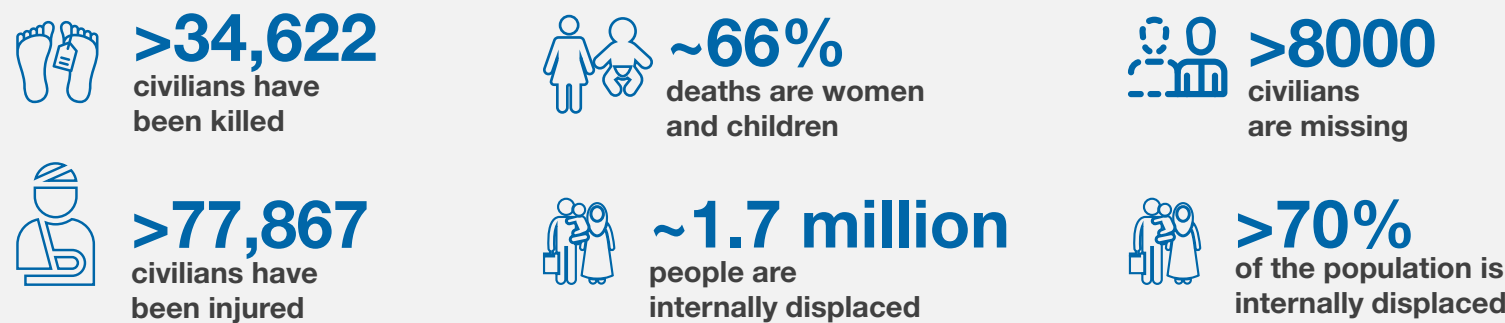# EMPHNET Emergency Bulletin

The Health Status in Gaza and Sudan

May 12, 2024

Situation Overview

The war on Gaza and armed conflicts in Sudan continue, reaching their 218th and 393rd day, respectively, and affecting all aspects of life. They are resulting in unprecedented humanitarian crises, and they continue to harm the health of millions of people, thus subsequently leading to mass causalities and morbidity. Both the Gaza Strip and Sudan are still enduring the hardships of displacement, hunger, malnutrition, scarce medical services, and inadequate shelter. In fact, Sudan is witnessing the largest internal displacement crisis, accounting for 1 in every 8 internally displaced people worldwide. while the Gaza Strip has been referred to as a ghost town by UNICEF.
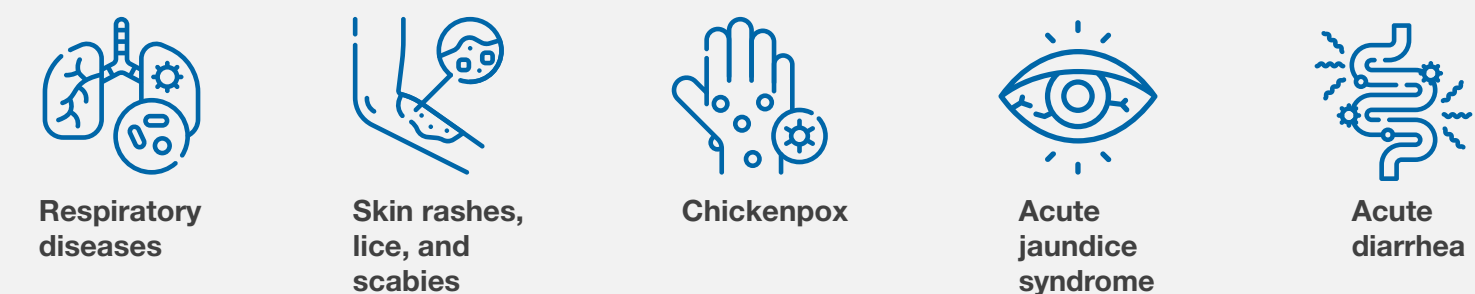
Gaza Crisis in Numbers

From October 7 2023, to May 3, 2024

>34,622 civilians have been killed

~66% deaths are women and children

>8000 civilians are missing

>77,867 civilians have been injured

~1.7 million people are internally displaced

>70% of the population is internally displaced

Communicable Diseases

More than a million cases of communicable diseases have been reported since the eruption of the war on October 7, 2023, including

- Respiratory diseases
- Skin rashes, lice, and scabies
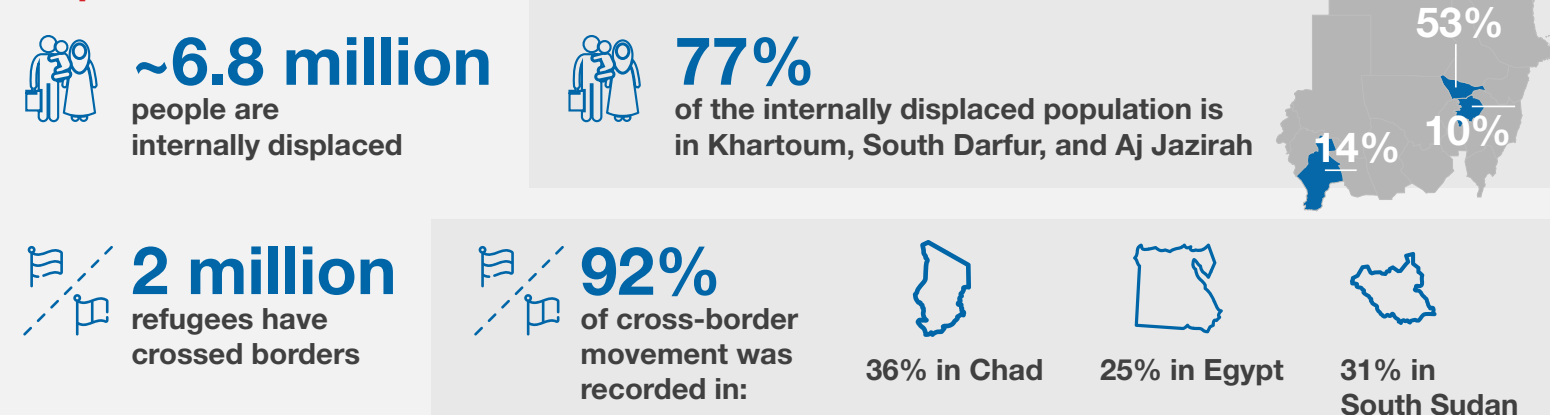- Chickenpox
- Acute jaundice syndrome
- Acute diarrhea

The entire population of the Gaza Strip (2.23 million) is facing high levels of acute food insecurity. The latest Integrated Food Security Phase Classification (IPC) analysis has estimated that between mid-March and mid-July, half of Gaza's population, i.e. 1.1 million people, will be facing catastrophic levels of food insecurity (IPC5), which is the most severe form of insecurity, also known as **famine**.

Sudan Crisis in Numbers

As of April 2023, to April 2024

>16,000 civilians have been killed

~18 million are facing acute food insecurity (IPC3+), (an 80% increase compared to the same time last year

30,000 civilians have been injured

~9 out of 10 people facing food insecurity (IPC4) are in conflict affected areas

Displacement

~6.8 million people are internally displaced

77% of the internally displaced population is in Khartoum, South Darfur, and Aj Jazirah

53%
14%
10%

2 million refugees have crossed borders

92% of cross-border movement was recorded in:

36% in Chad   25% in Egypt   31% in South Sudan

(Source: Sudan's Federal Ministry of Health, Integrated Food Security Phase Classification, International Organization for Migration.)
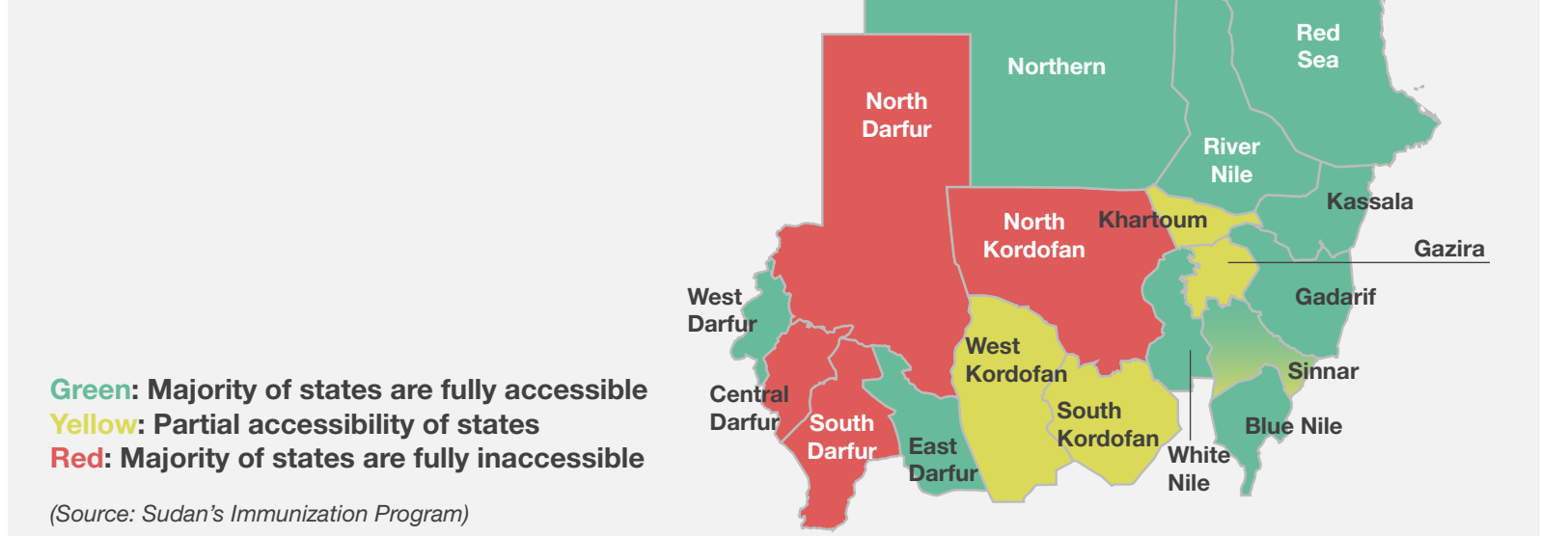
Impact on Healthcare System in Sudan

Since April 15, 2023

63 attacks were made on healthcare facilities

Destruction of the National Medical Supply Fund warehouses

70% loss in diagnostic and specialized health services

Destruction of the National cold chain rooms

(Source: Sudan's Federal Ministry of Health, WHO's surveillance system for attacks on health care (SSA))

Accessibility in Sudan

Accessibility in the 18 states of Sudan, week 17, 2024

Green: Majority of states are fully accessible
Yellow: Partial accessibility of states
Red: Majority of states are fully inaccessible

(Source: Sudan's Immunization Program)

Impact of Armed Conflict on Health Information Systems

The Direct Effect of Conflict on HIS:

The complex nature of the emergency situations seen in the Gaza Strip and Sudan have had their significant effect on the health system. A severely impacted function is the Health Information System (HIS). The current crises seen in these two areas have tremendously affected the accessibility, quality, and timeliness of health reports and they disrupted the HIS in multiple ways, all of which affect their functionality and integrity. Key impacts include the physical destruction of healthcare facilities and their Information Technology (IT) infrastructure. This often includes damage inflicted on the power supplies and communication networks, essential for HIS operations. Additionally, one of the most significant direct effects of conflict is the displacement of skilled healthcare personnel and data managers. These individuals are crucial for managing, accurately, and completeness of health data collection, processing, and reporting. Their absence or relocation exacerbates the already challenging gaps in health data, as health facilities may cease operations or become inaccessible due to road damage and safety risks. These conditions further prevent data collection in remote and conflict-affected areas. The war on Gaza and Armed conflict in Sudan also increase the risks of data breaches and patient confidentiality violations. These breaches can occur through cyber-attacks or physical invasions into compromised IT systems. Together, these disruptions pose severe challenges to maintaining robust and reliable health information systems during conflict.

The Consequences of these Challenges:

The challenges imposed by the war on Gaza and armed conflict in Sudan on HIS have profound consequences on public health. With HIS compromised, the ability to monitor, respond to, and manage public health emergencies significantly diminishes. Accurate and timely health data are critical for tracking disease outbreaks, monitoring chronic disease management, and deploying healthcare resources effectively.

In the absence of reliable data, response efforts to public health crises are often delayed or misdirected, potentially leading to increased morbidity and mortality. Disruptions in communicable diseases surveillance systems and reporting mechanisms have resulted in the underreporting of cases of infectious diseases and thus decreased the precisely disaggregated data. Such conditions limit situational awareness and hinder targeted responses. There have been more than a million cases of communicable diseases reported since the eruption of the war on Gaza, which accounts for almost 50% of the population. Sudan also has several disease outbreaks, including malaria, dengue fever, and measles measles since the onset of the armed conflict.

According to UNICEF, a new circulating variant of poliovirus type 2 (cVDPV2) has emerged in an environmental sample in Port Sudan. Management of these cases, as well as mass vaccination, contact tracing, and case monitoring, is paramount to contain infectious diseases.

Without efficient data management, resource allocation becomes less targeted, potentially wasting scarce resources. Moreover, rebuilding infrastructure, training new personnel, and restoring data integrity will have an added cost. Performing accurate needs assessments, forecasting health trends, and planning appropriate interventions become very difficult. This impacts efforts to respond to the emergency and improve healthcare quality and accessibility.

The destruction or compromise of HIS infrastructure often results in the loss of irreplaceable historical health data. This loss delays long-term health studies and trend analyses, which are crucial for understanding health dynamics over time and making informed policy decisions.

Recommendations

- The reliance on partners to lead HIS and surveillance efforts should be temporary, and restoration of the national capacity and capability to lead HIS and surveillance efforts is a must.
- There is a need to develop robust mechanisms within the HIS to combat rumors and misinformation, and to reduce reliance on unverified social media information.
- There is a need to implement innovative approaches to the use of HIS, e.g., mobile HIS that operate independently of fixed infrastructure and utilize community-based health data reporting systems.
- Data on displaced individuals should be prioritized under such circumstances since millions have been forced to flee their homes. Displaced populations are amongst the most vulnerable and usually endure harsh living conditions, such as unsanitary surroundings and inadequate, overcrowded shelters, which endanger their lives and tremendously affect their livelihoods. The Data Tracking Matrix (DTM) identifies refugees' mobility and needs, allowing health authorities to meet such needs.

Data management is an essential component in all phases of an emergency and is especially crucial during the "emergency phase". Under the current circumstances in the Gaza Strip and Sudan, proper data management will be challenging without a ceasefire. **A ceasefire is imperative and health infrastructure should be rebuilt and functional, communication mechanisms should be re-established, and data management platforms should be re-installed.**

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8. Sudan Cover Photo

This report is compiled by EMPHNET's Public Health Emergency Management Center (PHEMC)