

Situation report Issue number 8 01 SEPTEMBER- 30 SEPTEMBER 2018

## **IRAQ HUMANITARIAN EMERGENCY**



7.3 MILLION **IN NEED** (HEALTH)



1.9 MILLION **DISPLACED INTERNALLY** 



0.2 MILLION **REFUGEES** 



3.4 MILLION **TARGETED** 



4 MILLION **RETURNEES** 

#### **WHO**

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

41 020

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



INTERAGENCY EMERGENCY HEALTH KITS SURGICAL KITS 100 TRAUMA KITS A+B

WHO FUNDING US\$ 29 MILLION \*\*\*\*\*



% FUNDED 33 29 M REQUESTED

#### **HEALTH CLUSTER**

37 HEALTH SECTOR PARTNERS 6.2 M TARGETED POPULATION

#### EALTH FACILITIES DAMAGED/DESTROYED IN SALAHADIN & NINEWA



- 6 TOTAL NUMBER FULLY DAMAGED \*\*\*
- 23 TOTAL NUMBER PARTIALLY DAMAGED

### **HEALTH ACTION**

190 442 CONSULTATIONS \*\*\*\*

6604 REFERRALS†

#### **ROUTINE VACCINATION AGAINST**



1047 POLIO†\*\*\*†

203 995 MEASLES IN SULYAMANIA

EARLY WARNING ALERT AND RESPONSE NETWORK



**241 REPORTING SITES** 

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



49 % FUNDED

US\$ 67 M REQUESTED

- for one month (July 2018)
  for one month (July 2018)
  for for Monthoden (O4) and Ninewa (O3), 23 partially damaged in Ninewa
  fort for May and June 2018
  sumber of children vaccinated against polio and measles during routine vsl
  Tracking System, Iraq against polio and measles during routine vaccination in high-risk districts and newly accessible areas in June campaign

#### **HIGHLIGHTS**

- WHO is working with the Ministry of Health to respond to patients presenting with gastrointestinal illnesses in through Bashra primarily sample collection, transportation and testing at a WHO collaborating center to help identify the cause of the outbreak. Cholera outbreak preparedness, WHO has provided 16 cholera kits to Basra and neighbouring governorates, developed, and distributed posters with algorithms for laboratory methods and clinical case management.
- To respond to the critical health needs of returnees in west Mosul, WHO supported Ninewa governorate to relocate two field hospitals from Athba and Haj Ali to west Mosul. The hospitals will provide general surgical services for emergency patients and reproductive health services.
- WHO and UNICEF in collaboration with the Ministry of Health and the Directorate of Health (DOH) Sulymania, two hundred and three thousands, nine hundred and ninety-five (203 995) out of 213 640 children were vaccinated against measles, mumps and rubella (MMR) in campaign carried out in Sulymania governorate in September.
- In Erbil, WHO supported the DOH to repair seven ambulances that had mechanical defaults to ensure continued referrals of patients that require emergency treatment.
- To ensure the rapid critical gap are filled, WHO supported the Blood Bank Centre and Ibn Sina hospital in Mosul with different laboratory equipment and reagents including refrigerated centrifuge, blood collection tubes, microscope slides among other supplies.

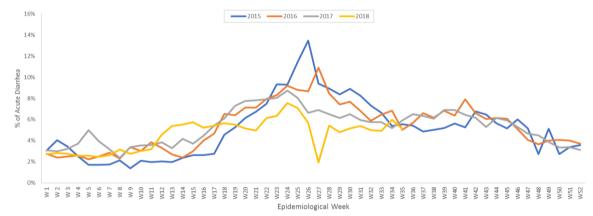
#### Situation update

- Since the end of the crisis in most parts of Iraq, more than 4 million people have returned to their homes in different areas across Iraq while nearly 1.9 million remain displaced in camps and among host communities (International Organization for Immigration). Partners have rehabilitated more than 50 percent of primary healthcare facilities while others, including hospitals that offer secondary and tertiary services remain closed. To cover thes gaps, health partners are providing essential outreach services through mobile medical teams and clinics.
- As part of its support to the Directorate of Health aimed at restoring health services in areas
  disrupted by the crisis, WHO conducted an assessment mission to Aziz Balad sub-district south
  of Salahadin Governorate. Findings indicate that the only primary health care facility in the areas
  is destroyed and not functional. WHO has commenced internal discussions to support primary
  health care services in Aziz Balad.

#### Epi update

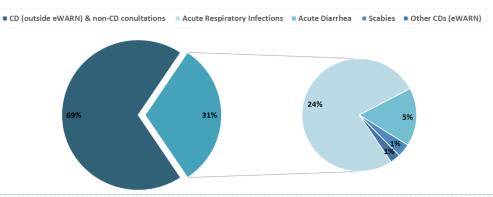
- The Early Warning Alert and Response Network (eWARN) system in Iraq reported that from epidemiological week 31 (also known as "epi week") to epi week 35 August 01 through August 31, 2018), 376 482 consultations including communicable and non-communicable diseases. The system recorded an average of 75 296 patients per week during this reporting period. In September the number of sites submitting weekly epi-reports varied by week, ranging from 131 to 187 reporting sites.
- Thirty-one percent (31%) (n=117 678) of the total consultations reported through eWARN (n=376 482) were cases of communicable diseases, of these, 65% (n=76 404) were children older than five years of age, and 50% of cases reported (n=59 282) were among males.

Figure 1: trends of acute diarrhea cases reported through eWARN in IDP and refugee camps in Iraq by week per year (2015-2018)



• The most common diseases reported during this period are acute upper respiratory tract infection at 22% (84 504 cases) followed by severe diarrhea at 5% (19 619 cases) and acute lower respiratory infection at 2% each (5694 cases) and scabies at 1% (4465 cases) respectively. The proportions of commonly reported diseases to the overall consultations is in figure 2.

Figure 2: Frequency of common reported diseases/events among all consultations in Iraq for epi weeks 31-35, 2018



• Sixteen (16) alerts were received through the electronic eWARN system, investigated by the Departments of Health (DOH), WHO and health partners and responded to within 72 hours. The alerts include; nine suspected cases of measles (eight from Ninewa and one from Kirkuk) and six suspected cases of meningitis (four from Ninewa and one each from Sulymania and Anbar). One suspected case of hemorrhagic fever was from Ninewa.

## Public health concerns

- Limited accesses to health services by the population in return areas and Salahadeen Governorate where most health facilities, including secondary and tertiary health facilities, were damaged and suffer a shortage of health personnel.
- A limited number of ambulances available in areas of return to serve the high demand of patients requiring referrals from IDP camps.
- Safe water remains a significant concern for the populations living in the areas of return in Ninewa, Kirkuk, Salahadin and Anbar.

# Health needs, priorities, and gaps

- Providing primary health care services, including outpatient consultations, immunization, reproductive health services, communicable disease surveillance and management, clinical assessment and management of mental health cases through mobile and static facilities to the affected population and host communities in newly accessible areas in Ninewa, Salahadin Kirkuk and Anbar.
- There is a limited response to medical emergency cases in the newly accessible areas of Ninewa, Kirkuk, and Anbar.

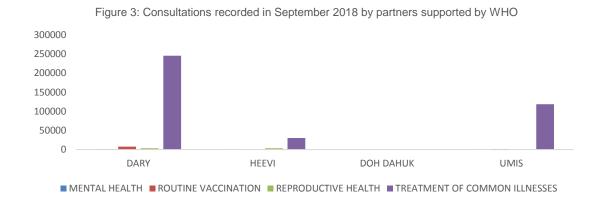
#### WHO action

In mid-August 2018, news of a gastroenteritis outbreak Basra governorate reached WHO following a shortage and contamination of water sources in the area. Since then WHO has been working with the Ministry of Health to respond to patients presenting with gastrointestinal illnesses primarily through sample collection, transportation and testing at a WHO collaborating center to help identify the cause of the outbreak. In addition, as cholera outbreak preparedness, WHO has



provided 16 cholera kits to Basra and neighboring governorates, developed, and distributed posters with algorithms for laboratory methods and clinical case management. These efforts build on WHO's capacity building activities that were held earlier this year including cholera laboratory detection training involving Central Public Health Laboratory and peripheral laboratories in 18 governorates as well as cholera case management training also covering 18 governorates. WHO continues to provide technical advice on epidemiology, surveillance, and case management. Since 12 August to 30 September, 104,470cases of gastrointestinal illnesses, of which 10,816 are diarrhea cases.

- The health needs in West Mosul remain critical following the long-term crisis in the area that left extensive damage and destruction to health facilities like hospitals; this coupled with the presence of thousands of returnees' families limiting the population's accessibility to secondary health services available, including trauma cases, medical and surgical emergencies. To respond to these needs, WHO supported the Directorate of Health, Ninewa Governorate to relocate two field hospitals from Athba and Haj Ali to west Mosul to serve the needs of the population during the resilience and recovery phase. The hospitals will provide general surgical services for emergency cases in Al-Jumhori hospital previously Athba and reproductive health services in Al-Batool hospital formerly Haj Ali. There will be no cost charged for all the services.
- There were two hundred and three thousand, nine hundred and ninety-five (203 995) children vaccinated in mass measles, mumps and rubella (MMR) a campaign carried out in Sulymania governorate in September, a coverage of 96%. The target population for the campaign was children aged nine months to 5 years and living in internally displaced and refugee camps as well as host communities. Two hundred and sixty-five vaccination teams, 54 field supervisors and 12 district supervisors were involved in the vaccination exercise. As part of support supervision and to ensure quality vaccination campaigns, WHO teams monitored 19 vaccination teams and 15 field supervisors. WHO and UNICEF supported the 12 days campaign in collaboration with the Ministry of Health and the Directorate of Health Sulaymaniyah.
- In September 2018, WHO donated emergency medical supplies that are sufficient for a population of more than 41000 to four governorates of Erbil, Koya, Rania, and Sulymania. The medicines will be used to treat chronic and infectious conditions as well as skin diseases for a period of 3 months. Other medical supplies including cholera kits, trauma kit A & B, pain and palliative care medicines were also provided to Non-Government Organization partner Emergency. The DOH's and NGO partner are serving the healthcare needs of internally displaced persons, refugees, returnees and host communities.
- WHO and its implementing partners provided 413 900 people including 42 656 children less than five years with consultations in three governorates (Dahuk, Ninewa, and Salahadin) that hosts displaced persons. The health facilities run by implementing partners and the Directorates of Health recorded these consultations. The partners: Dary, Heevie and United Iraqi Medical Society (UIMS)\*\*\*\* in addition to healthcare facilities run by Dahuk and Ninewa and Salahadin DOHs. Services provided include mental health, laboratory, and investigations, medicines to treat various diseases, vaccination services, delivery services, reproductive health services, and referrals among others. The total consultations recorded from January to 30 September 2018 are more than 4.5 million in seventy-two locations supported by 10 WHO partners. Graph 3 shows selected areas where consultations were recorded.



- In Talafar, Zakho and Sumel districts WHO through its implementing partner Heevie, provided 1317 consultations. Thirty-four emergency health cases were transported to Duhok and Zakho hospitals using ambulances supported by WHO. The most common disease for consultation was upper respiratory tract infections, diarrhea, and lower tract respiratory infections. The health facilities in the three districts service a catchment population of 338 754.
- In addition, Heevie provided 1408 consultations including 237 for children less than five years in Basheeqa and Alqoosh sub-districts, Telkyef and Shikhan districts. More than 62 000 displaced persons, returnees and host communities are currently living in these localities.
- In Erbil, WHO supported the DOH to repair seven ambulances that had mechanical defaults to ensure continued referrals of patients that require emergency treatment. To support the maintenance of Rizhary hospital, WHO replaced two old surgical ceiling lights in the health facility.
- To ensure rapid critical gap filling, WHO supported the Blood Bank Centre and Ibn Sina hospital in Mosul with different laboratory equipment and reagents including refrigerated centrifuge, blood collection tubes, microscope slides, blood group testing et al. In addition, WHO provided laboratory supplies including centrifuge tubes, spectrophotometer cuvettes, plain tubes, microscope slides, and pipette tips to Ibn Sina hospital in Mosul.
- To ensure proper disposal of waste management Ninewa governorate, WHO through its implementing partner Pekawa Organization for Humanitarian and Development Services collects and disposes of medical waste from fifty-two facilities. health



Since January 2018 to September 2018, a total of 20,377 kilograms of medical waste has been disposed of. The Ninety percent of medical waste collected during this period were plastic bags.

hospital, west Mosul Photo © WHO/P.Ajello

- In Sulymania, WHO continues to support primary health care services in Qorato and Tazade and mobile medical team to displaced persons living in host communities in Garmian. In this period, health facility provided consultations, and nursing care, 12 percent of the consultations were among children under five years, and 680 consultations recorded among displaced persons in host communities.
- Consultations Reported by MMC In Garmian Area

  Male
  41%

  State of the second of the
- WHO together with local health authorities conducted support supervision visits in Kirkuk, Sulaymaniyah, Ninewa, Dahuk and Salahadin governorates. The supervision visits are to strengthen health service delivery and

reporting, assess gaps and ensure that they are filled. More than ten support supervision visits took place in six governorates in July 2018.

- ✓ In Kirkuk, the team monitored vector control activities and where needed provided additional guidance, in Salahadin the teams reviewed the distribution of WHO medical supplies water quality monitoring, vector control, and waste management activities to ensure that they were delivered as planned by WHO's implementing partner PEKAWA. WHO also visited Al Shahama and Al Alam camps to monitor the progress that made at the facility since its handover to the Directorate of Health. Gaps identified were shared with the DOH for their action. Discussions to support Aziz Balad PHCC by WHO have commenced following an assessment mission to the area, which found that all health services and infrastructure were destroyed during the crisis.
- ✓ In Ninewa, WHO visited Shikhan General Hospital to discuss the challenges and needs of the health facility, as it is a referral hospital for four displaced camps. The hospital has benefited from WHO's support of medical devices and equipment to strengthen its services.

## Partnership coordination

- and
- The Health Cluster convened six national and sub-national meetings in September in Erbil, Ninewa, Sulaymaniyah, Kirkuk, Baghdad, and Dohuk.
- The health cluster has conducted a mapping of the partners that provide gender-based violence services in health facilities and presented to the joint Mental Health and Psychosocial Support/gender-based violence workshop conducted in Geneva. Plans are underway to offer training for first-line support for Iraq in November 2018.

#### **Contacts:**

- 1. Dr Adham R Ismail Abdelmoniem, Acting Country Representative, WHO Iraq, email: ismaila@who.int
- 2. Dr Wael Hatahit, Technical Officer, Mobile: +9647510101456, email: hatahitw@who.int
- 3. Ms Pauline Ajello, Communication Officer, mobile: +9647510101460, email: ajellopa@who.int
- 4. Ms Ajyal Sultany, Communication Officer, mobile: +9647510101469, email: sultanya@who.int