On 25 March, the World Health Organization, the Federal Ministry of Health and Ninewa Department of Health opened a trauma field hospital (FH) in Athba, 15 kilometers from the frontlines of west Mosul.

The World Health Organization with logistic support from the World Food Programme airlifted 15 fully equipped ambulances in order to strengthen the trauma referral pathway and to support medical related emergencies referrals in west Mosul.

A total of 14,896 consultations, including 5,460 children under the age of 5 years were recorded through WHO supported mobile medical clinics (MMCs) and static primary health facilities run by WHO implementing partners.

WHO donated two fully furnished and equipped caravans to Ninewa DOH to support the delivery of primary health care services at Albu Saif mustering point and ensure access of primary health care services for people fleeing from west Mosul.

Through its implementing partner “United Iraqi Medical Society (UIMS)”, WHO has supported the construction Primary Health Care Center (PHCC) in Al Sallameya 1 camp. The PHCC that has already commenced with the work is expected to be ready at the start of April 2017 will serve an estimated 2,500 families.

According to International Organization for Migration displacement tracking matrix data, 280,000 persons have been displaced from Mosul since 17 October 2016 to 26 March. From 25 February to 25 March an estimated 141,990 persons displaced from west Mosul were identified in various locations of displacement including camps, emergency sites and out-of-camp locations. According to authorities in Hamam Aleel an estimated 189,006 persons have transited the areas since 18 February until 24 March, 2017.

Between 18 and 22 March 2016, a total of 212 new trauma cases were received in 3 Trauma Stabilization Points (TSPs) supported by WHO and located on the frontlines of west Mosul, bringing the total number of casualty cases recorded between 18 February 2017 to 22 March to 1263 trauma cases.

A total of 662 trauma cases were referred and treated in four hospitals including Bartalla Field hospital, Emergency, West Emergency and Shikhan hospitals between 19 and 21 March 2017. This brings the cumulative number of trauma patients from west Mosul treated in the 4 hospitals since 18 February to 1,296. Of these 76% were civilians, 28% were children under the age of 15 years and 35% were females. This brings the number of hospital based trauma cases reported from Mosul since 17 October to 5,333 (57% civilians, 29% under the age of 15 years and 28% female).

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*As of 23 December 2016, 1.2-1.5 million people could be affected by the military operations – Data source, UNOCHA

** Figures for Humanitarian Response Plans 2017

***Number of consultations since 17 October 2016 until 125March 2017

****Casualty cases for people fleeing to Emergency and West Emergency hospitals in Erbil, Shikhan hospital and Bartalla Hospital, this number could be higher

***** Only funding status for the Mosul Operations
In epidemiological (epi) week 10 ending 11 March 2017, a total of 40 health facilities submitted their epi weekly surveillance reports including 15 mobile medical clinics, 23 static clinics and 2 hospitals from 11 active health partners serving internally displaced persons in Ninewa. A total of 24,754 consultations were recorded in all Ninewa IDPs camps through the Early Warning Alert and Response Network (EWARN). Acute respiratory infections (38%), acute diarrhoea (5%) and cutaneous Leishmaniasis (1%) were the leading causes of morbidity in the governorate, refer to graph 1 for details.

During epi week 11, Ninewa Governorate recorded a decrease in the number of acute respiratory infection cases. Most of the cases were from the health districts of Ayser (31%), Al-Hamdaniya (30%), Gayyara (12%), Al-shikhan (11%), Telafar and Makhmur (6%) and Tilkaif (4%).

Limited access of populations to health services in newly liberated areas and inside of Mosul due to the volatile situation.

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 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.

Provision of primary health care services to the affected population in newly accessible areas.

Management of trauma cases which are steadily increasing.

Mobilization of human resources to support the high numbers of trauma cases seen in Trauma 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.

The World Health Organization with logistic support from the World Food Programme airlifted 15 fully equipped ambulances in order to strengthen the response to the increasing trauma and medical related emergencies in west Mosul. These ambulances will enhance trauma care at the frontlines and ensure timely referral to field hospitals. An additional 15 ambulances are expected to arrive in the country next week to complete the planned shipment of 30 ambulances all meant to support the MOH and partners response of Mosul.
A total of 14,896 consultations, including 5,460 children under the age of 5 years were recorded through WHO supported mobile medical clinics (MMCs) and static primary health facilities run by WHO implementing partners. Thirty one percent of all the total consultations were due to acute respiratory tract infections (ARIs). A total of 329 complicated cases were referrals to specialized health facilities through ambulances donated by WHO to the Ninewa Directorate of Health (DOH).

As the number of people fleeing the crisis in west Mosul rise to unprecedented numbers, WHO has strengthened it collaboration with Ninewa health authorities to establish primary health care centers in newly created IDP camps. Through its implementing partner United Iraqi Medical Society (UIMS), WHO has supported the construction Primary Health Care Center (PHCC) in Al Sallameya 1 camp. The PHCC that has already commenced with the work is expected to be ready at the start of April 2017 will serve an estimated 2,500 families.

WHO continued to support health authorities and partners delivery health care assistance in the frontlines. This week, WHO donated essential lifesaving medicines sufficient for 11,300 people including antibiotics, treatments for chronic conditions and skin infections to the DOH and implementing partners positioned in the frontlines of west Mosul. Medical supplies including surgical kits and blood were also donated to the WHO implementing partners Doctors Aid Medical Activities (DAMA) and New York Medics (NYC) and Athba Field Hospital.

WHO’s implementing partner Heevie recorded 249 consultations including 51 children under 5 years old to new IDPs who arrived at Nargizlia screening site in Shikhan district, Duhok Governorate. Since 1 November 2016 to 20 March, a total of 4,612 consultations including 1,021 children less than 5 years old were provided.

Between 17 to 24 March, 22 trauma patients from west Mosul were referred to Shikhan hospital and 37 trauma, obstetric, and medical cases were referred to Duhok Emergency and Azadi hospitals. All the referrals were made through the 10 teams in Duhok DOH supported by WHO. The support is meant to strengthen the referral pathway of emergency medical cases from newly accessible areas and IDP camps for cases requiring secondary and tertiary health services. To date, 261 cases have been referred to the three hospitals through this intervention.

A total of 754 patients were treated with support from the 12 Medical doctors in Duhok Emergency and Azadi general hospitals through support from WHO and direct management and supervision from the Directorate of Health, Dahuk. From 1 November 2016 to 24 March 2017, a total of 22,249 patients have benefited from this support.
WHO supported water quality monitoring team from the Directorate of Environment to collect water samples from IDP camps. The samples were tested for bacteriology and additional samples were tested for chemical analysis. The results from all the samples were in compliance with Iraqi Drinking Water Standards and WHO guidelines.

On 25 March, the World Health Organization, the Federal Ministry of Health and Ninewa Department of Health opened a trauma field hospital (FH) in Athba. Located in Athba, 15 kilometers from the frontlines of west Mosul, the trauma field hospital has 2 operating theaters and 56 beds. Services include triage; screening for new and referred patients from stabilization points; advanced life support; definitive wound management; basic fracture management; and a range of general and specialized lifesaving surgical capabilities. Other services include obstetric surgery and general emergency care. In the days ahead, it is expected that the hospital capacity will increase with an additional operating theatre and 20 beds, supported by UNFPA for emergency obstetric care services.

Airlift additional fifteen ambulances procured by WHO to the country completing the shipment of thirty new ambulances that the organization procured to support Ninewa DOH. All the ambulances will be deployed to west Mosul to strengthen the referral pathway.

Complete the construction of Hamam al' Alil hospital to support management of trauma patients from Mosul.

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