



**1.2 -1.5 MILLION\***  
**PEOPLE AFFECTED**



**686 200\*\***  
**# DISPLACED FROM  
MOSUL**



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

**729 200 \*\*\*\***  
**PEOPLE  
REACHED**



**12 502**  
**# INJURED**

## Highlights

WHO in collaboration with Ninewa, Erbil and Dahuk Directorates of Health (DOH) and other health cluster partners have stepped up efforts to strengthen the delivery of basic health services for the high influx of internally displaced persons fleeing from the intense operations in west Mosul:

- In Scorpion junction, two caravans donated by WHO are being used by its implementing partner DARY to deliver 24/7 primary health care services for IDPs fleeing from west Mosul. In addition, WHO will provide all the emergency medical supplies including basic essential medicines that will be used to treat patients with chronic conditions and other infections.
- To ensure IDPs continue having access to basic essential medicines for common ailments recorded in various health facilities, WHO donated medicines worth treating more than 5000 patients to its implementing partner New York City Medics and to primary health care center (PHCC) in Chamacor IDP camp. Medical consumables were also donated to DOH Ninewa to support health services for the IDPs.
- More than 16 400 people were reached this week in medical consultations through WHO supported MMCs and static primary health facilities managed by seven implementing partners; 4300 (26%) of these were children under the age of 5 years.
- In the newly accessible areas of Zumar and Rabea sub districts, Ninewa governorate, WHO through its implementation Heevie, is supporting a community health houses project which delivers primary health care services to returnees and IDPs in the newly liberated areas.



Photo ©: WHO  
Patients line for health care services at Ninewa Mobile Medical Clinic donated by WHO and run by IMC in Jadaa 4 camp.

## Situation Update

- The numbers of IDPs fleeing from west Mosul continue to increase each day. Currently an estimated 533 600 persons have been reportedly displaced from Mosul; 327 700 of them are displaced in camps. According to the more than 686 200 persons have been displaced from Mosul since 17 October 2016 to 18 May 2017; 176,150 of have been displaced from east while 510,063 are displaced from the western part of the city. The Government further estimates that 117 700 and 34 800 people from east Mosul and west Mosul have returned to their homes respectively.
- Due to the rising numbers of IDPs fleeing from west Mosul, Health partners anticipate increased health needs and civilian casualties as operations into the remaining parts of the old city peak. Over the past one week, over 50 000 civilian have reportedly fled to Hamam al' Alil and other neighborhoods. Delivering essential basic health services including vaccination services, medicines and trauma care remains a top priority for WHO and other the health cluster partners in this period.

\* 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 Iraq Ministry of Displacement and Migration since 17 October to 18 May 2017

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

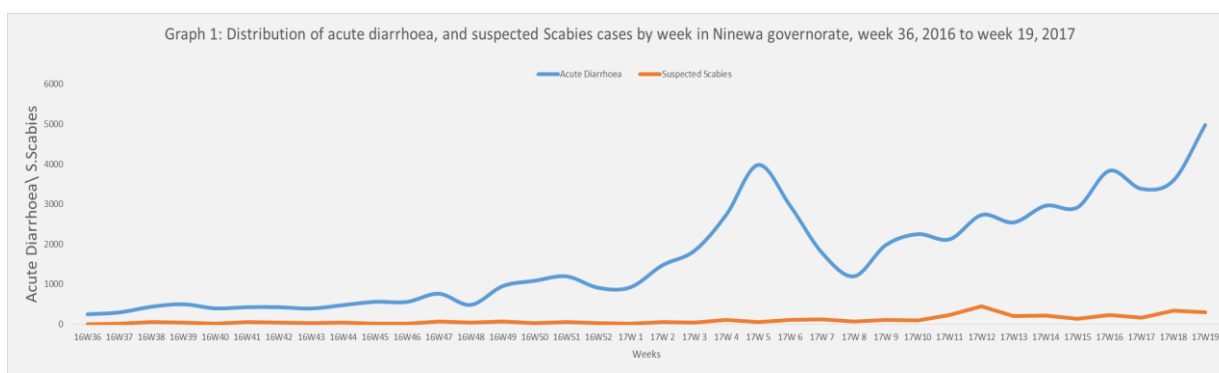
\*\*\*\*Number of consultations since 17 October 2016 until 20 May 2017

\*\*\*\*\*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.

- More than 240 trauma cases were referred and treated in five hospitals including Athba and Bartalla Field Hospitals, Emergency, West Emergency and Shikhan hospitals between 12 May and 20 May 2017; bringing the cumulative number of trauma patients from west Mosul treated in 5 hospitals since 18 February amounts to more than 6 369 (86% were civilians 27% children under the age of 15 years and 31% female). To date, more than 12 500 patients (73% civilians, 28% under the age of 15 years and 25% female) have been referred to hospitals in Mosul and neighboring governorates. Most patients were treated for head, neck and spinal injuries caused by shrapnel and gunshot wound.
- In epidemiological (epi) week 19 ending 14 May 2017, a total of 71 health facilities submitted their epi weekly surveillance reports including 26 mobile medical clinics, 42 static clinics and 3 hospitals from 15 health agencies serving internally displaced persons in Ninewa. A total of 68 573 consultations were recorded in all Ninewa IDPs camps through the Early Warning Alert and Response Network (EWARN) and health facilities serving retaken areas. Acute respiratory infections (64%), acute diarrhea (25%) and suspected Leishmaniasis (1%) were the leading causes of morbidity in the governorates (refer to graph 1 for details).

## EPI Updates



- During epi week 19, Ninewa Governorate recorded an increase in the number of acute watery diarrhea by 16% from 42% to 58%. The majority cases were reported from the health sub districts of Aymen (29%), Gayara (26%), Al-Hamdaniya (20%), Makhmur (6%) and Al-Shikhan (5%). Other health sub districts that reported cases are Ayser and Hatra (4%), Telafar and Tilkaif (2%) and Bardarash and Sinjar each recording 1%.

- Limited access of populations to health services in newly liberated areas and inside west 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 water borne diseases such as acute watery diarrhea.

## Public health concerns

- 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 as the operations intensify.
- 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.

## Health needs, priorities and gaps

- WHO in collaboration with Ninewa, Erbil and Dahuk Directorates of Health (DOH) have stepped up efforts to strengthen the delivery of basic health services for the high influx of internally displaced persons fleeing from the intensified operations in west Mosul. In Scorpion junction and other transit and screening

## WHO Response

sites, WHO has prepositioned caravans that will be used to deliver 24/7 basic health services for the IDPs. In Scorpion junction, the services will be delivered by WHO's implementing partner DARY.

- WHO provided 8 rental cars to the Ninewa DOH team to facilitate movement and carry out supervision and monitoring activities in various health facilities in host communities, IDP camps and locations where MMCs are operational.

- In the newly accessible areas of Zumar and Rabea sub districts, WHO through its implementation Heevie, is supporting a community health houses project through which primary health care services are delivered to returnees and IDPs in the newly liberated areas in Ninewa governorate. In this reporting period, 1146 people were reached with consultation services.

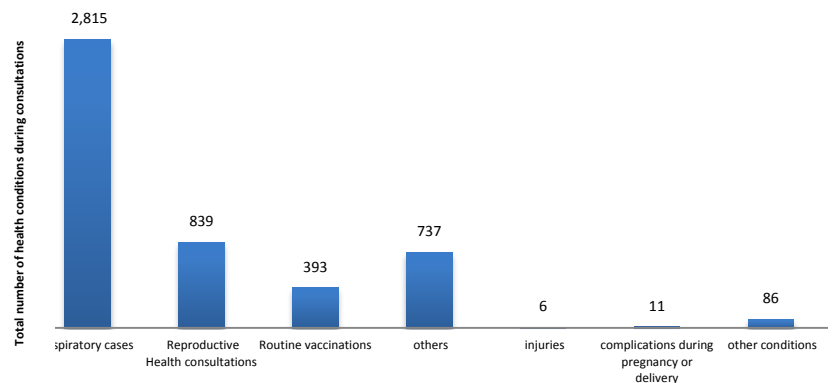


Photo ©: UMIS  
Laboratory Technicians at work at a newly established primary health care centre in Al-Basma run by WHO's implementing partner United Iraq Medical Society

- To ensure that IDPs continue to have access to essential basic health services and trauma care, WHO delivered IV fluids and Trauma kit to New York City Medics enough to serve the health needs of more than 270 trauma patients. Four Interagency Emergency Health Kits (IEHK) sufficient for 4000 people were also donated to a primary health care center (PHCC) in Chamakor IDP camp while DOH Ninewa was provided with medical consumables.

- More than 16 400 consultations were recorded through WHO supported MMCs and static primary health facilities run by implementing partners, 4300 (26%) of these were children under the age of 5 years. Eighteen percent of all consultations were due to upper respiratory tract infections. More than 840 complicated cases including injuries and pregnancy or delivery related complications were referred to specialized health facilities through ambulances donated by WHO to the Ninewa Directorate of Health (DOH).

Graph 2: Breakdown of health conditions recorded during consultations in 6 primary health facilities and Mobile Medical Clinics supported by WHO in Ninewa Governorate from 15 to 20 May 2017



- Through WHO's implementing partner and Duhok DOH, more than 120 new consultations, including 25 children under 5 years old were recorded this week. Additional 1316 consultations, including 199 children under 5 years were recorded by Heevie mobile medical teams (MMTs) in Zumar district. Since 1 November 2016 to 20 May, 2017, more than 7900 consultations including 1732 children less than 5 years have been recorded.
- A total of 160 cases from west Mosul including trauma, obstetric, and elective medical cases requiring secondary and tertiary health services were referred to Shikhan hospital, Duhok Emergency and Azadi

hospitals in this reporting period. All referrals were made through the 10 ambulance teams in Duhok DOH supported by WHO. The teams are supporting the DOH to strengthen the referral pathway of emergency medical cases from newly accessible areas and IDP camps. More than 2800 patients have been referred to the three hospitals through this intervention since the start of the program in November.

- Through WHO support and direct management and supervision from the Directorate of Health for 12 Medical doctors working in Duhok Emergency and Azadi general hospitals, more than 2100 patients were treated this week. As at 20 May 2017, more than 36 700 patients have benefited from this support.
- WHO has also supported the Directorate of Environment to conduct water quality monitoring. During this period 48 water samples were collected from 6 IDP camps and tested for bacteria. Additional 12 samples were tested for chemical analysis. The results showed that all samples were in compliance with Iraqi Drinking Water Standards and WHO guidelines.
- WHO team conducted a mission to Jadaa 4 & 5 and Haj Ali camps hosting more than 72 500 IDPs to assess and monitor health service provision for IDPs. Findings show a need for static health facilities in Jadaa 4 & 5 and phase 2 Haj Ali camps and a need for continuous follow up of MMCs to ensure their availability on sites within the working hours. The need to accelerate the furnishing and equipping of the clinic run by IOM in Haj Ali Phase 1 was also identified. Moreover, the need to ensure that reporting and notification process are strengthened while upgrading the clinic with laboratory was noted.

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Partnership  
and  
coordination

- The health cluster has agreed that Ninewa Pharmacists will phase out from Hamam al' Alil 1 screening site given their failure to deliver 24/7 services. Non-Governmental Organization, DARY has been identified to take over the service delivery of primary health care, triage and referrals. The 24/7 services will be supported by the static DARY PHC at Hamam Alil camp. The DoH Ninewa and WHO will support DARY with medicines, logistics and staff.
- The Health Cluster along with NGOs partners, and UN Agencies met to discuss the process of adapting the humanitarian interventions focusing on the transitioning from an acute emergency to a post-conflict setting for some geographical locations. This process will ensure that minimum standards are met to offer durable solutions and mainstreamed throughout the return process and response. The health cluster is in process of defining indicators for the health response framework to promote sustainable returns.
- The health cluster has completed the technical and budget review process of the Iraq Humanitarian Pooled Fund (IHPF) first allocation of the 16 recommended projects. This has now been moved to IHPF/OCHA for funding and implementation.

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Plan for the  
coming week

- Led by the Federal Ministry of Health, Ninewa, Dahuk and Erbil Directorates of Health supported by WHO and UNICEF conduct a polio vaccination campaign targeting more than 332 000 children aged 0 to 5 years from Mosul and underserved areas in Ninewa Governorate residing in 11 newly accessible districts of Ninewa Governorate and 16 internally displaced person's camps in Ninewa and the neighboring governorates of Erbil and Dahuk. The campaign will run for 5 days and vaccination teams will make special efforts to reach children within these populations during this campaign and this will be done through house-to-house visits.
- The process of contracting Pekawa NGO to construct a medical waste management unit in Qayara district is ongoing. The unit will ensure to autoclave and shred medical waste instead of applying the usual incineration modality. This unit will serve all public health facilities in Qayara and Hammam al' Alil including those in IDP camps.

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