

Situation report no. 12 21 October –10 November 2014

# Inspection of a warehouse in Duhok where supplies provided by WHO are stored before distribution to the hospitals and health facilities . Photo: WHO/A Rahman

# Iraq crisis



5.2 MILLION
IN NEED HEALTH





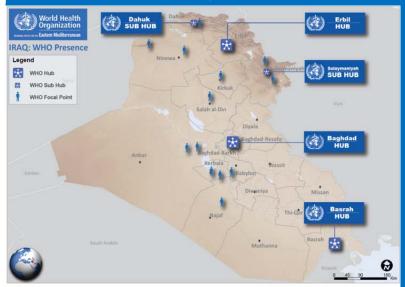
4 MILLION
TARGETED WITH HEALTH
ASSISTANCE



5.6 MILLION

VACCINATED AGAINST POLIO
IN OCTOBER

## WHO PRESENCE IN IRAQ



## MEDICINES PROVIDED BY WHO



1 MILLION PEOPLE HAVE DIRECT ACCESS TO ESSENTIAL MEDICINES AND MEDICAL EQUIPMENT PROCURED AND SUPPLIED BY WHO

## **FUNDING US\$**



187 MILLION

**FUNDS REQUESTED** 

54 MILLION

**FUNDS RECEIVED** 

## **VACCINATIONS**



5.6 MILLION

CHILDREN UNDER 5 VACCINATED DURING OCTOBER POLIO VACCINATION CAMPAIGN

117 760

FROM 6 APRIL 2014 TO 16 OCTOBER VACCINATED AGAINST MEASLES

## **HIGHLIGHTS**

- ⇒ WHO is working with health authorities in Salahaldeen province to restore basic health services in areas reporting limited medical, surgical and obstetric services due to the closure of hospitals.
- ⇒ WHO with health authorities in Erbil and health cluster partners are working towards setting up mobile medical services for the newly opened internally displaced persons (IDP) camp in Ainkawa mall.
- ⇒ Five million six hundred thousand (5.6) million children under 5 vaccinated against polio in October.
- ⇒ Inaccessibility in parts of Nenawa, Anbar, Sinjar and Bagdad made it challenging to vaccinate children under five years.

# Situation update

- The humanitarian situation continues to deteriorate in parts of Iraq. In some governorates reports of internal displacement of populations is complicating the provision of health services. The latest International Organization for Migration Displacement Tracking Matrix identified 1 898 844 internally displaced individuals dispersed across Iraq representing an increase of 145 542 individuals since the end of September. Dahuk governorate currently hosts the largest number of IDPs in the country. More than 450 000 displaced individuals are seeking refuge across its four districts of Sumel, Zakho, Duhok and Amedi, accounting for 24% of the overall IDP caseload.
- In light of the rapidly changing weather conditions in the country, and in particular, in the Kurdistan region, WHO and its health partners developed a comprehensive winterization response plan to address the needs of displaced families still living in the open or unfinished buildings, public and school buildings or informal settlements. Additional financial support of US\$ 23 million is needed to enhance health delivery capacity during the winter season.

# Humanitarian health update

- A total of 5.6 million children under 5 years were vaccinated against polio during the supplementary national immunization days campaign held in October. This brings the number of polio vaccine doses administered to children under 5 since April to 33.8 million. Inaccessibility in Heet, Haditha, Amirat Al-Falluja limited the vaccination campaign of the polio programme in October. Vaccinators, supervisors, social mobilizers and health staff were unable to reach some areas due to access-related issues. Figure 1 below illustrates the vaccination coverage rate per governorate.
- Al-Forat and Al-Bakr health facilities in Heet, Anbar governorate, were looted of essential medicines, medical supplies and furniture. Both health facilities remain non-functional.
- The influx of IDPs and refugees continued to stretch health service delivery, including reproductive health services in areas of displacement. In Erbil hospital, the high numbers of patients are overstretching health services, especially in the maternity ward. This has forced many IDPs and refugees to seek health care in private health facilities. The Directorate of Health is creating mechanisms to open up an additional obstetric department in Erbil hospital aimed at providing services to refugees.

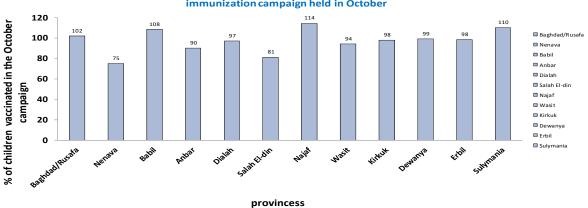


Figure 1. Percentage of children vaccinated aganist polio per governorate during the national immunization campaign held in October

WHO conducted an assessment in the "Brazilian sports centre", an IDP camp in Erbil to determine the health needs of the IDPs. Findings reveal that the camp has insufficient latrine coverage, poor hygiene and sanitation conditions, as well as an inadequate sewage system. The camp does not also have a dedicated health post but mobile medical teams from the Directorate of Health (DOH) visit the camp six days a week. WHO together with the DOH and

health partners are coordinating with the WASH cluster to improve the sanitation issues

#### **WHO** action

within the camps.

- As part of launching the Early Warning and Alert Network (EWARN) in Duhok and Sulaimaniya, WHO teams visited the two governorates, and held discussions with the DOHs to improve geographical databases and data collection at governorate level. It was agreed that WHO will conduct training in the second week of November to build capacity of the national counterparts in geographical information systems (GIS).
- In Suleimaniya, a rapid assessment was conducted to investigate the readiness for the implementation of the EWARN system. In the governorates, the surveillance system is functioning, but will benefit from further strengthening. The launch of the EWARN will include training sessions for health care professionals on data collection, notification, analysis and reporting.

## Communicable disease updates

- A total of 31 suspected hepatitis A cases were reported in Duhok in September and October. WHO, together with the DOH, rapidly deployed investigation teams. Samples were sent to the national laboratory which has confirmed the outbreak. WHO and its partners in close collaboration with the WASH cluster are working on improving the hygiene and sanitation conditions in camps.
- In week 42, acute respiratory infection and acute watery diarrhoea (AWD) remain the leading causes of morbidity in both refugee and internally displaced persons camps. Acute respiratory infections (ARI) and AWD accounted for 38.8% and 15.6% morbidity among the IDPs, respectively. Figure 2 below shows the proportionate morbidity among refugees in Iraq.
- In light of the winter season, WHO and health cluster partners are closely monitoring disease trends and have developed a preparedness and response plan to respond to the rising numbers of ARI and AWD. These are expected to further increase during the winter season.
- Six suspected cases of measles were recorded during reporting period. Five were recorded from Darashakran and one from Kawergosek camps. All cases were investigated and discarded. Since 2014, 1042 cases of measles have been confirmed in 18 governorates.

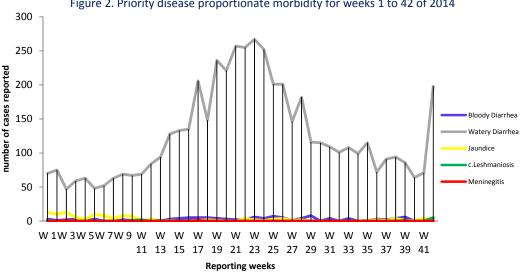
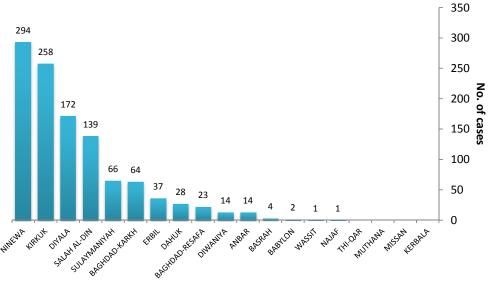


Figure 2. Priority disease proportionate morbidity for weeks 1 to 42 of 2014

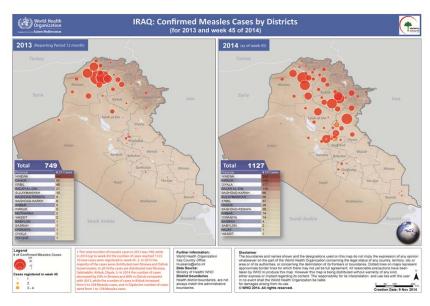
#### Confirmed measles cases in Iraq 2014, from week 1 to week 44



# Public health concerns

#### Governorates

- The winter season and its impact remains a public health concern among the internally displaced populations. Many of them are sheltered in open spaces, unfinished buildings, collective centres, public buildings, including schools and informal settlements. The health cluster estimates that 1.1 million children will require additional care during the winter season due to acute respiratory infections and chronic diseases. Health partners have stepped up preparedness ahead of the winter season.
- No additional cases of polio have been reported since April 2014, however, the limited vaccination coverage of the national polio Immunization campaign in inaccessible areas represents a public health concern, as children in those areas are at risk of polio if they are not reached with vaccination. WHO together with the Ministry of Health and UNICEF are working to increase the polio vaccination coverage in all governorates with special attention to the inaccessible ones.
- Since 2014, a total of 1042 cases of measles have been confirmed from 18 the governorates (refer to map for details). vaccination of IDP children is ongoing the three governorates of Duhok, Erbil and Suleimaniya, mainly among the new arrivals; however, the global shortage in



the measles vaccines will limit the feasibility of the planned mass measles vaccination campaign.

 The poor sanitation conditions in the Brazillian sports centre, one of the new IDP camps in Erbil presents a public health concern, and could lead to outbreaks of waterborne disease in the IDP camps. WHO, together with the DOH and health partners, is coordinating with the WASH cluster to improve the sanitation measures.

#### **Core services**

■ To respond to the health needs of the affected populations in Erbil, Suleimaniya and Garmiyan, WHO supported the DOHs with the provision of essential medicines to treat common illnesses and chronic diseases. In addition, basic unit interagency emergency health kits were supplied to: Erbil (4), Garmiyan (3) and Suleimaniya (4) and diarrhoea disease kits, one each for Erbil, Garmiyan and Suleimaniya were provided to the DOH. The supplies provided are enough to treat an estimated 25 000 in Erbil, 20 000 in Garmiyan and another 25 000 in Suleimaniya for a period of four months.

# Resource mobilization

	Required funds (USD)	Funded (USD)	% funding gap
WHO****	187 million	54 million	71%

<sup>\*\*\*\*</sup> The funds WHO requires will be used to respond to the health needs of more than 5 million people (1.9 million IDPs and 3.5 million from host communities).

For more information on issues raised in this situation report and the on-going crisis, please contact:

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