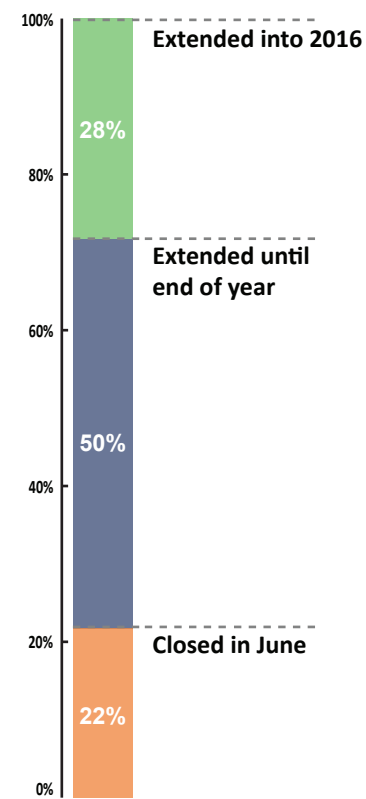


OVERVIEW



Accelerated resource mobilization and advocacy efforts, following the closure of health service delivery points as of 30 June 2015, as a consequence of lack of funding, have resulted in reversing the risk of further closure of more health care delivery points. This is a result of recent renewed financial contributions made by a number of donors. This has helped to maintain about 100 health care service delivery projects, providing a wide range of primary health care services, including ensuring adequate referral services, adequate medical supply chain and maintaining an early warning and outbreak response capacity. However, the funding gaps are still significant and a number of health service delivery points face the risk of closure by the end of the year if no additional funding is received.

SERVICE DELIVERY POINTS BY HEALTH CLUSTER *



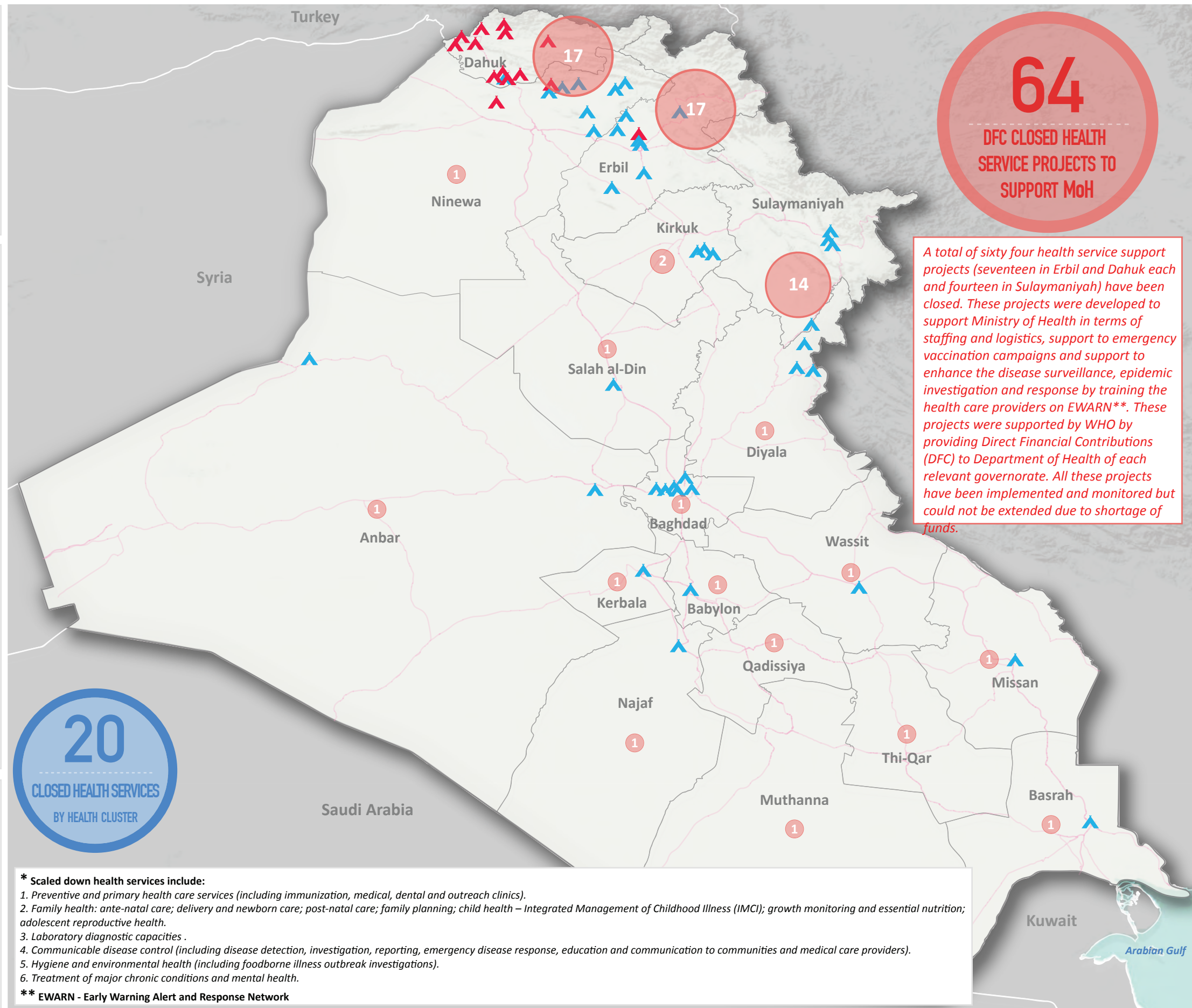
* Closed health service projects supporting MoH are not included in this timeline

CLOSED DFC HEALTH SERVICE PROJECTS (WHO) *

Governorate	# of projects
Dahuk	17
Erbil	17
Sulaymaniyah	14
Kirkuk	2
Anbar	1
Babylon	1
Baghdad	1
Basrah	1
Diyala	1
Kerbala	1
Missan	1
Muthanna	1
Najaf	1
Ninewa	1
Qadissiya	1
Salah al-Din	1
Thi-Qar	1
Wassit	1
TOTAL	64

HEALTH CLUSTER PROJECTS CLOSURES BY ORGANIZATION *

Organization	Before June	End of year	Extended into 2016	TOTAL
Emergency	0	7	0	7
HI	0	2	4	6
Heevie	14	2	0	16
IMC	0		3	3
IOM	1	8	0	9
MDM	0	2	1	3
Medair	0	1	2	3
Relief Int.	0	2	0	2
UIMS	0	3	0	3
UNFPA	2	1	16	19
UNICEF	0	10	0	10
WHO	3	4	0	7
WVI	0	4	0	4
TOTAL	20	46	26	92



A total of sixty four health service support projects (seventeen in Erbil and Dahuk each and fourteen in Sulaymaniyah) have been closed. These projects were developed to support Ministry of Health in terms of staffing and logistics, support to emergency vaccination campaigns and support to enhance the disease surveillance, epidemic investigation and response by training the health care providers on EWARN**. These projects were supported by WHO by providing Direct Financial Contributions (DFC) to Department of Health of each relevant governorate. All these projects have been implemented and monitored but could not be extended due to shortage of funds.

* Scaled down health services include:

1. Preventive and primary health care services (including immunization, medical, dental and outreach clinics).
2. Family health: ante-natal care; delivery and newborn care; post-natal care; family planning; child health – Integrated Management of Childhood Illness (IMCI); growth monitoring and essential nutrition; adolescent reproductive health.
3. Laboratory diagnostic capacities .
4. Communicable disease control (including disease detection, investigation, reporting, emergency disease response, education and communication to communities and medical care providers).
5. Hygiene and environmental health (including foodborne illness outbreak investigations).
6. Treatment of major chronic conditions and mental health.

** EWARN - Early Warning Alert and Response Network

Legend

- Camps with scaled down services in June 2015
- Camps with extended health services



of DFC closed health service projects to support MoH

Data source: WHO/MoH/Health cluster partner organizations/CCCM/UNHCR

Further information: World Health Organization

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