



1.5 MILLION*
PEOPLE AFFECTED



787 381**
DISPLACED FROM MOSUL



2.7 MILLION***
PEOPLE IN NEED OF HEALTH SERVICES

801 764 ****
PEOPLE REACHED



13 039
INJURED

Highlights

- A new primary health care centre (PHCC) constructed and equipped by WHO in Al-Sallameya 1 internally displaced persons (IDP) camp has commenced operations to serve primary health care needs of a new wave of IDP fleeing from west Mosul.
- WHO, in collaboration with Ninewa DOH, has identified and entered into a contractual agreement with three health implementing partners namely: Doctors Aid Medical Activities (DAMA), Help The Needy (HTN) and United Iraqi Medical Society (UIMS) to deliver health services for IDPs in Qayara, Khazir and Hasan Sham camps that lack static health facilities.



Photo ©: WHO/P.Ajello
 A fully furnished laboratory at Al - Salamiya primary health care centre constructed by WHO for new IDPs from west Mosul

- To respond to the increasing needs of IDPs fleeing from west Mosul, WHO donated emergency medical supplies sufficient to serve the health needs of 104 900 people including trauma and surgical kits, essential medicines used for the treatment of infectious diseases, chronic conditions, skin diseases and medical consumables.
- Since January 2017 until 27 May, more than 801 700 consultations have been recorded from health facilities serving internally displaced persons fleeing the ongoing crisis in Mosul; of these, more than 22 200 consultations were conducted through WHO supported MMCs and static primary health facilities managed by seven implementing partners including 6223 (28%) children under the age of 5 years.

Situation Update

- More displacements continue from the western part of Mosul city. In this reporting period, more than 30000 additional people are reported to have fled from west Mosul as the security forces continue to push into three neighborhoods of the old city. WHO and health partners are strengthening health delivery of primary health care services in transite sites and mustering points and the delivery of trauma care at stabilization points and hospitals. In the last two weeks, 3 health service points have been established in 4 transit and mustering points of Oberoi Ninewa Hotel, 9th Division and Albu Sayf.
- According to Iraq Ministry of Displacement and Migration (MODM), 787 381 people have been displaced from Mosul since the start of the crisis in Mosul on 17 October 2016, and 611 231 of these have been displaced from west Mosul since 19 February 2017, some of these have however returned to their home. Currently, an estimated 609 898 persons remain displaced from Mosul, 40 913 of these are from east Mosul while more than 568 985 are displaced from west Mosul; however as government security forces push further to overtake the old city, the figure continues to sharply increase . Fifty three percent of all IDPs are currently living in IDP camps in Ninewa and neighboring governorates of Erbil and Dahuk, more than 135 200 and 42 246 have since returned home in east and west Mosul respectively.
- A total of 240 additional trauma patients have been recorded in trauma stabilization points (TSPs) in west Mosul since 27 May 2017, bringing the number of injured patients treated by three of WHO's implementing partners and other actors in west Mosul to 2997 cases. Fifteen percent of the cases were

* 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 1 June 2017

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

****Number of consultations since 17 October 2016 until 03 June 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.

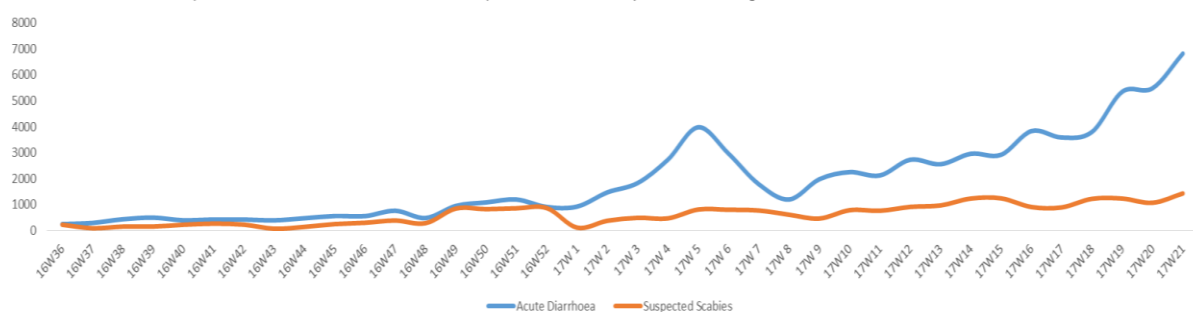
women while 17% were children less than 15 years of age. Cumulatively 6948 trauma patients have been treated in all TSPs in Mosul including east and west Mosul since 17 October 2016. Of these 24% were women and 23% children less than 15 years of age.

- More than 530 trauma cases were referred and treated in five hospitals including Athba and Bartalla Field Hospitals, Emergency, West Emergency and Shikhan hospitals between 20 May and 28 May 2017. This brings the cumulative number of trauma patients from west Mosul treated in 5 hospitals since 18 February to more than 6 906 with 31% civilians, 27% children under the age of 15 years and 31% female). To date, more than 13 000 patients (more than 73% civilians; 26% under the age of 15 years and 28% 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 21 ending 28 May 2017, a total of 81 health facilities submitted their epi weekly surveillance reports including 36 mobile medical clinics, 42 static clinics and 3 hospitals from 13 health agencies serving internally displaced persons in Ninewa. A total of 69 855 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 (58%), acute diarrhea (25%) and suspected scabies (5%) 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 21, 2017



- In epi week 21, Ninewa Governorate recorded a remarkable increase from 5487 cases in week 20 to 6860 cases in week 21. The majority of cases were reported from the health sub districts of Aymen (31%), Gayara (32%), Al-Hamdaniya (14%), Makhmur (7%) Al-Shikhan and Ayser (4%) Other health sub districts that reported cases are Hatra (3%), Telafar and Tilkaif (2%) and Bardarash 1%.
- One alert of suspected pertussis was generated from Scorpion Junction check point through the EWARN. The case was investigated by the Ninewa Directorate of Health with 72 hours, and found to be false.

Public health concerns

- 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 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 their efforts.

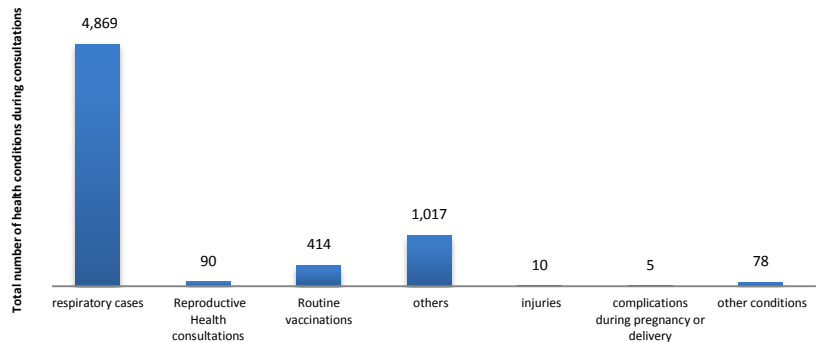
Health needs, priorities and gaps

- 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 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.

- A new primary health care centre (PHCC) constructed and equipped by WHO in Al Sallameya 1 internally displaced persons (IDP) camp has commenced operations to serve the new wave of internally displaced persons fleeing from west Mosul. The health facility will offer comprehensive PHC services including consultations, vaccination, laboratory, pharmacy, referral, emergency supported by WHO and reproductive health services supported by United Nations Population Funds (UNFPA). WHO is also supporting the health facility with basic essential medicines and has provided a standby ambulance to facilitate a swift referral of patients requiring emergency medical and delivery services that are not available at the health facility.
- WHO, in collaboration with Ninewa, DOH has identified three health implementing partners and entered into a contractual agreement with each one of them, they include: Doctors Aid Medical Activities (DAMA), Help the Needy (HTN) and United Iraqi Medical Society (UIMS) to deliver health services for IDPs in Qayara, Khazir and Hasan Sham camps with no static health facilities. The services will be delivered through 12 Mobile Medical Clinics (MMCs) that will also serve host communities located in Nimrud sub-district and Scorpion Junction check point where hundreds of families displaced west Mosul transit before they can settle in IDP camps.
- To respond to the increasing needs of IDPs fleeing from west Mosul, WHO donated to Ninewa Directorate of Health (DOH), NGO partners Medair, Hamam al’ Alil, New York City Medics and International Medical Corps serving IDPs from Mosul, a wide range of emergency medical supplies sufficient to serve the health needs of 104 900 people. The supplies include trauma and surgical kits, essential medicines used for the treatment of infectious diseases, chronic conditions, skin diseases including scabies and medical consumables.

- Since January 2017, more than 801 700 consultations have been recorded in health facilities serving internally displaced persons from Mosul. Of this, more than 22 200 consultations were recorded in WHO supported MMCs and static primary health facilities. The facilities and MMCs are managed by seven implementing partners in Ninewa, Dahuk and Erbil, 6223 (28%) of consultations recorded in WHO supported health facilities were children under the age of 5 years. Twenty two percent of all these consultations were due to upper respiratory tract infections. More than 1100 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). Partners that submitted reports this week include: DAMA, DARY, Heevie, UIMS and Women and Health Alliance.

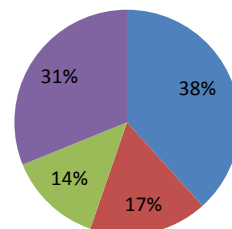
Graph 2: Breakdown of health conditions recorded during consultations in 6 primary health facilities and Mobile Medical Clinics supported by WHO in Ninewa Governorate from 28 May to 03 June 2017



- In Erbil, more than 1900 consultations including 520 children less than 5 years of age were recorded in 4 WHO supported PHCCs of Chamakor, Dibaga 2, Baharka and Harsham in Erbil Governorate. Gastroenteritis was the commonly reported disease this reporting period with 26% of all patients’ consultations, followed by Acute respiratory infection, refer to table on the breakdown of consultations International (WAHA).

Total consultation in 4 PHCCs in Erbil from 25 to 31 May 2016

■ Dibaga 2 ■ Bahirka ■ Harsham ■ Chamakor



- As more IDPs continue to flee from west Mosul, some continue to flee to Dahuk Governorate and its neighborhoods. As such, WHO, Ninewa, Dahuk and Erbil DOHs and its implementing partners continue to ensure continued health service provision for all the new arrivals and those living in the IDP camps. Through Heevie, WHO's implementing partner and Dahuk DOH, 1108 consultations including 171 children less than 5 years were recorded by mobile medical teams (MMTs) in Zumar sub district and Telkyef district while through Dahuk DOH, more than 8100 consultations including 1761 children less than 5 years were reached with consultation services since 1 November 2016 to 03 June, 2017.
- Through WHO support and direct management and supervision from the Directorate of Health of 12 Medical doctors working in Duhok Emergency and Azadi general hospitals, more than 2231 patients were treated this week. As at 03 June 2017, more 39 220 patients have benefited from this support.
- WHO continues to support the Directorate of Environment to conduct water quality monitoring. During this period 16 water samples were collected from 2 IDP camps and tested them for bacteria. Additional 4 samples were tested for chemical analysis.
- A joint mission was conducted by WHO and Ninewa DOH to Al Sallameya PHCC managed by WHO's implementing partner UIMS to assess and monitor health services provision for more than 6300 IDPs in Al Sallameya 1 IDP camp. Findings show a need of tablet devices for the EWARN reporting, monthly cards for non-communicable disease patients that will facilitate their routine drug refills, an Ice line for the vaccination unit to maintain the cold chain of vaccines for routine activities and an additional central shade and smaller ones fitted in each of the 5 caravans to protect patients exposed to soaring temperatures while waiting for services.



Partnership and coordination

- The health cluster, trauma working group and Ninewa DOH have identified 4 partners to provide emergency health services in three muster/screening sites for IDPs fleeing the operations in west Mosul among them Pharmacist Ninewa Medical Organization (PHNMO), Iraq Federal Police and Ninewa DOH. Qatar Red Crescent Society is on standby with a MMC in case additional assistance is required.
- The health cluster facilitated the nutrition working group meeting held on 29th May 2017 with the technical assistance WHO, nutrition indicators were reviewed and adapted to the weekly reporting mechanism in place through "Activity Info" with the aim of improving reporting mechanisms among partners. In addition, the first draft nutrition 4W (who is doing what where and when) map was produced and disseminated to partners for comments.

Plan for the coming week

- Through 12 Mobile Medical Clinics (MMCs) to be managed by implementing partners Doctors Aid Medical Activities (DAMA), HTN and United Iraqi Medical Society (UIMS) health services will be delivered to IDPs in Qayara, Khazir and Hasan Sham camps that have no static health facilities and host communities in Nimrud sub-district and Scorpion check point.
- Preposition emergency medical supplies to areas of need and conduct supervision visits to health facilities and MMCs serving IDPs.

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