



# World Health Organization

**Situation Report No. 17**  
19 JANUARY – 01 FEBRUARY, 2015

## Iraq crisis



PHOTO: WHO©  
WHO STAFF LOADS ESSENTIAL MEDICAL SUPPLIES FOR TRANSPORTATION TO AN IDP CAMP IN DEBAGAH DISTRICT



**5.7MILLION**  
IN NEED OF HEALTH\*



**2.2MILLION**  
INTERNALLY DISPLACED



**4 MILLION**  
TARGETED WITH HEALTH  
ASSISTANCE\*



**5.6 MILLION**  
VACCINATED AGAINST POLIO\*\*

## TRANSPORTATION OF HEALTH TECHNOLOGIES



## HIGHLIGHTS

- ⇒ WHO and the Directorate of Health (DOH) conducted investigations of suspected cases of H1N1 in Missan and Kirkuk governorates. Two cases in Missan and one case in Kirkuk tested positive for Influenza A (H1N1) following laboratory confirmation.
- ⇒ WHO shipped and delivered a lifesaving antidote for 14 year old boy. This was in response to forensic investigations conducted by the Department of Forensics in Baghdad, which diagnosed the boy with “acute Thallium Poisoning”.
- ⇒ An assessment of Tuberculosis (TB) among IDPs was conducted in Heabeb Al Malih PHCC in AnKawa, to increase awareness on TB and follow up on the progress of referring presumptive TB patients.
- ⇒ WHO in collaboration with the Directorate of Environment conducted water sampling workshop for 20 participants in Dahuk & Zakho sub-districts.

## MEDICINES PROVIDED BY WHO



**1.5 MILLION PEOPLE** HAVE DIRECT ACCESS TO ESSENTIAL DRUGS AND MEDICAL EQUIPMENT PROCURED AND SUPPLIED BY WHO

## FUNDING US\$



**187 MILLION**  
**129 MILLION**

FUNDS REQUESTED  
FUNDING GAP

## VACCINATIONS



**5.6 MILLION**

CHILDREN UNDER FIVE VACCINATED DURING OCTOBER POLIO VACCINATION CAMPAIGN



**356,231\*\*\***

VACCINATED AGAINST MEASLES SINCE 6 APRIL TO 31 DECEMBER

**3.9MILLION\*\*\*\***

\* Figures cover the period from December January 2014 to December January 2015, (CRP)

\*\*Number of children vaccinated during the October National Polio Immunization campaigns

\*\*\* Number of IDP children vaccinated in Erbil, Dahuk, Sulymaniah and Kirkuk

\*\*\*\* Number of children vaccinated in 12 governorates during December mass measles campaign.

## Situation update

- A new influx of internally displaced people (IDP) were reported to have arrived Sulaymaniyah from Salahaddin Yathrib. Eight hundred (800) families who newly arrived Sulaymaniyah have been accommodated in Arbat IDP camp, of these 680 families have not yet received tents and are currently living in limited shared spaces with relatives. Overcrowding and limited water, hygiene and sanitation facilities have been recorded. The camp was originally designed to accommodate 1,000 families but to date it has 2,200 families (22,000 individuals).

## Humanitarian health update

- WHO is in the process of delivering health technologies including essential medicines and other medical supplies to Ninewa Directorate of Health. Shortage of vaccines has been recorded in Ninewa. The Federal Ministry of Health has released 600,000 doses of Oral Polio Vaccine (OPV) to support routine vaccination and national immunization campaigns in Mosul and another 67,200 doses of Penta, however access remains a challenge.
- Ten (10) Primary Health Care Centres (PHCCs) have reopened in the newly accessible areas of Zummar, Rabea and Sunoni in Ninewa. Healthcare workers have also returned and are supporting health service provision. The health facilities in the three sub districts are in need of health technologies including essential medicines, other medical supplies and equipment following the destruction and looting of the health facilities. A Coordination Committee of Ninewa Directorate of Health (DoH) in Dahuk delivered some supplies including: cotton, syringes, wheel chair and crouches.
- Accessibility and damage to health facilities remains a challenge to the delivery of health services in particular the referral system for trauma patients in some areas. In Ramadi, referral of patients face challenges due to limited accessibility from Ramadi to Baghdad as ambulances are forced to take longer routes from Ramadi-Nukhaib-Krbala and Ramadi-Babil-Baghdad in order to access Baghdad. Parts of Amiriyah general hospital were damaged during the reporting period.
- The emergency department in Senony hospital in Sinjar resumed operations although with limited capacity of human resources, health technologies and equipment.

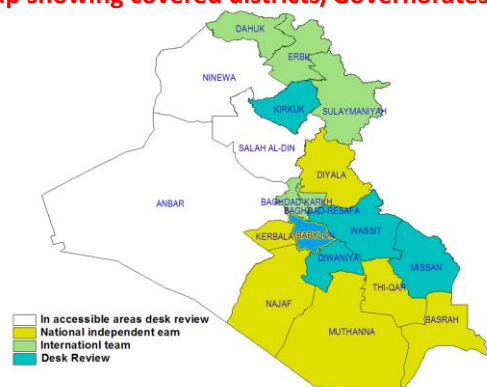
## WHO action

WHO in collaboration with the Center for Environmental Health Action (CEHA) in Amman and WHO Headquarters and Regional Office procured an antidote from a poisoning treatment center Munich, Germany and shipped it to Baghdad. The antidote was procured for a 14-year old boy who went into coma following forensic investigations conducted by the Department of Forensics in Baghdad that revealed the child tested positive for “Acute Thallium Poisoning”\*\*\*\*. The child has since recovered. WHO facilitated the importation of additional 40 doses following a request from the Ministry of Health. Munich Center of Poisoning Control offered the antidote at no cost.



- On 21 January 2015, WHO received an alert from DoH Kirkuk of coincidental mortalities due to influenza and suspected cases of haemorrhagic fever. In response, WHO and the DoH in Kirkuk conducted an initial field investigation on 22 Jan 2015 at Azadi Teaching Hospital and Kirkuk Paediatrics Hospital and an environmental investigation. The outcomes showed that one case was confirmed by laboratory to have Influenza A H1N1 (now deceased) and the suspected haemorrhagic fever cases were discarded as they had no history of fever, clinical features and risk of exposure; laboratory investigations also revealed that the patients were negative for viral haemorrhagic fever. Blood specimens were collected from suspected cases and sent for further investigations to the medico-legal institute and Public Health laboratory in Baghdad.
- WHO in collaboration with the Directorate of Environment conducted water sampling workshop for 20 participants from CRS, Danish Refugee Council (DRC), International Rescue Committee, Directorate of Preventive Health, Directorate of Environment and Directorate of water in Dahuk and Zakho sub-district. The training aimed at improving participants' knowledge and skills on methods of water sampling and testing sampling.
- Between 10 to 18 January, 2014, WHO in collaboration with the Ministry of Health, Eastern Mediterranean Public Health Network (EMPHNET) and UNICEF conducted a polio review to 12 governorates including three from the Kurdistan Region. Preliminary results reflect that: multiple vaccination campaigns increased the immunity of children thus minimising the risk of additional polio cases; the risks for polio still exists and requires further refinement of micro plans to strengthen polio eradication activities focusing on vulnerable populations and enhanced acute flaccid paralysis (AFP) surveillance and effective risk communication supported by intensified supervision. The last case of poliomyelitis infection was reported in the country in April 2014 from Baghdad –Resafa governorate. Polio Eradication is a global public health emergency declared by World Health Organization.
- WHO continued to support the Directorates of Health in Iraq to coordinate health partners' response. In Dahuk , a health cluster meeting was convened chaired by the Directorate of Health and co-chaired by WHO and UNHCR. Challenges facing the response in Dahuk were discussed and recommendations made. A meeting was also held with the Zumar sub district Health Manager. WHO has committed to cover the costs of local procurement of basic medical equipment for Zumar PHCC, will continue supporting disease surveillance and together with UNICEF supported the expanded programme on immunization.
- The agency participated in assessments missions in Dahuk and Sulymaniah. In Dahuk, WHO conducted rapid health assessment to the health facilities in Esyian and Dawodia IDP camps to assess the state of mold on tents accommodating the IDPs. Furthermore assessments addressed the public health impact and increase of scabies among the displaced persons. Following the assessments, WHO recommended urgent hygiene and health promotion interventions at community level and treatment for patients diagnosed with skin diseases.

**Scope of Assessment**  
**Map showing covered districts/Governorates**



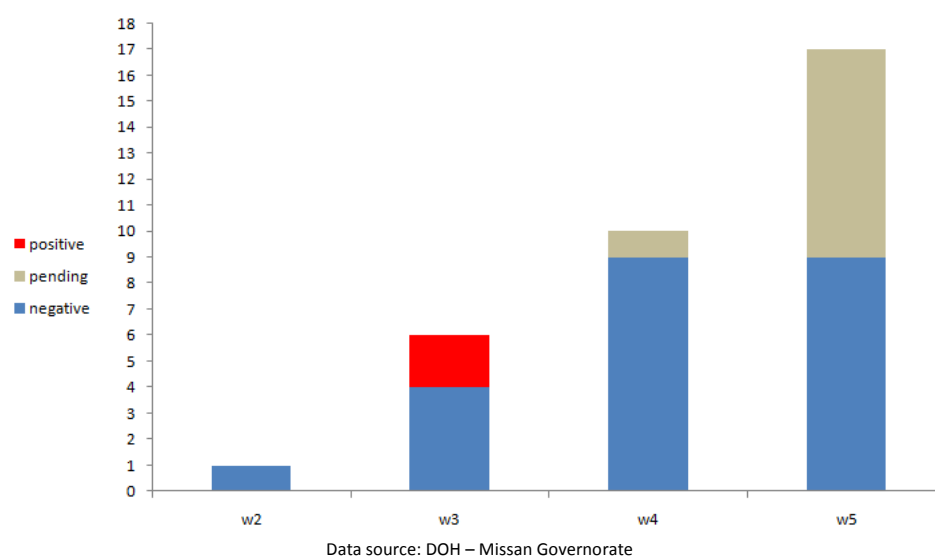
- In Sulymaniah, WHO participated in UN Join mission to Kalar to discuss the IDP situation and needs; a similar mission was conducted to Arbat IDP camp in collaboration with other UN agencies and the Mayor of Sulymaniah. At Arbat camp, the team noticed an increase in the patient load; this has put an immense pressure on the health facility that now records more than 100 patients per day. More financial and human resource support is needed at the facility in order to enhance service delivery.

An assessment of tuberculosis (TB) among IDPs was conducted in Heabeb Al Malih PHCC in AnKawa aimed at increasing awareness on TB and to follow up on the progress of referring presumptive TB patients. Findings from the assessment show that anti TB drugs are available at the centre, anti-TB medicines are dispensed in isolated package for each TB patient; TB guidelines were available in Kurdish language and pharmacy staffs were found to be well-trained and oriented on TB treatment.

## Communicable disease updates

- In Epidemiological week 3, 2015, suspected cases of Influenza A H1N1 were reported from Missan and Kirkuk governorates, in addition to suspected cases of Viral Haemorrhagic Fever (VHF) in Kirkuk. Two suspected cases from Kirkuk tested positive for Influenza A however only one case was positive for genotype H1N1. In Missan, a total of 34 cases of severe acute respiratory syndrome (SARS) have been recorded from Alsadr Teaching hospital. Samples were collected from Missan were collected and sent for laboratory confirmation; two cases were confirmed as influenza A (H1N1), 23 cases tested negative and results of nine cases are pending at the national laboratory in Baghdad, refer to figure below.

**Distribution of SARI cases reported in Missan by date of notification and Lab. result, 2014**



- There are many different influenza A viruses; some found in humans while others; avian flu in birds, influenza A (H5N1) in poultry and swine flu, influenza A (H1N1) in pigs. Influenza A H1N1 is a seasonal influenza virus whose circulation trend is seasonal often recorded during winter (cold climate). Death as a result of H1N1 virus can be prevented through vaccination and seeking timely treatment. A national influenza vaccination campaign was conducted in November 2014 targeting an estimated 14,000 individuals at risk. Health education has been initiated in both governorates and infection control procedures have been strengthened.

## Public health concerns

- WHO and other partners are supporting the Directorates of Health with vector control in IDP camps by spraying. Lice and other hygiene related conditions are an increasing health concern in IDP camps. This is associated to poor or lack of hygiene and sanitation conditions in the camps. Health partners and Directorates of Health are disseminating hygiene promotion and health and education messages.



- Skin diseases such as scabies have also been reported among displaced persons in various camps. In Garmawa IDPs camp over 40 cases of scabies had been recorded in the camp last week. Treatment and hygiene promotion activities are being conducted to prevent the increasing burden
- The interrupted supply of safe water and shortage of chlorine for chlorination remains a public health concern in Ninewa. This is likely to increase water borne diseases in the governorate.

## Resource mobilization

1.5M beneficiaries

4M targeted for Health

30% funded

70% funding gap

Since the start of the emergency in August 2014 WHO has supported the following activities listed on the right corner of this text. An estimated 1.5 people have benefited from WHO support.

If WHO does receive additional funding all the activities listed here will stop

Series2

20  
12  
50  
5.6M  
3.9M  
356,231  
30  
18  
100  
20  
20  
5,635  
2,3M  
55  
25  
67,000  
60 tons

mobile teams  
mobile clinics  
nurses and other health cadres  
children vaccinated against polio  
children vaccinated against measles  
children vaccinated on arrival in KRI and Kirkuk  
trauma kits  
Reporting sites  
health assessments  
cochlear implants conducted  
water quality monitoring teams  
water samples tested  
chlorine tablets provided  
Interagency Emergency Health Kits  
Diarrhoea Disease Kits  
Psychosocial support for school going children  
Health technologies (essential medicines)

\*\*\*\*\* The funds WHO requires will be used to respond to the health needs of more than 5 million people (2.2 million IDPs and 3.5 million from host communities).

## Contact information

For more information on issues raised in this situation report and the on-going crisis, please contact:

1. Dr Syed Jaffar Hussain  
WHO Representative and Head of Mission  
Email: hussains@who.int

2. Ms Pauline Ajello  
Communications and Donor Relations  
Email: ajellopa@who.int  
Mobile: +9647809288618

3. Ms Ajyal Sultany  
Communications Officer  
Email: sultanya@who.int  
Mobile: +9647809269506

The operations of WHO in Iraq are made possible with support from the following donors:  
**DFID (UK), Italy, Kingdom of Saudi Arabia, Kuwait and Republic of Korea**