WHO establishes rapid response teams to safeguard the health of newly displaced people in Mosul, Iraq

6 November 2016 – In light of increasing risks of disease epidemics and life-threatening health conditions among displaced populations from Mosul, WHO has established 82 rapid response teams to provide life-saving health services and respond to public health threats. A total of 11 response teams for outbreaks detection and epidemics control, 39 response teams for the management of exposure to chemical agents and 32 vaccination teams are currently positioned in Ninewa, Kirkuk, Baghdad, Dahuk and Erbil governorates. Trained and supported by WHO, these teams will be deployed by directorates of health to screening sites, camps, and other areas hosting internally displaced persons (IDPs).

Children living in Mosul have reportedly been unimmunized since June 2014, when humanitarian access into the city was last possible. Vaccination teams at screening sites and camps are ensuring that all newly displaced children are immunized against measles, polio, and other vaccine-preventable diseases. As of 2 November, more than displaced 9500 children have been immunized against polio and measles as part of vaccination activities supported by WHO, UNICEF, and national health authorities.
As the numbers of displaced persons from Mosul continue to increase, water and sanitation services in camps may face disruptions, increasing the risk of waterborne diseases, such as acute watery diarrhoea and cholera. Foodborne and vector-borne diseases also pose a risk. National surveillance officers trained by WHO are part of multi-disciplinary rapid response teams for epidemics that will ensure early detection of epidemic-prone diseases and a coordinated response to disease outbreaks.

To treat civilians who may be exposed to chemical agents, WHO has trained 90 medical staff on mass casualty management and decontamination of patients. WHO has also provided 240 sets of personal protective equipment (PPE) to directorates of health in areas where referral hospitals have been identified. Trained and fully equipped health staff are now on standby in Ninewa, Kirkuk, Dahuk and Erbil governorates to manage such events.

The establishing of these response teams was made possible with support to WHO from the European Union (ECHO) and the Office of U.S. Foreign Disaster Assistance (OFDA). However, additional funding is urgently needed. As part of the Mosul Flash appeal for preparedness, US$ 35 million has been requested by the health cluster. To date, these requirements are only 40% funded.

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