



IRAQ HUMANITARIAN EMERGENCY



WHO supported PHCC in Salamiya area_Ninewa Governorate. WHO Photo, January 2018

 10.3 MILLION IN NEED (HEALTH)	 2,470,974 M DISPLACED INTERNALLY	 3,346,704 MILLION RETURNS	6.2 MILLION TARGETED	 23000* INJURED
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WHO

TOTAL POPULATION REACHED WITH WHO MEDICINES AND KITS **3,967 MILLION**

ESTIMATED BENEFICIARIES FOR KITS DELIVERED TO HEALTHFACILITIES/PARTNERS**

	72000 INTERAGENCY EMERGENCY HEALTH KITS
	1000 SURGICAL KITS
	1000 TRAUMA KITS A+B


WHO FUNDING US\$ *****

	24 % FUNDED
	59 M REQUESTED


HEALTH SECTOR

33	HEALTH SECTOR PARTNERS
6.2 M	TARGETED POPULATION

HEALTH FACILITIES DAMAGED/DESTROYED

	6 TOTAL NUMBER FULLY DAMAGED ***
	23 TOTAL NUMBER PARTIALLY DAMAGED


HEALTH ACTION

	151 429 CONSULTATIONS†****
	1862 REFERRALS†


VACCINATION AGAINST

	3468 POLIO†****†
	1451 MEASLES†

EARLY WARNING ALERT AND RESPONSE NETWORK

	192 REPORTING SITES
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HEALTH CUSTER FUNDING US\$ (HRP 2017)*****

	10% % FUNDED
	US\$ 110 M REQUESTED

HIGHLIGHTS

- Sporadic human influenza cases were reported from all over the country this season with confirmation of Avian influenza A(H5N8) among the poultry in Baghdad, Diyala, and Babil governorates. No any human case of avian influenza was recoded in Iraq as of 31 Jan 2018. WHO is monitoring the situation and is following with the Iraqi Ministry of Health and partners.
- WHO Presented the results of the e-CAP survey conducted in two phases in different predefined crisis affected sites in Iraq in 2017 to assess the updates of community health needs.
- Construction and furnishing of the two WHO supported Ambulance Centres in Badria and Sehela areas in Dohuk have been completed on 11 Jan 2018. The two centres will support the referral services in IDP and refugee camps in the governorate.
- In January 2018, WHO support of medicines and medical necessities covered the four WHO field hospitals of Athba, Hamam Alil, Al-Qaim and Haj Ali in addition to Sinoni Hospital in Ninewa. Medications delivered included antibiotics, chronic and skin diseases drugs, in addition to analgesics and palliative care treatment medicines. The support is estimated to be enough for approximately 500,000 patients.
- WHO supported Al Anbar DOH with a consignment of 139 wheelchairs distributed through WHO local implementing partner DARY to in-need persons in the IDP camps of Central Bzebiz, Amriate Al-Fallujah, Al-Khaldia central camp, and Khaldiat Al-Samood camp. The wheelchairs consignment was funded from the Korean grant.

* Total hospital based injured patients since 19 October
 ** coverage for one month
 *** Hospitals in Salahadeen (04) and Ninewa (03), 23 partially damaged in Ninewa
 +****+Total number of routine vaccination against polio and measles in 8 governorates of Ninewa, Dahuk, and Erbil from June to 30 September 2017
 ***** Financial Tracking System, Iraq

- For the first time since the beginning of the Iraq crisis in early 2014, the number of people returning to their area of origin has surpassed the number of people displaced in the country. As of 31 January 2018, the IOM DTM has identified and confirmed the location of a total of 3,346,704 returnees and 2,470,974 internally displaced persons across Iraq since after January 2014.
- KRG Health Minister Dr. Rekawt Hama Rashid visited Baghdad and met with Iraqi Health Minister Dr Adila Hamud. The visit was prized with 11 trucks of medicine that have now arrived in the Kurdistan Region. The Iraqi government will send the KRG medicine and other medical necessities worth 170 billion Iraqi dinars in 2018, according to local media sources.

- Sporadic human influenza cases were reported from all over the country this season with confirmation of avian influenza A(H5N8) among the poultry in Baghdad, Diyala, and Babil governorates. As of 21 January 2018, 52 confirmed cases of human influenza were reported: four in Resafa and four in Karkh sectors of Baghdad, six in Wassit, one in Karbala, ten in Babil, four in Najaf, one in Kirkuk, 18 in Salah Addin, and four in Ninewa governorates respectively. Among these cases, eight deaths were reported, of which seven were from Salah Addin and one from Karkh Sector of Baghdad. No human case of avian influenza was recoded in Iraq as of 31 Jan 2018. WHO is monitoring the situation and following up on with the MOH and Food and Agriculture Organization (FAO) in Iraq.
- In Suleimaniya governorate, active surveillance visits were paid to eight health facilities of four hospitals and four PHCCs. In addition, four other PHCCs were visited to raise awareness among medical staff on AFP surveillance and monitor data of communicable diseases and routine immunization activities. Six other visits were also paid to CDC and EPI units in Suleimaniya DOH to follow up on reported AFP cases, vaccination updates, and administrative issues.
- The primary health care centre in Arbat IDP Camp reported over 1108 consultations during the first three weeks of 2018; of these consultations, 748 were for acute conditions, 221 nursing care, 127 chronic diseases, and 22 mental health cases. Twenty percent of total consultations was for children under five years, as shown in the below charts:

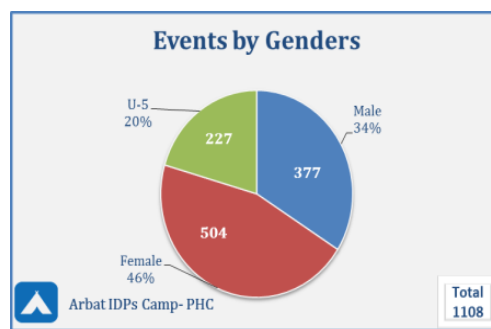
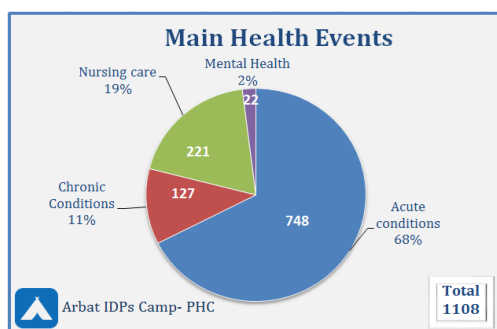


Figure 1: Consultations delivered by the PHCC in Arbat IDP Camp in Suleimaniya

- Thirty Tamuz PHCC in Ninawa governorate reported on 21 January 2018 the number and type of consultations made during the first three weeks of 2018 and which included 61 cases of acute upper respiratory infection (AURI), 57 acute lower respiratory infection (ALRI), 30 cases of Genito/urinary infection, 6 cases of musculoskeletal diseases, and 5 cases of gastro-intestinal diseases (worms, PUD, helminthiasis, etc.).
- As of 15 January, Al Basma WHO supported PHCC in Ninawa Governorate reported 910 cases of AUR infection, 116 cases of Genito/urinary infection, 106 cases of acute diarrhoea, 42 cases of gastro-intestinal diseases (worms, PUD, helminthiasis, etc.), and 42 cases of dermatological diseases (eczema, dermatitis, etc.)
- WHO supported Mobile Medical Clinics (MMCs) continue to provide primary health care services in various response locations. In Garmian Area in Suleimaniya, the clinics delivered 510 consultations as of 21 January this year. The consultations made covered the host community alongside the displaced population who came from Kirkuk & Tuz Khormato districts in Salah Aldin governorate.

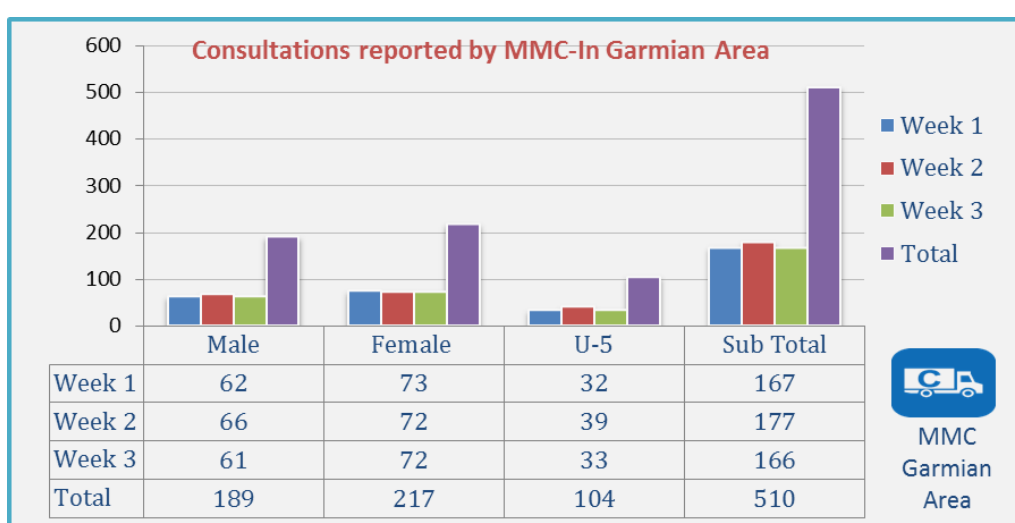


Figure 3: WHO supported MMCs run by Garmian DOH in Suleimaniya Governorate

- In January 2018, 15 WHO supported mobile medical teams carried out disease surveillance activities & cholera watch visits to Sulaimaniyah city centre and surrounding neighbourhoods. Zero Cholera reporting is confirmed as of end of the month.

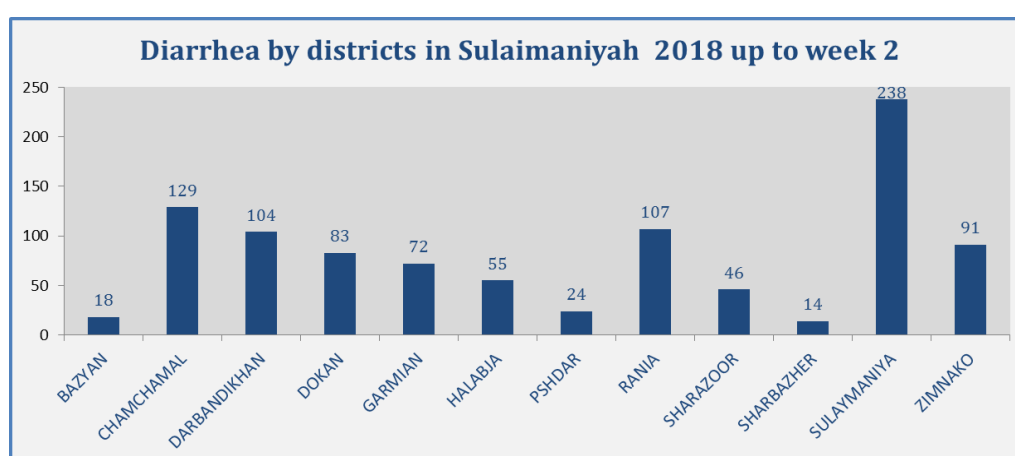


Figure 2: WHO supported mobile teams in Suleimaniya Governorate performing disease surveillance and cholera monitoring visits.

Public health concerns

- Limited access to health services by the population in return areas in Ninawa and Salah Aldin due to shortage of health personnel and damaged of secondary and tertiary health facilities.
- Limited number of ambulances available in Tikrit, capitol of Salah Aldin governorate, to serve the high demand of patients requiring referrals from IDP camps here.
- Safe water remains a major concern for the populations living in the city of west Mosul.

Health needs, priorities and gaps

- Provision of primary health care services to the affected population, returnees, and host communities in newly accessible areas.
- Limited response to medical emergency cases in the newly re-taken areas in Ninawa and Salah Aldin governorates.

WHO action

- In January 2018, WHO support of medicines and medical necessities covered six implementing partners namely: DAMA, Intersors, Dary, UMIS, PU-AMI and RI in addition to directorates of health of Kirkuk and Ninawa. The support also covered the four WHO field hospitals of Athba, Hamam Alil, Al-Qaim and Haj Ali in addition to Sinoni Hospital in Ninawa. Medications delivered included antibiotics, chronic and skin diseases drugs in addition to analgesics and palliative care treatment medicines. The support is estimated to be enough for approximately 500,000 patients.
- WHO Presented the results of the e-CAP survey conducted in two phases in different predefined crisis affected sites in Iraq in 2017 to assess the updates of community health needs. The first baseline surveys phase was conducted in eight sites in May 2017 interviewing about 8150 households representing 28400 individuals of which 51% were males. The main age of participants was 25 to 45 years. The second follow up surveys phase was conducted in December 2017 following same protocol in the same predefined areas replacing Shirqat in Salah Aldin with Basrah IDP camps due to security reasons. The second phase covered about 11,450 households representing 40,763 individuals of the age 25 years, of which 52% were males. Security issues were the main challenges encountered during the surveys implementation. Further follow up surveys including more affected sites in affected areas will be implemented in 2018 to assess and update the community health needs.
- On 9 Jan, WHO co-chaired the first Health and Nutrition Cluster meeting in 2018 with Sulaimaniyah DOH in Suleimaniya Governorate. The meeting focused on presenting the annual planning review and orienting the newly designated Director General for Health Directorate in the governorate.
- In Suleimaniya, moreover, WHO supported water quality monitoring teams collected and tested 764 water samples. In addition to testing the chlorine level, 284 samples undergone bacteriological test, 220 chemical analysis, and 260 vibrio cholera (VC culture). Result of all samples tested for vibrio cholera was negative.
- WHO and Duhok Directorate of Preventive Health coordinated field monitoring activities for active communicable diseases surveillance among the newly displaced persons in screening sites and new IDP camps in outreach areas and districts in Dahuk Governorate.



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- WHO also coordinated with Duhok CDC Unit a series of Cholera, Mumps, Scabies and Leishmaniosis surveillance visits in camps and host community health facilities in the governorate.
 - Based on the availability of funds, WHO contribution to 2018 stabilization plan for Al-Anbar Governorate includes supporting the referral services with nine additional ambulances, supporting the primary health care services in the recently re-taken districts with establishing one primary health clinic in each of the four districts of Ana, Rawa, Qaim and Al-Obaidy, supporting the secondary health care services with medical equipment worth of about one million dollars for the two suggested hospitals of Ana and Al-Obaidy, and supporting the emergency units with two operation theatres, two ICU beds, one 20-bed ward in each of the two suggested hospitals, and providing a mobile X-ray unit.
 - WHO held a meeting with Kirkuk DOH officials to review the level of support provided to the governorate in 2017 and discuss the main areas that required intervention and support in 2018. Challenges like the shortage of medications, activation of health facilities in Hawija district, needs for funds to rehabilitate Hawija Hospital and the partially damaged PHCCs etc. were thoroughly discussed.
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Partnership and coordination

- Two sub-national cluster meetings were conducted in January 2018 in Kirkuk and Ninawa governorates on 11 and 15 of the month respectively. In addition, three more cluster meetings were held in Erbil on the 24th, Dohuk on the 31st, and a national cluster meeting in Baghdad on 31 January as well.
 - The first Ninawa ICCG was conducted by OCHA on 17 January, where strategic, security, and operational issues were discussed. During this meeting, the Health Cluster dispelled the misinformation regarding the influenza cases in Salah al-Din and Ninawa as being seasonal H1N1 flu, i.e., human-to-human transmission. The issue of the avian influenza was also mentioned by both Health and Food Security clusters (in Baghdad, Diyala and Babel), with no transmission to humans as of 31 January.
 - The Health Cluster has also contacted Communication with Communities (CwC) meeting with IOM to print WHO IEC posters on influenza prevention and management (10,000 in Arabic and 5,000 in Kurdish). This is in addition to the quantity printed by WHO.
 - On the other hand, the narrative for the HRP 2018 has been finalized by the Cluster with the support of OCHA by the 21st of January 2018.
 - The Cluster Coordination Performance Monitoring (CCPM) exercise for 2017 has been underway. Analysis is currently in process and the results are expected to be out shortly.
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