

1.2 -1.5 MILLION*

500 000 # DISPLACED FROM MOSUL 2.7 MILLION** PEOPLE IN NEED OF HEALTH SERVICES





Highlights

- WHO has supported the Erbil, Duhok and Sulymania Directorates of Health with intravenous fluids sufficient for 100 000 people to support the response to the ongoing crisis in Mosul and other governorates.
- With the rising trauma needs in west Mosul, WHO in collaboration with the Federal Ministry of Health has opened a fully equipped third field hospital (FH) in Hamam al' Alil. The FH also has a maternity unit established by UNFPA, will be managed by implementing partner ASPEN Medical. To facilitate the opening, WHO provided essential medicines, Inter-agency Health Kits (IEHK), trauma and surgical kits sufficient for 33 000 people.
- Through WHO supported mobile medical clinics (MMCs) and static primary health facilities managed by implementing partners, more than 16 800 consultations, including more than 4100 (25%) children under the age of 5 years were recorded. A total of 360 cases were also referred to specialized health facilities. More than 190 children under 5 years were also reached with routine vaccination services.



The International Organization for Migration (IOM) displacement tracking matrix data reports that more than 330 000 persons have been displaced from Mosul since 17 October 2016 to 20 April 2017, of these, 282 000 are currently displaced to internally displaced camps. Government estimates that 497,000 have been displaced from Mosul since the mid October 2016, of which , 161 000 are displaced from east while 336 000 are displaced from western part of the city. The Government further estimates that 164 000 people will be displaced in the coming weeks.

- From 12 March to 16 April 2017, a total of 260 new trauma cases were received in 3 WHO supported Trauma Stabilization Points (TSPs) located in the frontlines of west Mosul, bringing the total number of casualty cases recorded between 18 February and 16 April 2017 to 1960 trauma cases.
- More than 1600 trauma cases were referred and treated in five hospitals including Athba and Bartalla Field Hospitals, Emergency, West Emergency and Shikhan hospitals between 16 April and 22 April 2017, the increase in numbers is a result of delayed reporting from some facilities. This brings the cumulative number of trauma patients from west Mosul treated in the 5 hospitals since 18 February to more than 4000 (86% were civilians 27% were children under the age of 15 years and 27% were female). To date, more than 8000 patients (73% civilians, 28% under the age of 15 years and 18% female) have been referred to hospitals in Mosul and neighboring Governorates. Most patients were treated for head, neck and spinal injuries caused by shrapnel and gunshot wounds.

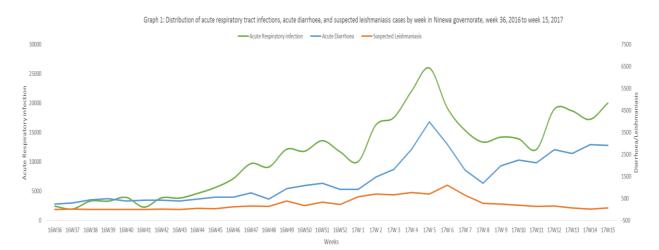
****Casualty cases for patients referred to Emergency and West Emergency hospitals in Erbil, Shikhan hospital, Athba and Bartalla Field Hospitals, this number could be higher

^{*} As of 23 December 2016, 1.2-1.5 million people could be affected in Mosul by the military operations - Data source, UNOCHA

^{**} Figures for Humanitarian Response Plans 2017 for Ninewa Governorate

^{***}Number of consultations since 17 October 2016 until 15 April 2017

EPI In epidemiological (epi) week 15; ending on 16 April 2017, a total of 66 health facilities submitted their epi weekly surveillance reports including 23 mobile medical clinics, 41 static clinics and 2 hospitals from **Updates** 14 health agencies serving internally displaced persons in Ninewa. A total of 62 454 consultations were recorded in all IDPs camps in Mosul through the Early Warning Alert and Response Network (EWARN). Acute respiratory infections (32%) and acute diarrhea (5%) were the leading causes of morbidity in the governorates, refer to graph 1 for details.



- During epi week 15, Ninewa Governorate recorded a decrease in the number of acute respiratory infection cases. Most cases were reported from the health districts of Aymen (36%), Ayser (16%), Al-Hamdaniya (13%), Qayara (11%), Makhmur (10%) and Telafar (7%). Al-Shikhan health district recorded 4%, Sinjar recorded 2 % while Tilkaif (6%) and Bardarash health sub districts each recorded 1%.
- Public
- Limited access of populations to health services in newly liberated areas and inside Mosul city due to the health volatile security situation. concerns
 - Limited movement of partners to newly accessible areas due to security challenges which makes it hard to conduct timely investigations of suspected cases of communicable diseases in the affected communities.
 - Shortage of safe water for populations whom are trapped inside western Mosul remains a concern. This is a potential risk for outbreaks of water borne diseases such as acute watery diarrhea.
 - Shortage of fuel and ambulances to refer trauma cases out of Mosul city hence hindering the timely response to emergencies.

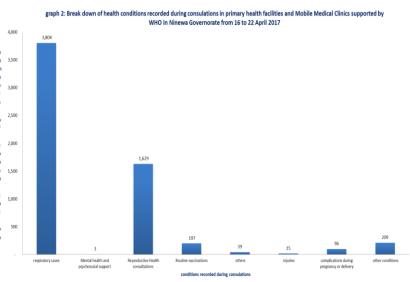
Health

- Provision of primary health care services to the affected population in newly accessible areas. needs,
 - Provision of primary health care services in newly established camps.
- priorities Management of trauma cases which are steadily increasing.
- Mobilization of human resources to support the high numbers of trauma cases seen in Trauma and gaps Stabilization Points (TSPs) and field hospitals.
 - Provision of sufficient quantities of controlled substances needed for pain management and sedation of patients with severe trauma injuries.
 - Strengthening the existing capacity for post-operative care.

WHO

With the rising trauma needs in west Mosul, WHO in collaboration with the Federal Ministry of Health has opened a Response fully equipped third field hospital (FH) in Hamam al' Alil. The FH also has a maternity unit established by UNFPA will be managed by implementing partner ASPEN Medical. To facilitate the opening, WHO provided essential medicines, Inter-agency Health Kits (IEHK), trauma and surgical kits sufficient for 33 000 people. Since the start of the operations in west, more than 3800 hospital based casualties from west Mosul have been treated, the number is expected to increase further with intensified operations.

- WHO has also supported Erbil, Duhok and Sulymania Directorates of Health with intravenous fluids sufficient for 100 000 people. The supplies will be deployed to among other places, internally displaced persons camps and health facilities serving internally displaced persons from Mosul and to the ongoing crisis in other governorates.
- As the number of IDPs from west Mosul continues to increase, more consultations are being registered at the various entry points across the country. This week, 16800 more than consultations were recorded through WHO supported MMCs and static primary health facilities managed by implementing partners, including 4100 (25%)children under the age of 5 years. Twenty three percent of all the consultations were due to upper respiratory tract



infections. More than 197 children were also reached

with routine vaccinations services. A total of 360 complicated cases including injuries and pregnancy or delivery related complications were referred to specialized health facilities through ambulances donated by WHO to the Ninewa Directorate of Health (DOH).

- In Duhok, 200 new consultations, including 53 children under 5 years old were recorded, through mobile medical clinics managed by WHO's implementing partner, Heevie and Duhok DOH. Since late 2016 to 20 April, 2017, more than 5700 consultations including more than 1300 children less than 5 years were recorded. A total of 535 new IDPs from west Mosul arrived Nargizlia screening site in Shikhan district, Duhok Governorate.
- More than 1900 patients were treated this week through WHO continued support and the direct management and supervision from the Directorate of Health for 12 Medical doctors working in Duhok Emergency and Azadi general hospitals. As at 20 April 2017, more than 28 000 patients had benefited from WHO's support.
- More than 190 patients from west Mosul including trauma, obstetrics and medical cases requiring secondary and tertiary health services



were referred to Shikhan hospital, Azadi and Duhok hospitals. All the referrals were made through the 10 ambulance teams in Duhok DOH supported by WHO. To date, more than 1100 patients have been referred to the three hospitals through this intervention.

 Through the support provided by WHO, the water quality monitoring team from the Directorate of Environment collected 40 water samples from 5 IDP camps and tested them for bacteria. Additional 10 samples were tested for chemical analysis. All samples were in compliance with Iraqi Drinking Water Standards and WHO guidelines.

Partnership and coordination	The Health Cluster Strategic Review Team (SRT) completed the process of reviewing Health projects under Iraq Humanitarian Pooled Fund (IHPF) First Standard Allocation for 2017. Of the 21 projects submitted with the exception of 4 multi-cluster projects with health interventions, 16 have been recommended by the SRT. The Cluster Defense will take place on 3 May, after which technical feedback will be provided to health partners with successful projects.
	The health coordination meeting was held in Erbil on 17 April, issues discussed include speeding up the process of identifying partners to deliver health services in Chamakor and Hammam Al Alil 2 camps. Given the situation in Haj Ali camp, the cluster is vigorously advocating for partners to intervene as soon as possible. Discussions with a couple of potential partners with adequate capacity are still ongoing.
Plan for the coming week	 Handover Hamam al' Alil field hospital to implementing partner to support management of trauma patients from Mosul.
	Contacts:
	1. Mr Altaf Musani Country Representative and Head of Mission, WHO Iraq, email: <u>musania@who.int</u>

- 2. Dr. Wael Hatahit, Technical Officer, Mobile: +9647510101456, email: hatahitw@who.int
- 3. Ms Pauline Ajello, Communication Officer, mobile: +9647510101460, email: ajellopa@who.int
- 4. Ms Ajyal Sultany, Communication Officer, mobile: +9647510101469, email: sultanya@who.int