITAL

A system of focal points in the communities along the coast alerted MSF teams when boats arrived. When new arrivals were reported, a mobile MSF team went to the beach to provide first medical aid and psychological assistance, food and water and kits with clothes and sanitary products. MSF also ran the health centre at Ahwar Reception Centre (ARC), where new arrivals are registered and where they are able to stay and rest for some days to recover from the harsh journey. In addition MSF provided assistance to the local population in the emergency room at Ahwar hospital.

Since the beginning of activities in September 2007, MSF has denounced the harsh treatment of the refugees and migrants crossing the Gulf of Aden, where thousands have died during the last years. We have also advocated for an improvement of the conditions in reception in Yemen.

During the first months of the year 2010 the number of the refugees arriving to these areas had very much reduced and in March 2010, MSF was able to hand over to UNCHR and its implementing partners its programs in these areas.

Between January and March 2010, MSF teams provided humanitarian aid to 894 refugees arriving to Yemen.

SANA'A GOVERNORATE



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In July 2010 MSF decided to commence services for people living HIV/AIDS in Yemen. This situation is alarming not because of the prevalence rate (which is relatively low at 0.2%) but because of the stigma and discrimination that those with HIV/AIDS experience. The patients are often neglected, marginalised and discriminated against by society as well by health personnel resulting sometimes in refusal of treatment or admission to hospital. People living with HIV are also excluded from job opportunities, and with the resultant denial of access to regular income there is often a deterioration of their medical status.

AL-GUMHURI HOSPITAL

MSF works alongside MOPHP staff in Al Gumhuri Hospital in the capital city, Sana'a. Al Gumhuri is the main referral hospital for people living with HIV/AIDS in Yemen. Together, MSF and MOPHP are focused on improving the quality of the HIV/AIDS related treatment, care and services and ensuring they are fully integrated into the different departments of the Hospital.

COUNSELLING AND TESTING

MSF supports the MOPHP's work in the counselling and testing services in Al Gumhuri Hospital, 1 PMTCT and 4 VCT-PICT sites in Sana'a city. MSF gives technical support and ongoing training for the MOPHP staff and volunteers working in these sites.

AWARENESS RAISING

MSF's objective in this project is to help reduce the stigma and discrimination, improve acceptance and provide integrated quality care and treatment for PLWHA's in Sana'a City. One of the key strategies to achieve this is through provision of suitable information, education and communication to improve knowledge about HIV and AIDS amongst all the key actors in the care and social network of PLWHA. Regular presentations, workshops and sensitisation sessions are held with the many groups this includes.

GLOBAL FUND REJECTS YEMEN FOR ROUND 10

The Global Fund to Fight HIV, TB and Malaria has not accepted Yemen for funding in the next round, which starts from the beginning of 2011. This is part of a larger trend of stagnating funding for national AIDS programs worldwide. This decision by the Global Fund will seriously affect the National AIDS Program (NAP) of Yemen in its ability to supply ART to those who need them from the 1st January 2011. MSF is working with

the NAP to investigate the full implications of this cut in funding and to assist NAP in exploring other avenues for the provision of these life-saving drugs.

SUPPORT TO AL-JEDDER HEALTH UNIT

In February 2010, MSF began support to Al Jedder Health Unit to respond to an inflow of displaced people from Saada. Following the return of most of this people back in their home regions, activities were returned to MoPHP in July 2010. A total of 8 000 people could receive medical healthcare during the four months of intervention.

MSF AT A GLANCE

MSF CHARTER

Doctors Without Borders/Médecins Sans Frontières (MSF) is a private international association. The association is made up mainly of doctors and health sector workers and is also open to all other professions which might help in achieving its aims.

All of its members agree to honor the following principles:

Médecins Sans Frontières provides assistance to populations in distress, to victims of natural or man-made disasters and to victims of armed conflict. They do so irrespective of race, religion, creed or political convictions.

Médecins Sans Frontières observes neutrality and impartiality in the name of universal medical ethics and the right to humanitarian assistance and claims full and unhindered freedom in the exercise of its functions.

Members undertake to respect their professional code of ethics and to maintain complete independence from all political, economic, or religious powers.

As volunteers, members understand the risks and dangers of the missions they carry out and make no claim for themselves or their assigns for any form of compensation other than that which the association might be able to afford them.



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MSF HISTORY IN YEMEN

- 2007** MSF re-enters Yemen and provides support to Hospitals in Saada governorate. MSF also opens a project in Abyan Governorate providing medical and humanitarian assistance to refugees.
- 2003** MSF closes its programs in the country.
- 2001** MSF commences support to a polyclinic and four dispensaries in Little Aden. Main axes are the improvement of quality of external consultations, as well as mother-and-child health care.
- 1997** MSF provides primary health care and medicines for the destitute in the southern city of Aden.
- 1986** MSF first opens emergency and primary health care programs in Yemen.

MSF is an international movement which is comprised of **19 national sections** and an **International Council**.

2 500 international volunteers work every year on MSF field programs.

2/3 of volunteers are medical personnel.

The average length of a field mission is **6 months**.

MSF has **medical activities in over 65 countries around the world**, including Haiti, Pakistan, the Democratic Republic of Congo, Malawi and Sudan.

MSF does not accept funding from any government for its work in Yemen and chooses to **rely solely on private donations**.