

Situation Report Issue Number 9  
01 OCTOBER – 31 OCTOBER 2017

## IRAQ HUMANITARIAN EMERGENCY




 **10.3 MILLION IN NEED (HEALTH)**
 **3.06 MILLION DISPLACED INTERNALLY**
 **0.2 MILLION REFUGEES**
 **6.2 MILLION TARGETED**
 **23000\* INJURED**

### WHO

TOTAL POPULATION REACHED WITH WHO MEDICINES AND KITS **737 730**

ESTIMATED BENEFICIARIES FOR KITS DELIVERED TO HEALTH FACILITIES/PARTNERS\*\*

 **430 000** INTERAGENCY EMERGENCY HEALTH KITS  
**400** SURGICAL KITS  
**400** TRAUMA KITS A+B


WHO FUNDING US\$ \*\*\*\*\*

 **51** % FUNDED  
**59 M** REQUESTED


### HEALTH SECTOR

**42** HEALTH SECTOR PARTNERS  
**6.2 M** TARGETED POPULATION


### HEALTH FACILITIES DAMAGED/DESTROYED

 **08** TOTAL NUMBER FULLY DAMAGED \*\*\*  
**24** TOTAL NUMBER PARTIALY DAMAGED


### HEALTH ACTION

 **187 000** CONSULTATIONS†\*\*\*\*\*  
**868** REFERRALS†


### ROUTINE VACCINATION AGAINST

 **7897** POLIO†\*\*\*\*†  
**1244** MEASLES†

### EARLY WARNING ALERT AND RESPONSE NETWORK

 **198** REPORTING SITES OUT OF A TOTAL OF **216**

### HEALTH CUSTER FUNDING US\$ (HRP 2017)\*\*\*\*\*

 **62%** % FUNDED  
**US\$ 110 M** REQUESTED

### HIGHLIGHTS

- To respond to the ongoing crisis in Anbar, WHO donated to its implementing partners and Anbar Directorate of Health (DOH) emergency medical kits and established Primary Health Care Centres (PHCCs) and Mobile Medical Clinics (MMCs) to meet the trauma and health needs of displaced persons.
- More than 1.2 million (98%) of the targeted 1.3 million children under 5 years were vaccinated during the first round of Supplementary National Immunization Days (SNIDs).
- As a result of the WHO's support to its implementing partners and DOHs, more than 187 000 consultations including more than 67,200 children less than 5 years were recorded in October 2017.
- With WHO support, Erbil Blood Transfusion Center (EBTC) collected and provided 138 units of blood to 4 field hospitals established in Bartalla, Athba, Hamam Al Alil and Haj Ali.
- WHO donated emergency medical supplies to 16 health partners working including Directorates of Health, hospitals and primary health care centres located in IDP camps sufficient to treat more than 737 700 people.

\* Total hospital based injured patients since 19 October 2016

\*\* coverage for one month

\*\*\* Hospitals in Salahadeen (04) and Ninewa (07), (1 Sinjar), 23 partially damaged in Ninewa and Sinjar

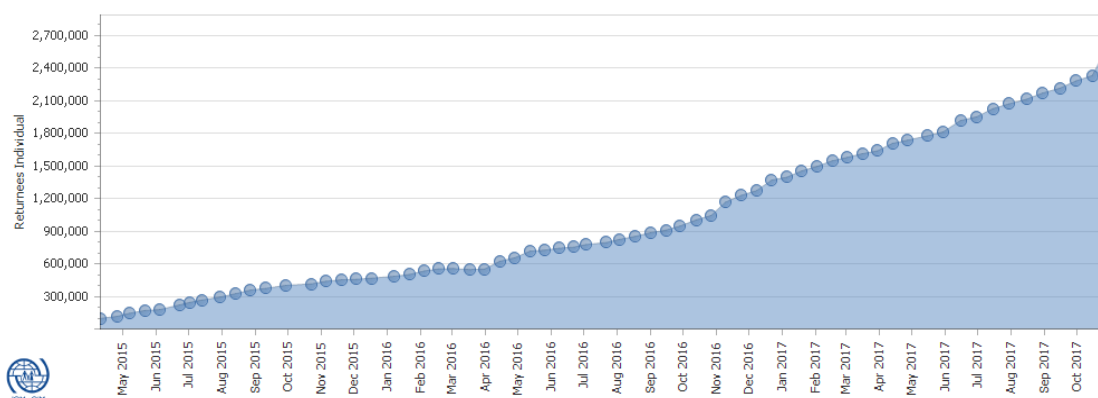
†\*\*\*\*+Total number of routine vaccination against polio and measles in 8 governorates of Ninewa, Dahuk, and Erbil from 1 October to 30 October 2017

\*\*\*\*\* Financial Tracking System, Iraq

## Situation update

- According to IOM Data Tracking Matrix (DTM), as at 31 October, more than 2 620 000 persons had returned to their homes of origin across Iraq. The highest numbers of returnees were recorded in Anbar Governorate with more than 1,172,000 returnees, followed by Ninewa with 523,596. Other governorates where people have reportedly returned include: Salah al-Din, Kirkuk, Erbil, Diyala and Baghdad, refer to graph 1.

Graph 1: Trends of people returning to their homes since April 2015 to October 2017

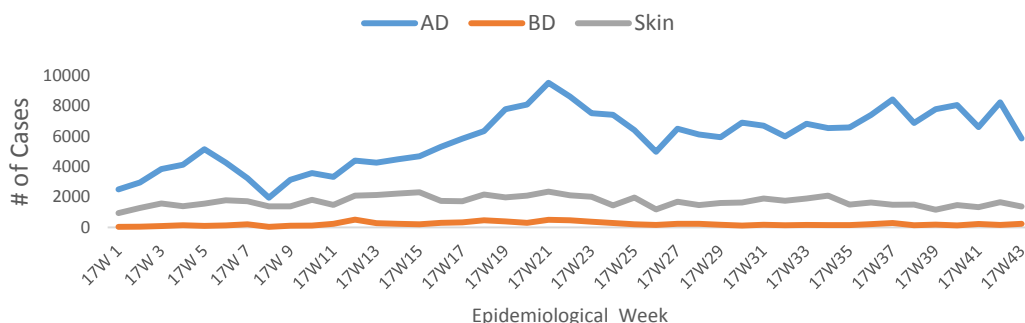


- More than 3.1 million people remain displaced across the 18 Governorates of Iraq. Ninewa governorate hosts the highest number of displaced persons with more than 987,600 people living in IDP camps and host communities, followed by Erbil with more than 367,500, Dahuk with 364,686 and Salah al-Din with 323,970 internally displaced persons. WHO and health cluster partners continue to work closely with the government health authorities to deliver emergency health services to all vulnerable communities.

## Epi update

- From epidemiological (Epi) week 40 (starting 08 October) to Epi week 43 (ending 29 October) 2017, a total of 473,433 consultations (an average of 118,358 patients per week) were reported through the EWARN system from health facilities covered by the EWARN system. Thirty-four percent (34%) of all the reported communicable disease cases were in children below five years of age. A total of 198 sites out of a total of 216 submitted their weekly Epi reports in October.
- The most common disease incidence reported in all Iraq was acute upper respiratory tract infection at 73% (117,457 cases) followed by acute diarrhea at 18% (28,673 cases), acute lower respiratory infections at 3% (5570 cases), suspected scabies at 4% (5,829 cases), suspected mumps at 1% (1,248 cases), Acute Bloody Diarrhea (ABD) at less than 1% (781), refer to Graph 2.

Graph 2: Distribution of acute diarrhoea, Acute Bloody Diarrhoea and suspected Scabies cases by week, since Week 1 to Week 43, 2017



- Seven (7) alerts were generated during this period; they were investigated and responded to within 72 hours by Departments of Health, WHO and health partners in the field. The reported alerts were: four (4) suspected measles cases in Anbar out of which 2 cases were verified as true in Sulaymaniyah while one suspected case of Acute Flaccid Paralysis (AFP) was investigated and verified as false in Erbil pending laboratory results.

## Public health concerns

- Limited access to health services by the population in return areas of west Mosul where most health facilities got damaged and Salahadeen due to shortage of health personnel and damaged secondary and tertiary health facilities.
- Limited number of ambulances available in Tikrit to serve the high demand of patients requiring referrals from IDP camps.
- Safe water remains a major concern for the populations living in the city of west Mosul.

## Health needs, priorities and gaps

- Provision of primary health care services to the affected population and host communities in newly accessible areas.
- Limited response to medical emergency cases in the newly re-taken areas of Mosul.

## WHO action

- Following the start of operations in Anbar by the Government of Iraq, and in response to the anticipated high trauma caseload and health needs of people fleeing the crisis, WHO delivered two full trauma kits to Ana and Rutba hospitals and 3 full trauma kits as well as 2 surgical kits to Haditha hospital. In coordination with the health cluster and MOH, WHO deployed and supported the operationalization of 8 MMCs to the mustering and screening sites as well as to the newly re-taken areas. The MMCs are being run by WHO's implementing partners UIMS and DARY. In addition, the organization has supported DARY to establish a new comprehensive PHCC in Kilo 18 camp, which will deliver 24/7 health services.

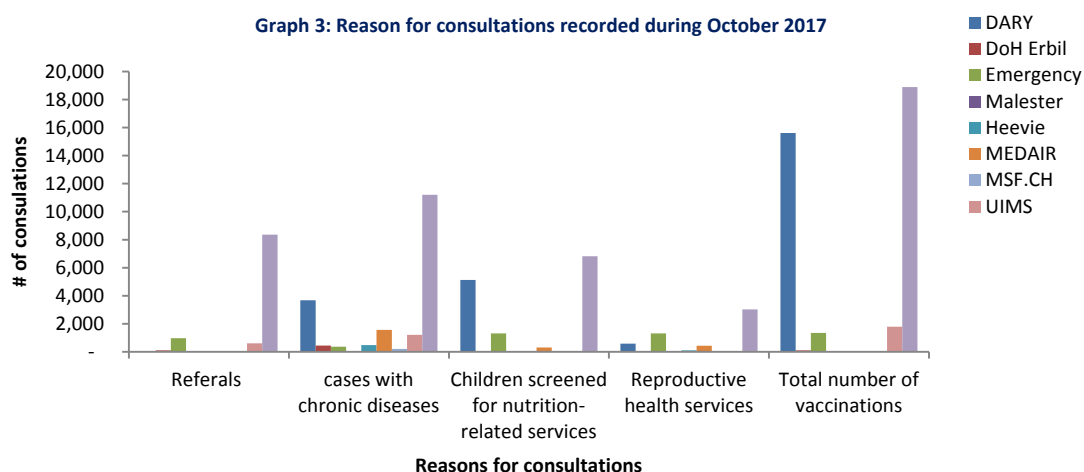


Photo ©: WHO/D.Yady

Displaced people receive primary health care services at mobile medical clinic prepositioned by WHO in Negizle

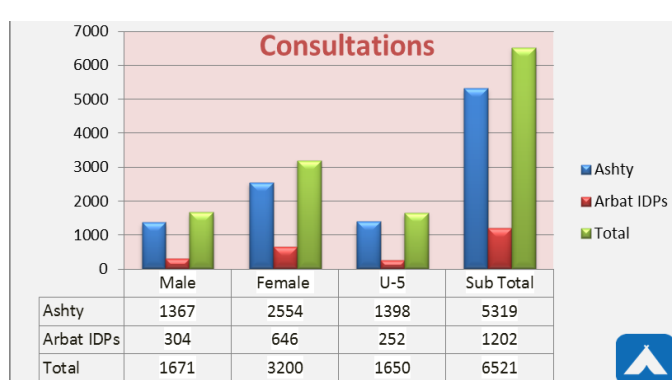
- More than 1.2 million (98%) of the targeted 1.3 million children under 5 years were vaccinated during the first round of Supplementary National Immunization Days (SNIDs) using the bivalent Oral Polio Vaccine (bOPV) and another 102,800 children aged 2 to 24 months using the Injectable Polio Vaccine (IPV). The 10 days campaign was conducted from 15 to 24 October 2017 in eight provinces in Iraq and was supported by WHO, UNICEF under the leadership of the Ministry of Health.
- With WHO support, Erbil Blood Transfusion Center (EBTC) provided 138 units of blood to 4 field hospitals established by WHO in Bartalla, Athba, Hamam Al Alil and Haj Ali. WHO supports EBTC with blood bags, blood collection drives and screening so as to ensure contentious blood supply for hospitals requiring this support.
- In October, WHO supported 6 health partners and eight Directorates of Health with emergency medicines, Interagency Emergency Health Kits, surgical and trauma kits to ensure that all vulnerable people in camps and host communities receive the required medications. The partners supported include: DARY, Heevie, International Medical Corps, United Iraqi Medical Society (UIMS), Medair and Premiere Urgence-Aide Medicale International (PU-AMI) in addition to the DOHs of Kirkuk, Salah al-Din, Ninewa, Anbar, Baghdad, Dahuk, Sulamaniyyah and Erbil. The medicines and kits donated were enough to treat 737 730 people.

- As a result of the WHO's support to its implementing partners and DOHs, more than 187 000 consultations including more than 67,200 children less than 5 years were recorded in October 2017. The consultations were from health facilities run by DARY, Malteser, Heevie, Medair, Emergency, UIMS, PU-AMI and MSF-CH in addition to health facilities run by Dahuk, Erbil and Ninewa DOHs in 8 conflict affected governorates namely: Ninewa, Erbil, Kirkuk, Dahuk, Sulaymaniyah, Salah al-Din, Baghdad and Anbar. To date more than 4.8 million consultations have been recorded since January 2017. Graph 3 shows selected areas for which consultations were recorded.
- Services provided by implementing partners and WHO supported PHCCs include: Mental health services, laboratory and investigations, medicines to treat various diseases, vaccination, deliveries, reproductive health and referrals services among others.
- More than 18,915 children aged 0 to 29 months and children under one year were vaccinated against vaccine preventable diseases through routine immunization including 7897 children immunized against polio and 1244 immunized against measles in the crisis affected Governorates. More than 7,900 patients also received treatment for chronic diseases (diabetes and hypertension).



- A total of 7192 consultations were recorded in three primary health care facilities of Chamakor, Hassham and Bahirika. WHO supported Erbil DOH to establish the three PHCs and continues to support the facilities with essential emergency medicines and other medical supplies to ensure continuity of service delivery. Of the total number of consultations reported in October, 2013 (28%) were cases of Acute Respiratory Infection (ARI), 1005 (14%) of Urinary Tract Infections and 829 (12%) skin infections.

**Graph 4: Number of consultations reported in Arbat and Ashty IDP camps in Sulaymaniyah.**



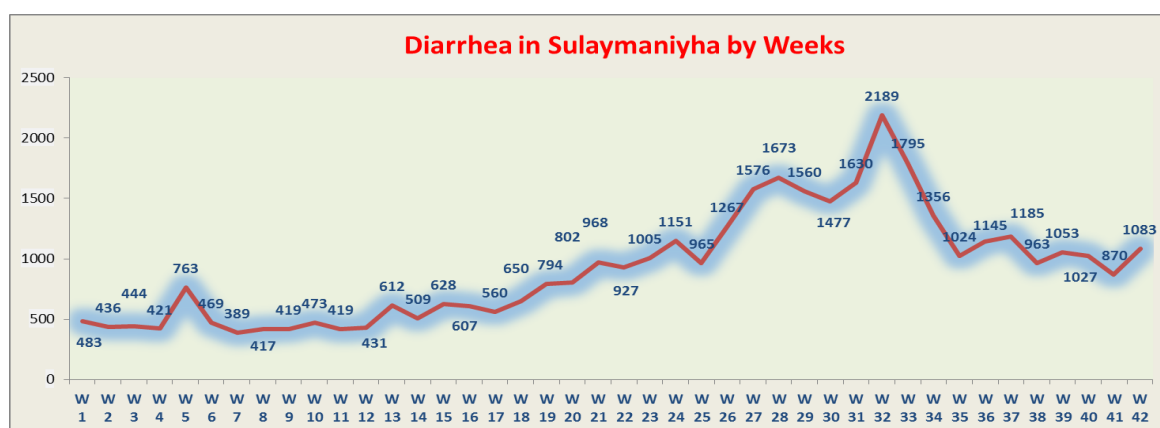
- In Sulaymaniyah, WHO donated 1,008 bottles of sodium chloride, 1 surgical kit and trauma kits respectively enough for 300 surgical operations. This was in response to the trauma patients coming from Kirkuk following the crisis in the governorate.
- More than 11,500 people including 1,895 children under 5 years of age received medical consultations in Sulaymaniyah through WHO supported primary health care services and



mobile medical clinics. These include 726 in Qorattoo IDP camp, 956 in Garmian, 7463 in Arbat and Ashty and 2377 in Dukan, Chamachamal, Surdash camp and Baynjan Districts. The most commonly reported diseases included diarrhoea (40 cases) and Upper Respiratory Tract Infections (URTI). WHO's implementing partner EMERGENCY International is managing the primary health centers in Arbat and Ashty IDP camps. The DOH Sulamanyiah is running the PHC services in Garmian and Qorattoo while World Vision International runs mobile medical clinics inside Dukan, Chamachamal, Surdash camps and Baynjan districts. All the three partners are supported by WHO is supporting.

- In addition, WHO continues supporting all governorates including Sulaymaniyah with disease surveillance and response activities including monitoring acute diarrheal diseases through 15 mobile teams. Table 3 shows the number of diarrheal disease cases reported since week 1 to week 42 of 2017.

**Graph 5: Number of diarrheal diseases cases reported per week in Sulaymaniyah from week 1 to week 42**



- Through WHO support, the DOH water quality monitoring teams in Sulaymaniyah collected and tested 1230 water samples, including 653 samples tested for bacteriological and chlorine levels, 169 were tested for chemical analysis and 508 for vibrio cholera. All samples tested negative for vibrio cholera. In Erbil, WHO supported the DOH to carry out water quality control monitoring in eight IDP camps including Khazir M1, Hasan Sham U2, Hasan Sham U3, Bahirka, Harsham, Hasan Sham M2, Chamakor, Dibaga2 as well as 4 Syrian Refugee camps (Kawergosik, Darashakran, Basirma, Qushtapa). A total of 1,518 drinking water samples were collected from 1,518 locations (wells, water projects, tents, caravans, water tankers) in 12 camps and tested for bacteriological and residual chlorine. The results showed that 5.2% samples were contaminated and residual chlorine was found to be at 91%. All the 23 samples collected for chemical test met the minimum standards.
- WHO continues to support the delivery of emergency health services and medicines to IDP camps and newly accessible areas where people have returned to their homes of origin. Notably, WHO continues to conduct supervision visits to IDP camps and areas of return to ensure that people have emergency medicines and other medical supplies that facilitate continuity of service delivery for people in need while ensuring quality services for all. Areas visited during the period under review include Jadaa 3 and 6 camps, Sallameya 1 and 2 camps as well as Ibn Sina and Al Salaam hospitals in east Mosul. In Jadaa 6 camps there was lack of cold chain for the vaccine storage while at the 2 hospitals, the team went to oversee the installation of medical furniture and equipment that the organization donated.
- Together with OCHA and other agencies, WHO participated in a joint assessment mission to Abbassi and Al Zab sub district in Hawija district. The team assessed the status of health facilities in the area and noted that Abbassi PHCC has been completely destroyed while Zab PHCC has been partially damaged. To ensure availability of primary health care services for the populations in these areas, WHO supported Kirkuk to deploy mobile medical teams.

- Through WHO's support to Heevie, 4,655 consultations, including 639 children less than 5 years old, were recorded in Talafar and Telkeyf districts and in east Mosul. In addition, through the community health house project, 2,899 consultations were recorded in Talafar district of which 452 were children of less than 5 years of age. In Zakho city and Bandawaia village in Telkeyf district, WHO supported the MMTs to respond to the health needs of the most recent IDPs influx from Zumar.
- WHO continues to support Acute Flaccid Paralysis (AFP) surveillance vaccine preventable disease (VPD) activities in Dahuk by providing technical support to the DOH team. During this reporting period, together with the DOH, WHO team visited Amedi hospital and Botan PHC in Amedi district health to activate Acute Flaccid Paralysis Surveillance and to follow up on vaccine preventable diseases (VPD) activities. The team reviewed documentation of suspected AFP cases, checked the cold chain status to ensure these are functional in addition to monitoring the availability of vaccines. Measures for further improvement were also discussed with health facility staff.



#### Partnership coordination

and

- Five national and sub-national cluster coordination meetings were held in October 2017 in Baghdad, Kirkuk, Sulaymaniyah, Ninewah (Qayara) and Erbil.
- To respond to the health needs of people displaced from Hawijja, the Health Cluster, in collaboration with the Humanitarian Financing Unit (HFU) of OCHA, reviewed and approved health projects under the 6th Reserve Allocation of the Iraq Humanitarian Pool Fund (IHPF). The projects focused mainly on providing funds for partners to respond to the emergency in Hawija. Memorandums of Understanding were signed with the partners and the release of funds has commenced. Given the volatility of the situation and the speed at which the Hawija Operation was concluded, HFU remains flexible in order to allow for realignment of project activities to address health needs of people who have been affected by the Hawija Operation within Kirkuk and Salah al-Din governorates.
- In addition, the health cluster and the MOH coordinated the health partners' response to the health needs of people affected by the crisis in Al Ana and Rawa locations in Anbar governorate following the launch of operations to retake these areas.

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