



World Health Organization

Ramadi crisis, Iraq

Special situation report, Issue 1, 17 January 2016



50 000 IN NEED OF HEALTH ASSISTANCE



15 500 FAMILIES DISPLACED



70 000 TARGETED WITH HEALTH ASSISTANCE

Highlights

- Ramadi City was liberated on 27 December 2015. However, active fighting is still ongoing in many parts of the city.
- Since June 2015, approximately 15 000 families have been displaced from Ramadi and are residing in various internally displaced persons (IDP) camps and host communities across eastern Anbar and western Baghdad.
- 380 families (2300 individuals) have been displaced since 27 December and are residing in the newly established Al-Qasr camp, north of Al-Habbaniyah Tourist City IDP camp. Al-Qasr camp is already over capacity and a new camp location is being considered. Health facility assessments have been conducted in various secure cleared areas of the city but there remain many areas where assessments cannot be undertaken due to the fear of mines and booby traps.
- Comprehensive health services are being provided through the Department of Health and various health cluster partners, including WHO.

WHO and health partner activities



6 AMBULANCES



22 CARAVANS



4 DELIVERY ROOMS



HEALTH ASSESSMENT



EMERGENCY MEDICAL SUPPLIES

30 BASIC IEHK
2 SUPPLEMENTARY IEHK
2 TRAUMA A, B, AND SURGICAL KITS



MOBILE MEDICAL SERVICES

8 MOBILE MEDICAL UNITS
6 MOBILE MEDICAL TEAMS



VACCINATIONS

THROUGHOUT 2015
3,455 VACCINATIONS

JANUARY 2016

123 POLIO
42 MEASLES
96 MENINGOCOCCAL
65 INFLUENZA

HEALTH CLUSTER PARTNERS CURRENTLY ACTIVE IN ANBAR

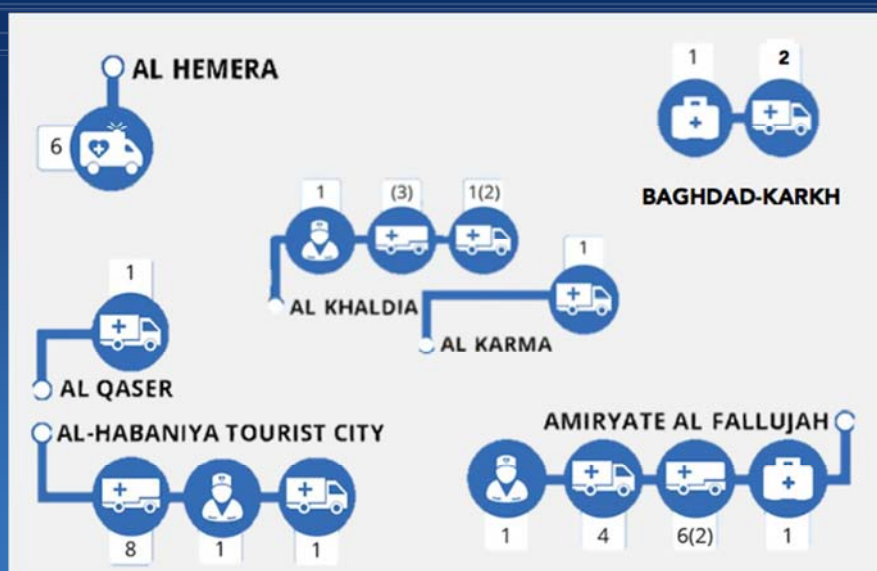


Health provision and needs

Before the current population displacement crisis resulting from the liberation of Ramadi, WHO was already providing health services to the previous Anbar displacement caseload and had prepared a health intervention response plan for health activities in Al-Habbaniyah Tourist City and Amriyat Al-Fallujah sub-district to ensure an effective and timely health sector response was in place, aimed at reducing mortality and life-threatening morbidity through provision of the following health services (since early in 2015):

- Six furnished caravans provided to Amriyat Al-Fallujah health sector serving as health centres to IDP camps.
- Two caravans provided to Al-Habbaniyah primary health care centre (with a dentist chair) to be operated as dentistry and laboratory units. Al-Anbar's Department of Health has assigned two dentists to work there, but due to the high caseload of internally displaced patients requiring dentistry services and the inability of existing staff to manage this patient overload, WHO, in collaboration with the Department, will provide support through financial incentives for two additional dentists to provide night shift services on an overtime basis.
- Seven mobile clinics provided (four to Amriyat Al-Fallujah health sector, one to Al-Khaldia health sector and two to Baghdad/Al-Karkh health sector) are operational. WHO is offering support to two of these clinics in Amriyat Al-Fallujah and Al-Khaldia, through incentives to the clinics' staff and will provide support for all the other mobile clinics starting from February 2016. The aim is to provide health services for IDP families who have no access to the nearest health facility.
- From June to December 2015, a total of 3299 vaccinations were given over 21 days at Bzbiz Bridge crossing point to displaced children.
- Based on agreement with the Ministry of Health, WHO has also provided four additional mobile clinics to its partners working in Baghdad and Anbar governorates as part of the contingency plan for the anticipated wave of IDPs as a result of Ramadi liberation efforts. These clinics are currently stored in the Ministry of Health warehouse waiting for the completion of the plate number registration process before their distribution to appropriate partners according to the previously prepared work plan.

CURRENT AND PLANNED INTERVENTIONS



HEALTH ASSESSMENT

- A health assessment mission to liberated areas of Ramadi was conducted by Anbar's Department of Health on 6 January 2016. A team from the Department visited Al-Ramadi, reached primary health care centres at Al-Tameem, Al-Ramlia and Kilo-5-7 regions within the city.
- These three primary health care centres were partially damaged but could be easily rehabilitated to function following a comprehensive assessment.
- The team could only access the main entrance areas and a few rooms inside the centres but were not allowed to inspect all the other rooms inside the buildings as the building had not been cleared by the security forces and for fear of booby traps.
- The Ministry of Health estimated that more than 40% of Ramadi hospital has been damaged and the damage is so severe that it will be impossible to rehabilitate the facility. The underground floor of the hospital which includes all the hospital services was blown up, in addition to all of the elevators and stairs between the six floors of the hospital. This led to the formation of severe cracks in the building's structure and prevented access between the floors of the hospital. The Ministry said that several medical centres had also suffered severe damage.

IMMEDIATE NEEDS

- A rapid assessment identified the following health needs:
 - 6 mobile clinics as a result of the severe damage to health facilities
 - one fully equipped mobile hospital and three mini mobile hospitals
 - uninterrupted supply chain of essential medicines
 - health promotion programmes for IDPs in camps (if return occurs)
 - 15 ambulances for referrals.
- Re-opening Al-Anbar Health Directorate in the city (i.e. laboratory equipment and kits, radiological investigation and staffing).
- Rehabilitating the seven partially damaged primary health care centres with an estimated cost of US\$ 125 000 each.

WHO ACTIONS

- WHO is coordinating with the Ministry of Health and the Health Cluster for the collection of essential information on health risks, health sector response and gaps;
- WHO has a designated emergency national professional staff for Anbar, ensuring a continuous WHO on-site presence and making contact with local authorities and partners for effective coordination of the health response.
- WHO will conduct the preliminary health sector analysis based on the most recent event risk assessment to identify major health risks and health sector objectives and priorities, including potential downstream of public health consequences.

WHO ACTIONS

- WHO continues to promote technical guidelines and support to the implementation/strengthening of the disease surveillance system, including early warning and response network (EWARN).
- WHO is working to ensure the provision of primary health services, including immunization and strengthening of the referral system through partners and, as a last resort, to take measures to cover the critical gaps.
- Coordination with the Ministry of Health's Expanded Programme on Immunization team is also being strengthened for intensified vaccination activities for new IDPs. It is also envisaged that, regardless of their previous vaccination status, campaigns to vaccinate all children against measles, mumps and rubella, influenza, oral polio vaccine and other vaccinations recommended by the Ministry's communicable diseases centre will be organized for families located in geographically defined areas.
 - Vaccination teams started their work on 2 January 2016. So far, a total of 326 vaccinations have been carried out to the newly arrived IDPs in Al-Qasr camp including 123 OPV, 42 measles, 96 meningococcal and 65 influenza.
 - WHO has ensured availability of sufficient capacity for logistics, procurement and medical supply management and the following items have been made available: (sufficient quantity of emergency health kits ready to be dispatched when requested by the Ministry of Health and health partners. (one emergency health kit can cater for 10 000 people for three months; two trauma-A 2 trauma-B kits, two surgical kits, two IEHK supplementary units and 30 IEHK (basic) for use by Amriyat Al-Fallujah and Al-Khaldia districts.
 - WHO will maintain an emergency stock of kits to Baghdad warehouse to be ready for transportation to Al-Anbar in case of need.

Due to difficulties in ensuring regular and safe transportation of medicines from Baghdad to Amriyat Al-Fallujah, WHO will provide Amriyat Al-Fallujah health sector with a 12 x 8 metre caravan hall to be used as a warehouse for emergency supplies.

Mobiles clinics in Ramadi



Contact information

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A severely damaged Al-Ramadi General Hospital

