



1.2 -1.5 MILLION\*  
PEOPLE AFFECTED



657,056\*\*  
# DISPLACED FROM  
MOSUL AS OF 15  
MAY



2.7 MILLION\*\*\*  
PEOPLE IN NEED  
OF HEALTH  
SERVICES

713 807\*\*\*\*  
PEOPLE  
REACHED



12 318  
# INJURED  
AS OF 12  
MAY

## Highlights

- Trauma casualty rates across Mosul is still rising with over 12 318 reported casualties referred to hospitals in Mosul and neighboring Governorates for the period from 17 October 2016 to 12 May 2017. Nearly half of these reported cases were from western Mosul alone where the offensive was launched in February 2017. At Trauma Stabilization Points (TSPs), a cumulative number of 2479 people have been treated for trauma injuries for the same mentioned period. Reported cases from hospitals and TSPs were mostly life-threatening while a small portion were with minor injuries including head, neck and spinal injuries caused by shrapnel and gunshot wound.
- Construction of WHO supported PHC Center (Al-Basma) in Al Sallameya IDP camp west Mosul was completed on 15 May. The center was established with the capacity of six caravans delivering a comprehensive package of primary health care services including immunization, lab examination, referral, and reproductive health services.
- The cumulative number of consultations reported since the beginning of Mosul operations on 17 Oct last year till the 14<sup>th</sup> of May 2017 stands at 713 807. The number of reported consultations for the period under review (8 – 14 May 2017) is 11 464 including 2876 children under the age of five years old, 2610 for respiratory cases, 1066 for reproductive health, and 15 for mental health and psychosocial support.
- WHO has supported the six mobile clinics and the PHC centers in Hamdaneih district and Hassansham U3 IDP camp, run by the implementing partner DAMA NGO, with two complete kits (basics and supplementary units) and 12 separate basic units of the Interagency Emergency Health Kit (IEHK) sufficient for a population of 32 000 for a duration of three months.
- WHO has also supported Debaga stadium PHC center run by the implementing partner Help The Needy (HTN) NGO with two complete IEHK sufficient to serve a population of 20 000 heads for a duration of three months. The kits (basics and supplementary units) will support HTN to deliver first line health care services in Hassansham M2 and Debaga Stadium IDP camps in addition to four MMCs in Jadaa 5 camp in Qayara district southeast Mosul.

Trauma stabilization services to displaced population from west Mosul.



\* As of 23 December 2016, 1.2-1.5 million people could be affected in Mosul by the military operations – Data source, UNOCHA

\*\*Cumulative numbers reported by IOM since 17 October to 15 May 2017

\*\*\* Figures for Humanitarian Response Plans 2017 for Ninewa Governorate 1

\*\*\*\*Number of consultations since 17 October 2016 until 14 May 2017

\*\*\*\*\*Casualty cases for patients referred to Emergency and West Emergency hospitals in Erbil, Shikhan hospital, Athba, Hamam al' Alil and Bartalla Field Hospitals, this number could be higher

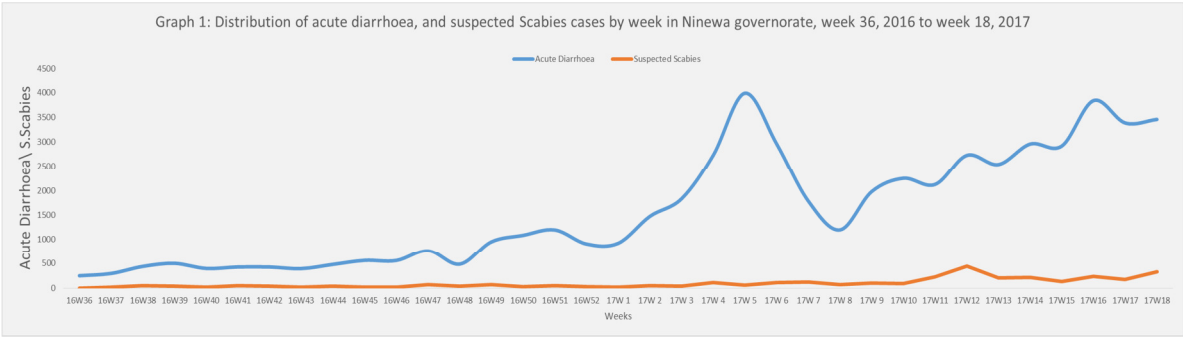
\*\*\*\*\* Only funding status for the Mosul Operations.

**Situation Update**

- As of 14 May this year, the Ministry of Migration and Displacement (MOMD) has identified the cumulative number of 657 056 people displaced from Mosul since the beginning of the operations there on 17 October 2016; of this number, a total of 480 906 individuals were from western Mosul city alone.
- A new wave of around 5000 displaced people has arrived at Hamam Al Aliel transit site on 13 May, according to Iraqi Security Forces (ISF) sources. The newly displaced population has fled west Mosul areas of 17 Tamuz, Meshherfa, Haramat, Hawi Al-Kanisa, and Zanjili neighborhoods. All of them have faced death threats, snipers, and mines on their escape route from their respective neighborhoods to Hamam Al Aliel and Badoush transit camps. Death threats, violence, and shortage in water and food were among the reasons behind the new influx of displaced.
- In Badoush, ISF sources reported the arrival of approximately 2500 individuals to this transit site. More IDPs continue to arrive to this location from the mentioned areas of Meshherfa I, II, and III, Haramat, Hawi Al-Kanisa, 17 Tamuz, and Al-Islah Al-Zirai west the city of Mosul. They are fleeing their areas due to reasons of violence and the ongoing conflict in West Mosul. ISF sources informed on 13 May that IDPs identification cards were collected by upon arrival to the screening point at Badoush with a waiting duration of one to two hours maximum.

**EPI Updates**

- In epidemiological (EPI) week 18, a total of 66 health facilities submitted their EPI weekly surveillance reports including 26 mobile medical clinics, 38 static clinics and 2 hospitals from 12 health facilities serving internally displaced persons in Ninewa. A total of 45 472 consultations were recorded including acute respiratory infections (68%), acute diarrhea (18%), suspected leishmaniasis (1%), and suspected scabies (6%); these were the leading causes of morbidity in the governorate. No alert was issued this reporting week.
- During EPI week 18 also, Ninewa governorate recorded an increase in the acute diarrhea cases (51%) from the previous week (49%). Most cases were reported from the health districts of Aymen (27%), Al-Hamdaniya (25 %), Gayara (17 %), Makhmur health district (10 %), AL-Shikhan, Hatra & Ayser (5 %), and Telafar & Tilkaif and Bardarash (2%).



## Public health concerns

- Limited access of populations to health services in newly liberated areas and inside Mosul city due to the volatile security situation.
- Limited movement of partners to newly accessible areas due to security challenges which makes it hard to conduct timely investigations of suspected cases of communicable diseases in the affected communities.
- Shortage of safe water for populations trapped inside western Mosul remains a concern. This is a potential risk for outbreaks of waterborne diseases such as acute watery diarrhea.
- Shortage of fuel and ambulances to refer patients out of Mosul city hence hindering the timely response to emergencies.

## Health needs, priorities, and gaps

- Provision of primary health care services to the affected population in newly accessible areas.
- Provision of Primary health care services in newly established camps.
- Management of trauma cases which are steadily increasing.
- Mobilization of human resources to support the high numbers of trauma cases seen in Trauma Stabilization Points (TSPs) and field hospitals.
- Provision of sufficient quantities of controlled substances needed for pain management and sedation of patients with severe trauma injuries.
- Strengthening the existing capacity for post-operative care.

## WHO Response

- Trauma care remains a critical concern for WHO and national health authorities, especially near frontline areas. Since 17 October last year, a total of 12318 cases were referred and treated in emergency and field hospitals in Mosul and neighboring governorates including Athba, Hamam Al Alil, and Bartalla field hospitals and Qayara, Emergency, West Emergency and Shikhan hospitals as of 12 May this year. Category breakdown shows that 73% were civilians, of which, 28% were children under the age of 15 years and 25% were females. Meanwhile, active trauma stabilization points (TSPs) of NYC Medics, AEM, MSF, and MERMT reported acumulative total of 2479 cases for the duration 18 Oct 2016 to 12 May 2017; of which 6% were for children below 5 years old and 15% for females. Most patients were treated for life-threatening and multiple to minor injuries like head, neck and spinal injuries caused by shrapnel and gunshot wound.
- The accumulative number of consultations since the beginning of Mosul operation in October 2016 to 14 May this year stood at 713 807. As for this reporting week (8-15 May), a total of 11464 consultations were reported by the implementing partners DAMA, DARY, HEEVI, UIMS, and WAHA, of which 2876 were for children under the age of five years old, 2610 for respiratory cases, 1066 for reproductive health, and 15 for mental health and psychosocial support. Further numbers of consultations were also reported from different locations as follows:
  - The total number of consultations provided in Hamam Aleel PHC center and the satellite health clinic topped 7381.
  - The total number of consultations provided through the five WHO supported medical mobile clinics working in the recently liberated areas in west bank of Mosul stood at 7208.

- The total number of consultations provided in Al-Agha Health House in Al-Agha camp in Tal Abta stood at 1538.
- The total number of consultations provided in the medical mobile clinics in the scorpion junction screening site stood at 410.
- WHO through its implementing partner UIMS has finalized the work of a new PHC Center (Al Basma) in Al Sallameya IDP camp west Mosul. WHO equipped the new PHC center, which opened its doors for patients on 15 May, with two complete Interagency Emergency Health Kits (IEHK) to enable the center resume providing quality health care services to the displaced population in the mentioned camp. Daily feedback on numbers and details of consultations and gaps/needs will be reported soon after operation. WHO has recently supported a number of PHC centers including Al Basma in west Mosul and Chamakor in Erbil with a package of medical and laboratory equipment to enhance the provision of primary health care services in IDP camps and ensure easy access to general clinical examination services including laboratory investigations.
- The two field hospitals supported by WHO in Athba and Hamam Al Alil areas have received Orthopaedic external fixator kits, delivery of blood components, and laboratory in-vitro diagnostics and related supplies. In addition, Athba Field Hospital was supported with a back-up consignment of surgical and trauma kits sufficient for surgery and intensive care needs for an average of 200 patients.
- A new wave of 115 displaced persons arrived at Nargizlia Screening Site in Shikhan district northeast Mosul and received 48 consultations, of which 16 were for children under 5 years old provided by WHO supported mobile medical teams (MMTs) in coordination with the Curative and Preventive Dept. in Dahok DOH. No communicable diseases alert was reported by any IDPs reporting sites. Implementing partners in Dahok reported the total of 6530 consultations including 1508 for children under 5 years old for the period from 1 November 2016 to 15 May 2017. This number of consultations brings up the cumulative total provided by WHO to 713 807.
- WHO organized on 9 May a training on the Early Warning and Alert Response Network (EWARN) for a team of medical and paramedical staff- focal points of the EWARN reporting system in Chamakor, Hershama, and Bahirka PHC centers in Erbil. WHO will also provide a training on the Activity info application on 16 of the current to a team of three doctors and four clerks from the same mentioned PHC centers.



**Opening of Al Basma PHC center in the new IDP camp in Al Salamya area in west Mosul**



**WHO trains focal points of a number of PHC centers on the EWARN reporting .**

Partnership  
and  
coordination

- The Health Cluster has coordinated with Ninewa DOH to support the availability of static and mobile medical services in the newly accessible areas including screening sites and mustering points; these include Badoush, Hammam Al Alil Screening Site, Tel Kayasum, Scorpion Junction, Qayara Airport and a new site west of Al Risala area.
- In order to address the issue of scabies in IDP camps, the Health Cluster along with WASH Cluster and Communication with Communities (CwC), IOM has prepared IEC material to be distributed in the camps; a hygiene promotion meeting was held on 14 May to address the issues of scabies and acute watery diarrhea.

Contact  
information

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