

IRAQ HUMANITARIAN EMERGENCY




	10.3 MILLION IN NEED (HEALTH)		3.06 MILLION DISPLACED INTERNALLY		0.2 MILLION REFUGEES		6.2 MILLION TARGETED		23000* INJURED
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WHO

TOTAL POPULATION REACHED WITH WHO MEDICINES AND KITS **109 949**

ESTIMATED BENEFICIARIES FOR KITS DELIVERED TO HEALTH FACILITIES/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

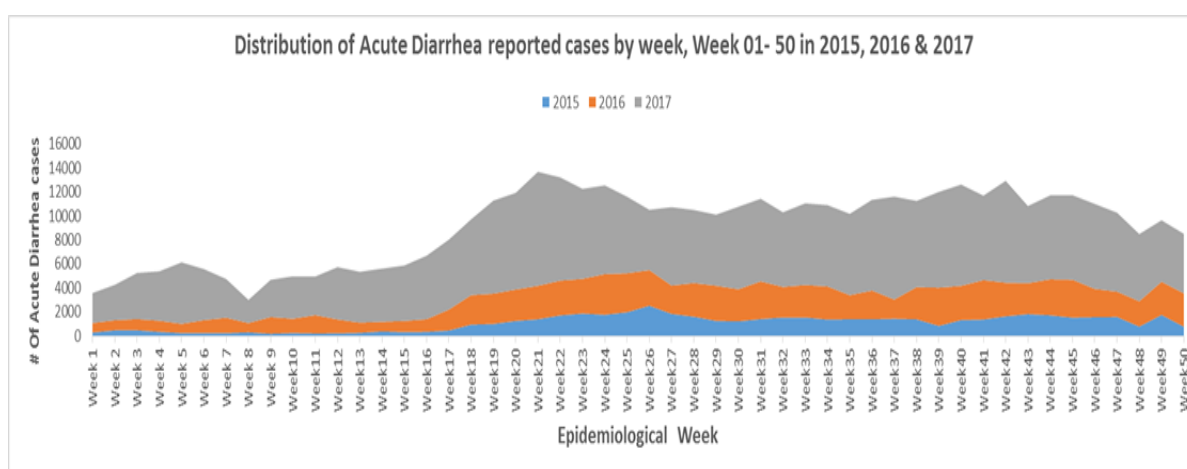
- European Union Humanitarian Aid (ECHO) releases an additional 7 million Euros to support the continuity of emergency trauma and essential life-saving primary and secondary health care services for people affected by conflict in Iraq.
- The World Health Organization (WHO) airlifted trauma kits and medical supplies to support the treatment of over 550 injured by the earthquake in Iran-Iraq border region. The supplies, enough to provide surgical care for up to 4000 trauma patients, were delivered to hospitals and other health facilities.
- WHO conducted EWARN trainings for reporting sites in 11 Governorates north, central, and south the country.
- As of 30 November 2017, more than 250,000 consultations including more than 68,326 children less than 5 years were reported by WHO and its implementing partners in governorates hosting IDPs.
- Eight WHO supported mobile clinics were deployed to the newly accessed areas and the mustering and screening sites in Anbar Governorate.
- From mid-September to 15 November 2017, more than 10,000 people in Hawijja district have benefited from five WHO supported mobile medical teams. The support included 1563 children vaccinated against childhood immunizable diseases.

* 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

- On 12 November 2017, an earthquake in the magnitude of 7.3 on the Richter scale hit northeast Iraq according to United States Geological Survey (USGS). The epicenter of the earthquake was located 32kms from the city of Halabja where approximately 1,840,000 people live. Nine fatalities and over 550 injuries were reported as a result of the earthquake, according to the Kurdish Regional Government (KRG). The most earthquake related injuries were reported in districts of Darbandikhan, Halabja, and Garman. Many houses in the areas of Darbandikhan, Maidan, Qurato and Bamo have been damaged, and some have been severely destroyed.
- As of 30 November, the IOM Displacement Tracking Matrix (DTM) has identified a total of 2,883,738 persons (480,623 families) still being displaced after January 2014, dispersed across 97 districts and 3,707 locations in Iraq. For the same period, DTM has also identified 2,759,658 returnees (459,943 families).
- As of 29 November, a total of 2,759,658 persons have returned to their places of origin, including 211,200 returnees to Kirkuk according to IOM DTM. More returnees are expected to return to Hawija district in Kirkuk with the reconciliation agreement signed recently by district authorities, community, and religious leaders. Decontamination of unexploded ordnance (UXO) in return locations is considered a priority for the increased sustainable returns in the district, according to OCHA Humanitarian Bulletin for Iraq

Epi update

- From epidemiological (Epi) week 45 to week 48 (06 November to 03 December 2017), a total of 518,339 consultations were reported from health facilities covered by the EWARN system in Iraq indicating an average of 129,585 patients per week.
- Thirty Four percent (34%) of all the reported communicable disease cases were in children below five years of age out of which 20% were reported among males. Between 191 and 201 sites submitted their weekly Epi reports in November.
- The common disease incidence reported in Iraq was acute upper respiratory tract infection at 28% (144,984 cases) followed by acute diarrhea at 5% (26,246), acute lower respiratory infections at 2% (9,619 cases), scabies at 1% (5,772 cases).
- Twenty six alerts were generated during this period. The alerts were investigated and responded to within 72 hours by directorates of Health, WHO and health partners in the field. The reported cases were: 162 suspected cholera cases (161 suspected cases in Ninewa out of which 5 were verified as positive, and 1 suspected case in Dahuk which was verified as False); 4 suspected measles cases: (3 suspected cases in Sulaymaniyah and 1 suspected case in Anbar where all 4 suspected cases were verified as positive); and 6 suspected meningitis cases (1 suspected case in Sulaymaniyah and 1 in Anbar verified as False and 4 suspected cases in Ninewa pending verification).



Public health concerns

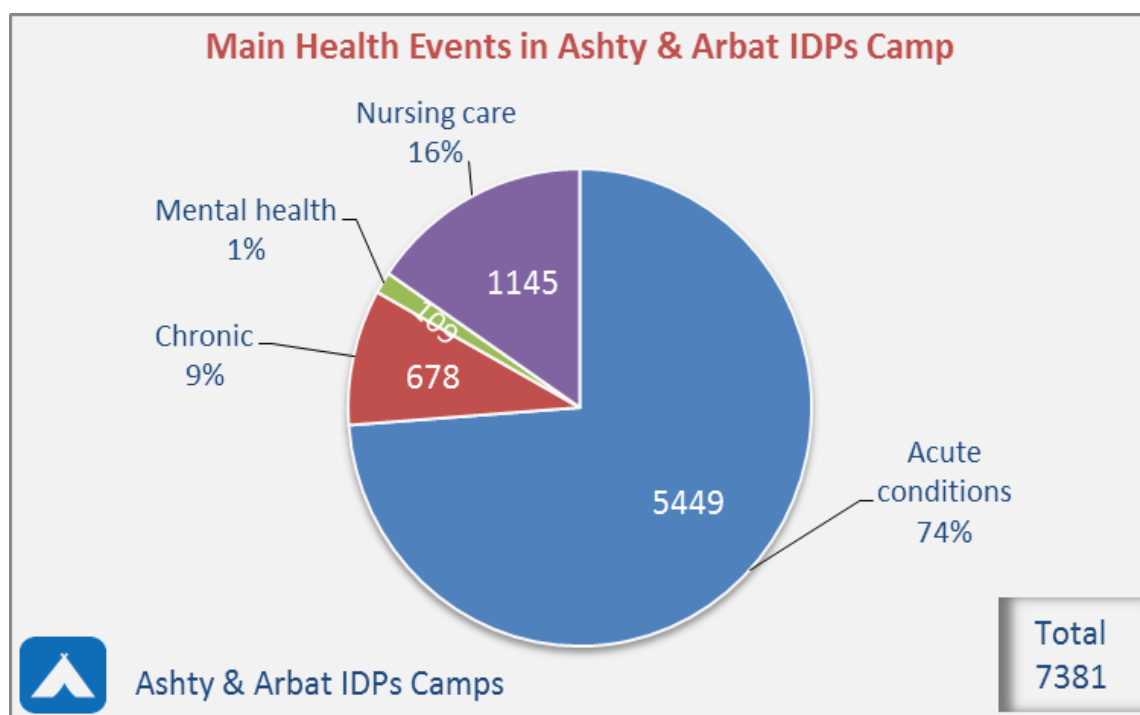
- Limited accesses to health services by the population in return areas of west Mosul where most health facilities got damaged and in Salahadeen due to shortage of health personnel and damaged secondary and tertiary health facilities.
- Limited number of ambulances available in Tikrit, capitol of Salah Aldin governorate, to serve the high demand of patients requiring referrals from IDP camps here.
- The limited accessibility of populations in areas of return in west Mosul, Hawija and other inaccessible areas of Kirkuk to routine immunization services, which threatens the gains made in sustaining a polio free country for the past 2 years. The low immunization coverage may also put children at great risk of vaccine preventable diseases.
- Safe water remains a major concern for the populations living in the city of west Mosul.

Health needs, priorities and gaps

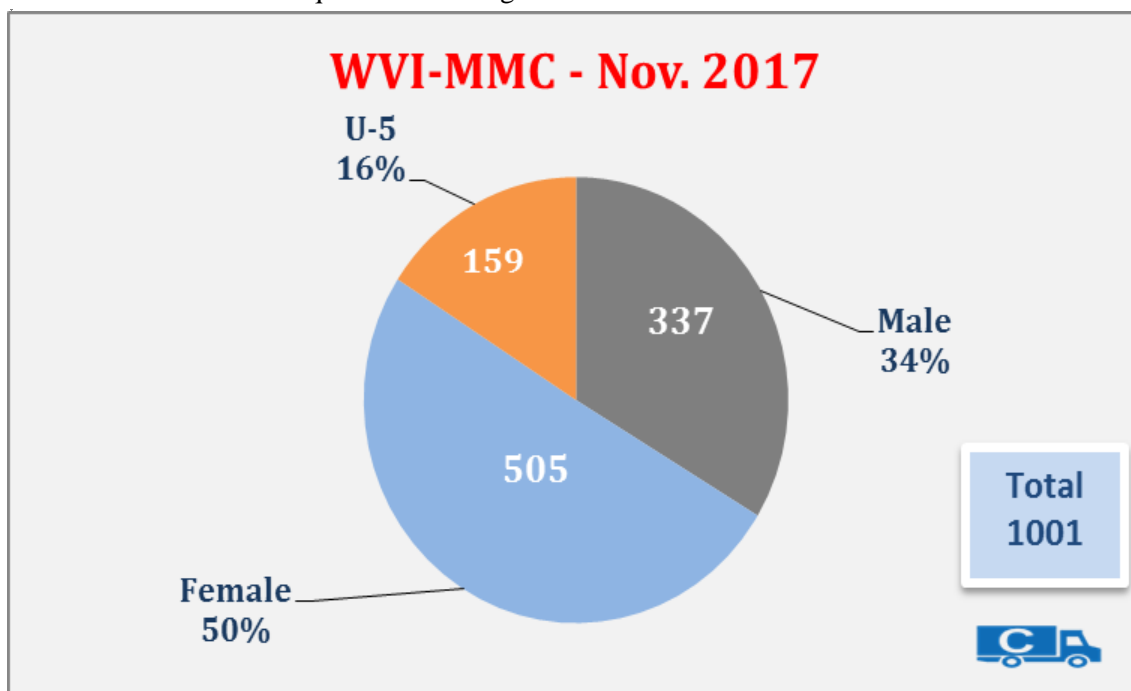
- Provision of primary health care services to the affected population and host communities in newly accessible areas and inaccessible areas.
- Limited response to medical emergency cases in the newly re-taken areas of Mosul.

WHO action

- WHO in coordination with the local health authorities inaugurated 30 Tammuz PHCC in west Mosul with complete support inclusive of the operational cost, furniture, staffing, and the provision of medicines and medical supplies and equipment. This PHCC is capacitated to serve more than 20,000 returnees to 30 Tammuz area in west Mosul with outpatient, laboratory and vaccination services.
- WHO supported Ninawa DOH staff and NGOs working in sentinel sites in the governorate with two EWARN training workshops organized during the period 26-29 Nov 2017.
- In Suleimaniya, WHO continued to support the primary health care delivery services to IDPs in the camps of Ashty & Arbat south east the governorate. WHO also supported Garmian DOH in the mentioned governorate with the provision of outreach primary health care services to the newly displaced people from Tuzkhormato utilizing WHO donated Mobile Clinic.



- In Suleimaniya moreover, WHO implementing partner World Vision International (WVI) continues utilizing the WHO donated mobile clinic to provide services to the non-camps IDPs in Chamchamal area as well as Derbandikhan district to compensate for the halt in health services in the aftermath of the earthquake that damaged the health facilities in the district.



(Above 2 charts illustrate the activities reported by Arbat, Ashty & Qorato PHCs in addition to Garmian DOH MMTs run by WVI.)

- In November 2017, DOHs supported by WHO in eight conflict affected governorates namely: Ninewa, Erbil, Kirkuk, Dahuk, Sulyaimania, Salahadeen, Baghdad and Anbar have reported more than 205,762 consultations including more than 68,326 children less than 5 years. The consultations were reported by partners: DAMA, DARY, Malester, Heevie, Medair, Emergency, UMIS, WAHA, HTN, WVI, and MSF-CH.
- In Anbar Governorate, WHO supported Anbar DOH with two trauma A and two trauma B kits allocated for the emergency units in Ana and Rutba hospitals in Ana and Rutba areas central and south the governorate respectively. Additional three trauma A, three trauma B and two surgical kits were further delivered to Haditha hospital in Haditha district north east the governorate.
- WHO has also supported the deployment of eight mobile medical clinics in the mustering/ screening sites and newly liberated areas run by the local implementing partners Dary and UMIS NGOs.
- In Anbar furthermore, WHO supported the establishment of a new comprehensive PHCC in the extension of Kilo 18 camp run by the local implementing partner Dary NGO. The PHCC will provide comprehensive essential services 24/7.
- WHO continues to support health partners and DOHs with medical supplies to ensure that all vulnerable people receive the required medications. During this period, WHO donated emergency medical supplies to 16 health partners and ten Directorates of Health, hospitals and primary health care centres and hospitals sufficient to treat 109,949 patients. The supplies which were delivered to primary health care facilities to support displaced persons and host communities included surgical supply kits, trauma A and B kits and in kind medicines like analgesics, anaesthetics, anti-allergic and anti-anaphylactic, dermatological medicines, cardiovascular medicines, endocrine and anti-diabetic, and others.

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- More than 19,690 children aged 0 to 29 months and children under one year were vaccinated against polio and measles through routine immunization rounds including 8672 children immunized against polio and 1457 immunized against measles in the crisis affected Governorates.
 - To coordinate the response to Cholera outbreak in the camps of Qayara, WHO conducted a meeting in the Airstrip camp in Qayara to coordinate among the health and WASH partners in the 8 camps in Qayara and to guide the health partners in these camps on how to respond in case a Cholera case reported in their health facilities. The meeting attended by all health partners working in Qayara camps in addition to the WASH partners, camps management and the DoH of Ninawa.
 - Services provided by implementing partners and PHCCs supported by WHO include: Mental health services, laboratory and investigations, medicines to treat various diseases, vaccination services, delivery services, reproductive health services and referrals among others.
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Partnership and coordination

- Five health coordination meetings were conducted in November at national and sub-national levels in Baghdad, Erbil, Kirkuk and Ninewah.
 - As part of developing the Humanitarian Response Plan for 2018, the Health Cluster conducted a workshop for all partners on 14 November, in which the objectives, activities, and indicators to be included, monitored, and reported against for 2018 were discussed and finalized.
 - Emergency Primary Health Care services were provided during the West Anbar Operation, particularly at the screening sites in Ana, Rawa and Al Qaim, as well as in camps.
 - Trauma partners remained on the ground to address needs as they arose. In Ninawa governorate, assessments are planned for the near future to identify the new needs, in order to address them.
 - During November, Cluster partners provided 646,745 medical consultations in ten governorates as well as 70,190 vaccinations to children under-five years of age. Additionally, women of child-bearing age received 19,572 consultations.
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