

1.2 -1.5 MILLION*
PEOPLE AFFECTED



314 000 # DISPLACED FROM MOSUL



2.7 MILLION**
PEOPLE IN NEED
OF HEALTH
SERVICES

638,000 ***
PEOPLE
REACHED



6 100 # INJURED

Highlights

- WHO has supported Ninewa Directorate of Health (DOH) and Women and Health Alliance International (WAHA) with 22 Inter-agency Emergency Health Kits (IEHK) enough for 21 000 persons, 2 surgical kits and 1 full trauma kit enough for 300 surgical interventions.
- More than 1500 new internally displaced persons (IDPs) from west Mosul arrived Nargizlia screening site in Shikhan district, Duhok Governorate this week.
- Through WHO supported mobile medical clinics (MMCs) and static primary health facilities managed by implementing partners, 20511 consultations, including 7962 children under the age of 5 years were recorded. A total of 1892 cases were also referred to specialized health facilities.



• More than 1400 people were seen for medical consultations in Dibaga 2 IDP PHCC. Forty six percent of the total consultations were female and 26% children under 6 years of age.

Situation Update

- The International Organization for Migration (IOM) displacement tracking matrix data reports that more than 300 000 persons have been displaced from Mosul since 17 October 2016 to 30 March 2017. From 25 February to 9 April 2017 more than 270 000 persons have been displaced from west Mosul into various locations including camps, emergency sites and out-of-camp locations. According to authorities in Hamam al' Alil more than 200 000 persons have been recorded in transit sites since 18 February until 8 April, 2017.
- From 28 March and 05 April 2017, more than 300 new trauma cases were received in 3 WHO supported Trauma Stabilization Points (TSPs) located in the frontlines of west Mosul, bringing the total number of casualty cases recorded between 18 February 2017 to 08 April to 1683 trauma cases.
- More than 300 new trauma cases were referred and treated in five hospitals including Athba and Bartalla Field Hospitals, Emergency, West Emergency and Shikhan hospitals between 27 March and 08 April 2017. This brings the cumulative number of trauma patients from west Mosul treated in the 5 hospitals since 18 February to 1861(73% were civilians 27% were children under the age of 15 years and 27% were females). To date, more than 6,100 patients (60% civilians, 28% under the age of 15 years and 22% 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 wounds.

EPI Updates

In epidemiological (epi) week 13 ending 02 April 2017, a total of 64 health facilities submitted their epi weekly surveillance reports including 26 mobile medical clinics, 36 static clinics and 2 hospitals from 15 health agencies serving internally displaced persons in Ninewa. A total of 58 177 consultations were recorded in all Ninewa IDPs camps through the Early Warning Alert and Response Network (EWARN)

 $[*] As of 23 \ December \ 2016, \ 1.2-1.5 \ million \ people \ could \ be \ affected \ by \ the \ military \ operations - Data \ source, \ UNOCHA$

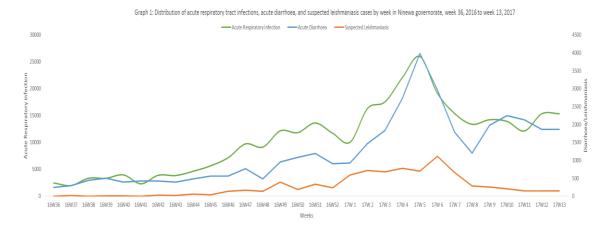
^{**} Figures for Humanitarian Response Plans 2017

^{***}Number of consultations since 17 October 2016 until 1 April 2017

^{****}Casualty cases for patients referred to Emergency and West Emergency hospitals in Erbil, Shikhan hospital, Athba and Bartalla Field Hospitals, this number could be higher

^{*****} Only funding status for the Mosul Operations.

and health facilities serving retaken areas. Acute respiratory infections (31%), acute diarrhea (4%) were the leading causes of morbidity in the governorates, refer to graph 1 for details.



• During epi week 12, Ninewa Governorate recorded a decrease in the number of acute respiratory infection cases. Most cases were reported from the health sub districts of Aymen (38%), Al-Hamdaniya (22%), Ayser (10%), Telafar and Al-Shikhan health district (7%), Makhmur (6%) and Tilkaif (5%). Sinjar health sub district recorded 4% of the cases while Gayara and Bardarash health sub districts each had 1% of the total cases.

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 water borne diseases such as acute watery diarrhea.
- Shortage of fuel and ambulances to refer trauma cases out of Mosul city hence hindering the timely response to emergencies.

Health needs, priorities and gaps

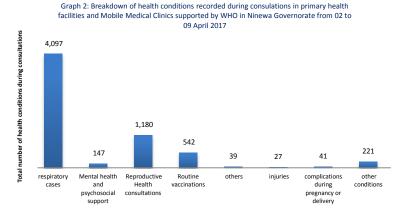
- Provision of primary health care services to the affected population in newly accessible areas.
- Provision of Primary health care services in newly established camps.
- Management of trauma cases which are steadily increasing.
- Mobilization of human resources to support the high numbers of trauma 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.

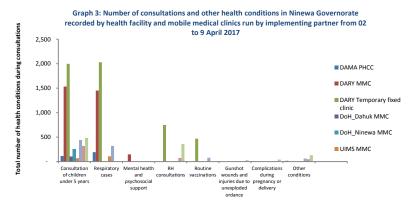
WHO Response

WHO has supported the Ninewa Directorate of Health (DOH) and Women and Health Alliance International (WAHA) with 22 Interagency Emergency Health Kits (IEHK) enough for 21 000 persons, 2 surgical kits and 1 full trauma kit enough for 300 surgical interventions. The supplies are being used to respond to the health needs of IDPs in Qayyarah, Hassan Sham and Khazer.



- health care services in areas with limited access to health services through Ninewa DOH and implementing partners. This week 16 905 consultations were recorded through WHO supported MMCs and static primary health facilities managed by implementing partners, including 5305 children under the age of 5 years. Twenty four percent of all the consultations were due to upper respiratory tract infections. A total of 656 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).
- More than 1400 people were reached out in medical consultations at Dibaga 2 IDP PHCC. Forty six percent of the total consultations were female and 26% children under 6 years of age. The health facility was established by WHO and is being managed by Erbil DOH alongside UNICEF and UNFPA in supporting vaccination and reproductive health services respectively. The facility is staffed by 27 health workers who provide 24 hours comprehensive primary health care services for more than 5000 IDPs.





- Through mobile medical clinics managed by WHO's implementing partner, Heevie and Duhok DOH, 460 new consultations, including 117 children under 5 years old were recorded this reporting period. Since 1 November 2016 to 30 March, 2017, a total of 5308 consultations including 1194 children less than 5 years were recorded. This week more than 1500 new IDPs from west Mosul arrived in Nargizlia screening site in Shikhan district, Duhok Governorate.
- One hundred and fifty four patients from west Mosul including trauma, obstetric, and medical cases requiring secondary and tertiary health services were referred to Shikhan hospital, Duhok Emergency and Azadi hospitals. All the referrals were made through the 10 ambulance teams in Duhok DOH supported by WHO. The aim of the teams is to strengthen the referral pathway of emergency medical cases from newly accessible areas and IDP camps. To date, more than 450 cases have been referred to the three hospitals through this intervention.
- Through WHO continued support and the direct management and supervision from the Directorate of Health for 12 Medical doctors working in Duhok Emergency and Azadi general hospitals, 933 patients were treated this week. As at 30 March 2017, more than 24 000 patients had benefited from this support.
- Through the support provided by WHO, the water quality monitoring team from the Directorate of Environment collected 32 water samples from 4 IDP camps and tested them for bacteria. Additional 8 samples were tested for chemical analysis. The results showed that all samples were in compliance with Iraqi Drinking Water Standards and WHO guidelines.

Partnership and coordination

■ The Health Cluster, through the leadership of WHO, has identified IOM as the partner to provide health services for internally displaced persons in E site of Haj Ali IDP camp through mobile medical teams and MMCs. WHO has procured and donated wheel chairs to Qayara camp to support mobility of physically challenged and elderly persons. A coordination meeting was convened by the health cluster to agree on their distribution to avoid duplication of efforts.

Plan for the coming week

• Finalize work on Hamam al' Alil field hospital and handover to implementing partner to support management of trauma patients from Mosul.

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