



World Health Organization

Situation Report Number 19

16 FEBRUARY– 02 MARCH 2015

Iraq crisis



Photo: Dr L Hazim
Health workers vaccinate a child against measles in the Duhok during the national vaccination campaign



5.2 MILLION
IN NEED OF HEALTH*



2.5 MILLION
DISPLACED



4 MILLION
TARGETED WITH HEALTH
ASSISTANCE*



5.6 MILLION
VACCINATED AGAINST
POLIO**

WHO PRESENCE IN IRAQ



Photo: WHO©
A doctor attends to a patient in Mobile Medical Clinic in Sharia camp in Dohuk

HIGHLIGHTS

- ⇒ The first national polio campaign for 2015 was launched in the country targeting 5.9 Million children aged 0 month to 5 years. Supported by WHO and UNICEF, the campaign will run for 5 days in the central and southern governorates and 12 to 15 days in the Kurdistan Region of Iraq.
- ⇒ WHO continues to support the Federal Ministry of Health in building the capacity of the staff working in the recently established Regional Emergency Medicine Training Centre in Baghdad.
- ⇒ WHO delivered health technologies and equipment including X-ray developers, X-ray fixers, oxygen tube, and essential medicines to Directorate of Health (DOH) in Duhok, Kirkuk and Sulaymaniyah.

MEDICINES PROVIDED BY WHO



2.5 MILLION PEOPLE HAVE DIRECT ACCESS TO ESSENTIAL MEDICINES AND MEDICAL DEVICES PROCURED AND SUPPLIED BY WHO

FUNDING US\$



187 MILLION FUNDS REQUESTED

129 MILLION FUNDING GAP

VACCINATIONS



5.6 MILLION CHILDREN UNDER FIVE VACCINATED DURING OCTOBER POLIO VACCINATION CAMPAIGN



153,649*** VACCINATED AGAINST MEASLES SINCE 6 APRIL 2014 TO 31 DECEMBER

3.7 MILLION****

* Figures cover the period January 2014 to December 2015, (Crisis Response Plan)

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

*** Number of IDP children vaccinated in Erbil, Duhok, Sulaymaniyah and Kirkuk

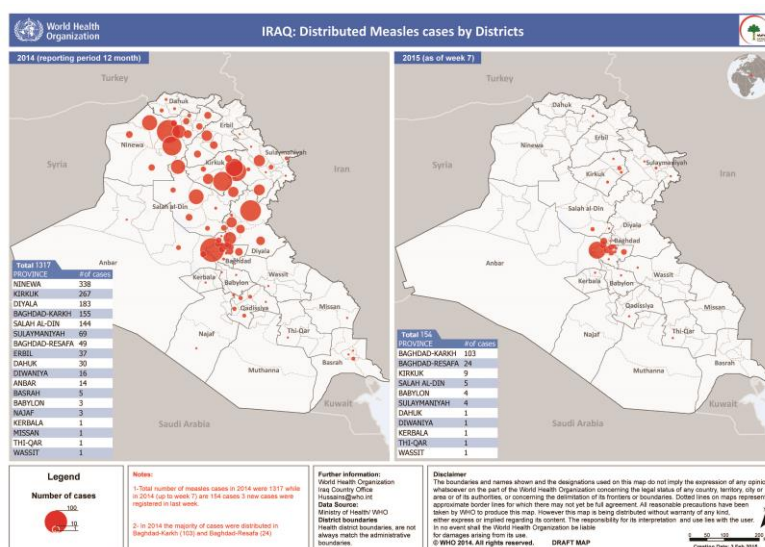
**** Number of children vaccinated in 12 governorates during December mass measles campaign.

Situation update

- A new wave of displacement has been reported in the last few days from Tikrit and Daur in Salahaldin governorate to Samara, Kirkuk and Baghdad and from Baiji to Shirqat district, Salahaldin governorate. At the time of filing this report, 4,000 families (23,000 internally displaced persons) were reported to have been displaced (UNOCHA). Humanitarian partners responded to the needs of the displaced populations with delivery of medical supplies, non-food items and water and sanitation supplies.
- Reports from health authorities in Zummar, Ninewa governorate indicate that 60% (110,000) of the displaced population that had initially been displaced to Dahuk have returned to their homes of origin. Humanitarian partners are present in Zummar to respond to the needs of the returnees.
- In Dohuk governorate, an estimated 8000 Internally Displaced People (IDPs) are still reported to be living in unfinished buildings, (Directorate of Health, Dohuk). However humanitarian partners continue to work with authorities in Dohuk to ensure all people living in unfinished buildings are settled in adequate shelters.

Humanitarian health update

- Health partners continue to support routine and supplementary activities in all insecure areas throughout the country including the recent February 2015 first national polio vaccination campaign. However in some areas (Mosul and Tikrit), inaccessibility and security concerns have hampered access to all eligible children. The map shows the distribution of measles cases in the country for the period from January 2014 to February 2015. Measles is endemic in the country as a consequence of lower immunity, irregular and inconsistent Expanded Programme on Immunization (EPI) coverage.



WHO action

- WHO, in collaboration with the Directorate of Health (DOH) of Erbil, assessed the health services in Shaqlawa General Hospital in order to establish the capacity of the health facility to cope with increased patient caseloads. Shaqlawa General Hospital is the only general hospital in the district that caters for a population of 19,000 host communities and 23,000 IDPs and receives referrals from 8 Primary Health Care Centres (PHCC) and three hospitals in the sub districts with a bed capacity of 100 beds. This population influx has put additional pressure on health services and human resources for health in Shaqlawa hospital as it struggles to cope with the growing number of patients. Statistics from the hospital admissions showed that the number of patients' consultations increased more than 200% in 2014 as compared to 2013.
- To ensure the continuation of immunization services in Ninewa, the Federal Ministry of Health with support from partners delivered a number of vaccination antigens including 31,500 doses of pentavalent vaccine, 23,400 doses of tetravalent vaccines, 6,000 doses of rotavirus vaccines and 43,000 doses of Measles Mumps and Rubella (MMR) vaccines.*****
- WHO, in response to the reported shortages of supplies used in X-Ray imaging delivered X-ray developers and X-ray fixers to Directorate of Health (DOH) in Duhok and Kirkuk as part of its support of ensuring access to quality health services by IDPs, host communities and refugees.

- The first national polio campaign for 2015 was launched in the country.

Supported by WHO and UNICEF, the campaign was conducted for 5 days from 22 February to 26 February, 2015 in all parts of the



Photo: Dr L Hazim

A young girl gets her finger marked after being vaccinated against polio and measles during a combined measles and polio vaccination campaign in Duhok; finger marking is one of the identifiers of a vaccinated child during polio vaccination campaigns

country except the Kurdistan Regional of Iraq (KR-I)). In Erbil and Sulaymaniyah the polio campaign will run for 12 days and will be combined with the measles campaign and for 15 days for Duhok due to the high influx of IDPs in the governorate. The national campaign targeted 5.9 Million children aged 0 month to 5 years of age countrywide for polio and 673,052 children aged 9 month to 5 years for measles in the Kurdistan region. The results of the campaign are being analysed and will be shared in the subsequent bulletins.

- As part of the supervision and monitoring of the vaccination campaign, WHO and UNICEF conducted field visits to vaccination sites and DOHs in Erbil and Duhok governorates. WHO teams team and DOHs agreed to intensify supervision and monitoring, ensure accurate recording and tracking of all children missed during the campaign. Enhancing the quality of supervision is vital in ensuring vaccination of Every Last Child.
- WHO continues to support the Federal Ministry of Health in building the capacity of the staff working in the recently established Regional Emergency Medicine Training Centre in Baghdad. The \$6 million Emergency Medicine Training Centre was constructed with funds from the European Union under the programme to support Specialized Medical Services (SMS) in Iraq and has a capacity of over 60 residential professionals.

*****The pentavalent vaccine is a combination of five vaccines in one: diphtheria, tetanus, whooping cough, hepatitis B and Haemophilus influenza type b (the bacteria that causes meningitis, pneumonia and otitis). Priorix Tetra is a new combined vaccine against measles, rubella, mumps and varicella. RotaTeq is a vaccine that can help protect babies against common types of rotavirus. and MMR vaccine is an immunization vaccine against measles, mumps, and rubella

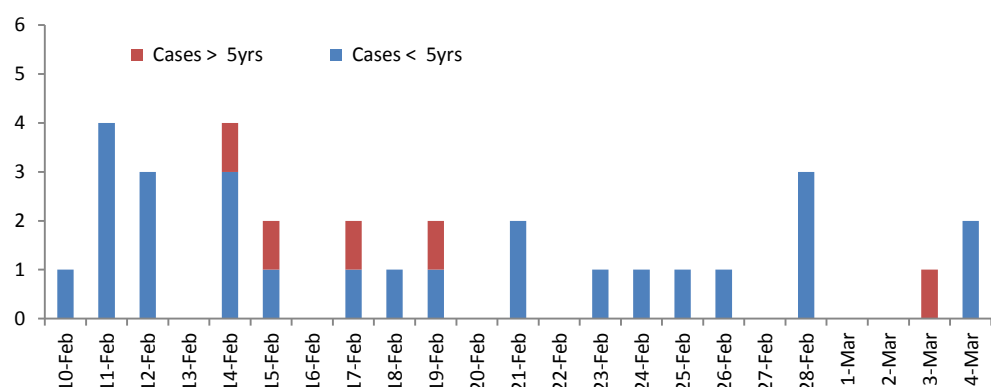
The centre will be used to train other professionals from countries in the region including research in Emergency medicine. A study tour to explore a possibility of twining up with other advanced training centers in and outside the region has been planned for the end of March 2015. Both WHO and MOH plan to roll out Training of Trainers (TOT) courses for health professionals involved in Emergency Medicine on a rotational basis.

- WHO and United Nations High Commission for Refugees (UNHCR) conducted a joint mental health and psychosocial support assessment mission to Duhok, Sulaymaniyah and Erbil from 21 to 28 February 2015. During the mission in Dohuk, the teams visited Domiz Refugee camp and Sharia IDP camp. In Domiz Refugee camp, the team had discussions with UPP and MSF team supporting mental health services and in Sharia. The team met and held discussions with MEDAIR currently running health services in the camp. Interviews with some IDP patients who visited the clinics were conducted and in response to some gaps a one day training workshop was held for medical staff from the DoH Dohuk and NGO managed health facilities in refugee and IDPs camps working in the area of mental health. Findings of the assessment will be shared in the subsequent weekly reports.

Communicable disease updates

- Following the detection of measles cases in Arbat camp over the past few weeks in which 12 suspected cases were recorded, the Early Warning and Alert Network (EWARN) system has since continued monitoring the trends of the disease in addition to conducting vaccination campaign in Arbat camp. In this reporting period, 31 suspected cases were reported. WHO in collaboration with Emergency INGO and the DOH, Sulaymaniyah collected samples from suspected cases and sent them to the National Reference Laboratory for further investigations. An epidemiological investigation suggested that the outbreak could have started from new IDP children. There was a spatial and temporal clustering of suspected measles cases in the camp. All cases except one were reported among new IDPs from Salahaldin.
- WHO supported a cross sectional coverage assessment of the vaccination activity in Arabat camp. The coverage was found to be as low as 62% (CI – 95%). The assessment recommends a repeat of the campaign in spite of the on-going measles and Oral Polio Vaccination (OPV) campaign in KRGI for all children aged 9 months to 5 years irrespective of their previous vaccination status. Below is the epidemiological curve showing the clustering of measles cases in Arabat camp.

Suspected measles cases - Arbat camp , Sulaymaniya



Public health concerns

- Measles cases have been reported in other parts of the country and continue to pose a public health threat to the displaced children especially those coming from areas of low vaccination coverage.

- Water, Hygiene and Sanitation (WASH) cluster partners in Sharia IDP camp identified shortage of Alum and chlorine for water treatment of water projects as a major challenge. This is public health threat to the population who may be at risk of contracting water borne diseases. Health cluster partners are working closely with the WASH cluster to improve sanitation facilities and water treatment in the camp.
- WHO and other health cluster partners continued supporting the Ministry of Health and DOHs with emergency medical supplies including trauma kits.

Resource mobilization

2.5M beneficiaries

4M targeted for Health

30% funded

70% funding gap

Number of people reached and supported using WHO support

Activities conducted with WHO funds from August to December, 2014

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 2.5 people have benefited from WHO support.

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

Series7

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 (1.9 million IDPs and 3.5 million from host communities).

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

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