

WHO Special Situation Report Mosul Crisis, Iraq Issue No 23: 11 June to 17 June 2017



1.5 MILLION\* PEOPLE AFFECTED

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860 284\*\* DISPLACED FROM MOSUL 2.7 MILLION\*\*\* PEOPLE IN NEED OF HEALTH SERVICES



14 705\*\*\*\* # INJURED

- WHO in coordination with Erbil and Ninewa Directorates of Health (DOH) on 13 June 2017 rapidly responded to suspected food borne illness outbreak in Hassan Sham U2 camp by conducting an investigation with the aim to identify the source and cause of the outbreak, treat those ill as well as contain and prevent any spread.
  - To support the response to any future cholera outbreaks in the Governorate of Ninewa including camps and host communities, WHO delivered 500 rapid diagnostic test kits (RDT) to Ninewa DoH and primary health care facilities in Qayyarah, Hammam al'Alil and Salamiyah.
  - WHO donated to health partners emergency medical supplies enough to serve the needs of more than 20500 persons in Al Salamiyah camp and in MSF- Holland run hospital in Dahuk Governorate. The supplies included



Interagency Emergency Health Kits, surgical and trauma kits and essential medicines for the treatment of infectious diseases, chronic conditions and skin diseases.

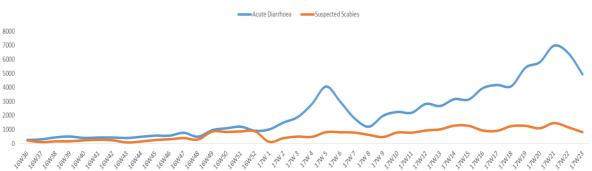
Since January until 17 June 2017, more than 847 257\*\*\*\* consultations have been recorded from health all facilities serving internally displaced persons in Mosul and other surrounding governorates; more than 21940 of the total consultations were recorded between 11 and 17 June alone through WHO supported MMCs and static primary health facilities managed by five implementing partners including 5943 (27%) children under the age of 5 years.

- According to Iraq Ministry of Displacement and Migration (MODM), 860 284 people have been displaced from Mosul since the start of the crisis in Mosul late 2016, and 684 143 of these have been displaced from west Mosul since 19 February 2017. Currently, an estimated 664 878 persons remained displaced from Mosul, 31 763 of these are from east Mosul while more than 633 115 are displaced from west Mosul; however as government security forces push further to overtake the old city, the figure continues to sharply increase. Fifty one percent of all IDPs are currently living in IDP camps in Ninewa and neighboring governorates of Erbil and Dahuk, 144 387 and 31 763 have since returned to their homes in east and west Mosul respectively.
  - Two ambulances have been pre-positioned by the Ministry of Health and the Kurdistan Ministry of Health have at Ninewa Hotel where more than 8500 new IDPs arrived between 10 and 14 June 2017. The ambulances will support with the referrals of patients who require specialized care.
  - A total of 630 trauma cases were recorded in trauma stabilization points (TSPs) in west Mosul from 05 June to 19 June 2017, this brings to 3700 injured patients treated by three of WHO's implementing partners and other actors in west Mosul. Fifteen percent of the cases were women while 12% were children less than 18 years of age. Since 17 October, More than 7650 trauma patients have been treated in all TSPs in Mosul including east and west Mosul.

- Cumulatively 8572 trauma patients from west Mosul have been treated in 5 hospitals including Athba, Hamam al' Alil and Bartalla Field Hospitals, Emergency, West Emergency and Shikhan hospitals since 18 February, 33% children under the age of 15 years and 32% are female. To of 19 June 2017, 14705 patients (more than 73% civilians; 27% women and 32% children under the age of 15 years) have been referred to hospitals in Mosul and neighboring governorates.
- EPI
- Updates

In epidemiological (epi) week 23 ending 11 June 2017, a total of 73 health facilities submitted their epi weekly surveillance reports including 34 mobile medical clinics, 36 static clinics and 3 hospitals from 13 health agencies serving internally displaced persons in Ninewa. A total of 44 099 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 (75%), acute diarrhea (18%) and suspected scabies (3%) were the leading causes of morbidity in the governorate (refer to graph 1 for details for acute diarrhea and scabies.

Graph 1: Distribution of acute diarrhoea, and suspected Scabies cases by week in Ninewa governorate, week 36, 2016 to week 23, 2017



- During epi week 23, Ninewa Governorate recorded a decrease in the number of Acute Diarrhoea cases for two contentious weeks from 6444 cases in week 22 to 4937 cases in week 23. The majority of cases were reported from the health sub districts of Aymen (34%), Gayara (27%), Al-Hamdaniya (16%), Al-Shikhan and Makhmur (6%), Telefar and Ayser (4%). Other health sub districts that reported cases include: Tilkaif Bardarash and Hatra each at 1%.
- One alert of food-borne illness was generated from Hassan sham U2 through EWARN. This was
  investigated by the Erbil, Ninewa DOHs and WHO within 15 hours from the onset of outbreak. A total of
  386 cases were admitted with severe and moderate dehydration with no reports of death. Vomits and food
  samples were collected and sent to Central Public Health Laboratory (CPHL) in Erbil.
- Public Limited access of populations to health services in newly liberated areas and inside west Mosul city due to
  - health the volatile security situation.concernsLimited movement of partners to newly accessible areas due to security challenges which makes it hard to
    - Entitled movement of partners to newly accessible areas due to security channenges 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 and a potential risk
      - Shortage of safe water for populations trapped inside western Mosul remains a concern and a potential risk for outbreaks of water borne diseases such as acute watery diarrhea. As the cholera season is approaching, preparedness measures by the MOH, WHO, health and Water Sanitation and Hygiene partners have stepped up.

Health	Provision of primary health care services to the affected population in newly accessible areas.	
needs,	Provision of primary health care services in newly established camps.	
priorities	Management of trauma cases which are steadily increasing as the operations intensify.	
and gaps	Provision of sufficient quantities of controlled substances needed for pain management and sedation of	of
	patients with severe trauma injuries.	
	Strengthening the existing capacity for post-operative care.	

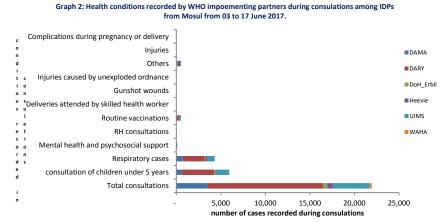
Sublightening the chisting expansion post operative care.

**WHO** On 13 June 2017, WHO in coordination with Erbil and Response Ninewa Directorates of Health (DOH), rapidly responded to suspected food borne illness outbreak in Hassan Sham U2 camp by conducting an investigation with the aim to identify the source and cause of the outbreak, treat those ill as well as contain and prevent any spread. This followed a notification received by the DOH Erbil of suspected food borne disease in Hassan Sham U2 IDP camp, West of Erbil. Eight hundred and twenty five (825) cases have been reported, of these, 638 were referred to various health facilities; 386 cases were admitted to hospitals in Erbil and no death was reported. Ninety-four ambulances were mobilized and dispatched to the camp to support the transfer of cases to various hospitals where they could receive prompt emergency care and supportive treatment, IV fluids, oral rehydration salts (ORS) and cannulas were dispatched



to the health facilities to urgently respond to the needs. Food and stool samples were sent to Central Public Health Laboratory in Erbil and Health partners: DAMA (WHO's implementing partner), ADRA, IMC, IOM, MSF and Barazani Charity Foundation (BCF) effectively identified and managed the cases.

- To support the response to any future cholera outbreaks in the Governorate of Ninewa including camps and host communities, WHO delivered 500 rapid diagnostic test kits (RDT) to Ninewa DoH (300) and primary health care facilities in Qayyarah, Hammam al'Alil and Salamiyah (200). The kits will be distributed to east and west Mosul and will be used to carry out rapid tests to detect positive cases of cholera, however further laboratory confirmatory tests will always be required.
- A total of 3000 information, education and communication (IEC) materials on scabies were delivered to WHO's implementing partner DARY and the camp management team in Hammam al' Alil camp to support community education and sensitization.
- To strengthen service delivery for IDPs and ensure continued service provision in Al Salamiya camp and Dahuk, WHO donated to health partners emergency medical supplies sufficient for more than 20 500 persons. These included essential medicines and Interagency Emergency Health Kit (IEHK) donated to Premiere Urgence-Aide Medicale Intenational (PU-AMI) and trauma and surgical kits donated to support trauma patients in hospital in Dahuk; these will be used to serve IDPs in Alsalamiya camp and trauma patients evacuated to Dahuk respectively.
- Since January until 17 June 2017, more than 847 257\*\*\*\* consultations have been recorded from health all facilities serving internally displaced persons in Mosul and other surrounding governorates; more than 21940 of the consultations were recorded total between 11 and 17 June alone through WHO supported MMCs and static primary health facilities, of which 5943 (27%) were children under the age of 5 years. The facilities and MMCs are managed implementing partners in Ninewa, Dahuk and Erbil. Twenty



percent of all these consultations were due to upper respiratory tract infections. A total of 90 complicated cases including injuries and pregnancy or delivery related complications were referred to specialized

health facilities through ambulances donated by WHO to the Erbil Directorate of Health (DOH). Partners that submitted reports this week include: DAMA, DARY, Heevie, UIMS and Women and Health Alliance (WAHA).

- More than 730 consultations including 155 children less than 5 years of age were recorded in 2 WHO supported PHCCs of Dibaga and Harsham in Erbil Governorate. In Harsham, respiratory tract infection was the most commonly reported disease with 22% followed by acute diarrhea with 19%, refer to table on the breakdown of consultations.
- Through WHO support, 1352 consultations including 204 children under 5 years of age were recorded through the mobile medical teams (MMTs) in Zumar sub district and Telkyef district run by WHO's implementing partner Heevie. More than 10 700 consultations including 1953 children less than 5 years were reached with consultation services since late 2016 to 17 June 2017.
- With the support of the Organization and direct management and supervision from the Directorate of Health of 12 Medical doctors working in Duhok Emergency and Azadi general hospitals, 2550 patients were treated this week, bringing the total number of patients treated since the start of the project late 2016 to 44 236 patients.
- Partnership and coordination
   A health cluster coordination meeting was held this reporting period in Baghdad and attended by 30 health cluster partners. The food-borne illness reported in Hassan sham U2 camp along with the response of health partners in coordination with Erbil and Ninewa DOHs was extensively discussed. Partners including International Medical Corps (IMC), ADRA, International Organization for Migration (IOM), Médecins Sans Frontières and Barazani Charity Foundation and Doctors Aid Medical Activities (DAMA) were acknowledged for their swift response to the incident.
  - In Qayara, Hammam al' Alil and Salamiya coordination meetings were organized and conducted with all 10 health cluster partners working in three camps to discuss health operations inside the camps. Key action points included: assigning a focal point to assist manage the ambulance control center in Qayara airstrip camp and provide feedback to partners on referred cases, provide additional ambulances to cover the gap in Haj Ali and Jadaa



camps and put in place measures to control insects inside the camps. Others points included were, sharing of contact information for medical waste management focal points for by Ninewa DOH and provision of yellow bags and safety boxes for collection of medical waste at all the PHCs inside the camps.

- Following the incident of food-borne illness in Hassan sham U2, the health cluster has commenced its coordination with the Ministry of Health (MOH), the Water Hygiene and Sanitation (WASH) sector and the camp coordination, camp management (CCCM) clusters to produce and disseminate awareness material on the safe food handling and storage based on existing MoH guidelines in order to minimize further incidents of food poisoning.
- The cluster continues to collect data from partners on ambulance support by mapping out various locations of ambulances. This will assist in identifying gaps and areas where ambulatory services are less required or areas with more ambulances than required to ensure equity.
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Plan for the

coming week

• Evaluate immunization activities Iraq wide to inform decision and plans for the upcoming world immunization week.

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