

An outbreak taskforce was established, comprising experts from both the Ugandan Ministry of Health and Wildlife Authority, as well as WHO. Police officers joined with village council and district leaders to ensure compliance with quarantine orders. Experts are conducting tests at the mine and on the bats, rats and other creatures living there. The link, if any, between the wildlife at the mine and the outbreak has not yet been determined, but investigators are sending samples of the bats and other creatures to CDC for testing.

WHO's George said 55 suspected contacts had been isolated in Kampala together with another 58 miners in Kamwenge. The mine's owner said the site had been closed for decades before reopening earlier this year, George added.

The mine owner also told investigators that there had been past cases of people falling ill and dying from fever and haemorrhaging, according to Okware. The "strange" undiagnosed disease would kill up to four people before burning out on its own.

Formenty, of the EPR team, praised the response to the outbreak, saying it demonstrated the heightened



WHO/Pierre Formenty

A WHO scientist performs an autopsy on a bat captured inside a mine in western Uganda amid efforts to find the reservoir for the recent Marburg fever outbreak.

vigilance in controlling the spread of diseases in Uganda, which has witnessed outbreaks of Ebola and Marburg fevers in the past.

"The Ugandan response was very transparent and what struck me was the openness of the Ministry of Health and how it worked with WHO, the

international community and the media to deal with the outbreak", Formenty said. "We have been working with Uganda for a long time and it is clearly one of the most advanced countries for IHR implementation." ■

Carolyne Nakazibwe, *Kampala*

War-scarred Iraqis face health burdens in foreign lands

More than 2 million Iraqis have fled their war-ravaged country since 2003, with most taking refuge in neighbouring Jordan and the Syrian Arab Republic. A recent WHO-hosted regional consultation highlighted the new troubles faced by many of those displaced, including limited access to health care in their host countries.

Adel Abdel Jabar found the chilling message on his car windscreen one morning. "You're a dead man." That was enough for him to leave his job as a translator with the coalition military in the southern Iraqi city of Basra, and flee with his wife and two sons into neighbouring Jordan.

But the 45-year-old's problems didn't stop once he arrived in the Jordanian capital of Amman in December 2006. "We sold the family car and we've been living off of that money, but it is running out", Abdel Jabar told the *Bulletin*. "I have another problem though, a huge problem. I was diagnosed with bladder cancer in Jordan and although I have undergone several operations the doctor says it is not completely removed."

Like many other Iraqis who have sought refuge in Jordan, Abdel Jabar is unemployed and cannot pay for needed health care.

Many Iraqis in Jordan and the Syrian Arab Republic suffer from chronic diseases such as high blood pressure, cardiovascular disease and diabetes, said Dr Ala Alwan, World Health Organization (WHO) Assistant Director-General.

Iraqis receive no special discount or consideration at state-run Jordanian health facilities, paying the

same as any Jordanian or other foreigner in the kingdom. "Iraqis in Jordan are provided with the same medical care as Jordanians who do not have insurance", said chief Jordanian government spokesman Nasser Judeh.

Demands for health care and other services needed by displaced Iraqis in neighbouring countries are placing huge strains on their host states. A WHO-organized conference held 29–30 July in the Syrian capital, Damascus, discussed these issues and sought ways to improve access to services. The meeting was attended by health and foreign affairs officials from Iraq, Egypt, Jordan and the Syrian Arab Republic, the latter three countries hosting the bulk of more than 2 million Iraqis who have fled their homeland since the war began in 2003.

“We live in tension from the ordeal we experienced. All Iraqis have psychological illnesses stemming from the stressful circumstances we faced and the life we now live.”

Displaced Iraqi woman Fawzi Hussein Yassin, 64.

Representatives of UN agencies, and the Red Crescent Societies of Jordan and the Syrian Arab Republic also attended.

The host nations agreed that displaced Iraqis should have the same access to health services as their own populations. Alwan said this was a major commitment that required extra resources for the health sector. Participants agreed to seek additional funding from the international community and the Iraqi government, which has already promised its support.

Alwan said the most urgent priority is to ensure access to primary health care, including preventive and curative treatment; maternal and childhood medical services; emergency care; and provision of essential drugs and medical supplies.

“All displaced Iraqis living outside Iraq should be able to freely and safely return to Iraq in due course, so the strategy for meeting their health-care needs in host countries should be seen as a temporary one”, Alwan, a former Iraqi minister of health, told the *Bulletin*. “Meanwhile, the international humanitarian community and Iraqi government must support countries like Jordan and the Syrian Arab Republic to enable their health systems to address the increasing burden of providing health services for displaced Iraqis.”

The Iraqi Red Crescent office in Amman said the governments of Jordan and other host countries are waiting for Baghdad to pay the US\$ 25 million pledge it promised to assist displaced Iraqi civilians, particularly in the health sector.

Jordanian spokesman Judeh said the presence of some 750 000 displaced Iraqis was straining the kingdom's infrastructure. Another 1.4 million



Nader Daoud

A family of displaced Iraqis at a makeshift camp on the Jordanian side of the desert frontier with Iraq. More than 2 million displaced Iraqis are requiring health care from host countries, placing increased burdens on strained health sectors in nations like Jordan and the Syrian Arab Republic.

Iraqis have moved to the Syrian Arab Republic since 2003, with substantial numbers arriving in Egypt, Islamic Republic of Iran, Lebanon and Turkey. More than 50 000 Iraqis continue to leave their homeland monthly, mainly to Jordan and the Syrian Arab Republic, according to the United Nations High Commissioner for Refugees (UNHCR).

“This has put an incredible burden on the Jordanian economy in terms of health, food, medicine, education, infrastructure and resources”, Judeh said.

Abdel Jabar has spent most of his money on chemotherapy and needs additional treatment, including complicated surgery. International Catholic relief agency Caritas provided financial support for his initial treatment, but the Iraqi said he needed 6000 to 8000 Jordanian dinars (US\$ 8470 to US\$ 11 290) for further treatment. “This is beyond my capability and Caritas

cannot fund it”, he said. “I am praying that the UNHCR can help.”

Caritas worker Hania Bisharat said her agency only helps Iraqis living on under US\$ 80 per month. Last year, Caritas provided some 3000 displaced Iraqis with medical treatment and has helped a similar number so far this year.

Other governmental and nongovernmental aid agencies, such as the Iraqi and Jordanian Red Crescent Societies, Medicines Sans Frontières and Care International, provide additional medical services and other assistance to Iraq's displaced.

At a Caritas clinic in Amman, Iraqi woman Fawzi Hussein Yassin waited with her husband, Ahmed, 64, who still receives treatment for bullet wounds suffered after being shot by militants in Baghdad, an attack that prompted them to flee to Jordan in February.

“The situation is drastic in Iraq and it's worsening”, the wife, wearing a black headscarf, said. “We live in tension from the ordeal we experienced. All Iraqis have psychological illnesses stemming from the stressful circumstances we faced and the life we now live.” ■

Dale Gavlak, *Amman*

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