

HEALTH CLUSTER BULLETIN BULLETIN NO. 04

(April 2021)



Name of the Country: Iraq

Emergency type: Conflict

Reporting period: 01.04.2021- 30.04.2021

COVID-19 pandemic

- **Iraq COVID-19 caseload:** The total number of COVID-19 cases in April 2021 were 214,275 with 1,142 associated deaths, making April the month with the highest caseload and associated fatalities throughout the pandemic. Meanwhile, the cumulative number of cases since the onset of the pandemic in Iraq were 1,065,199 with 15,465 associated deaths as of the end of April 2021.
- **COVID-19 second wave spike:** The number of cases constituting the second wave continued to climb, with high incidence and positivity rates in all governorates and doubling in more than 2/3rd of the governorates, reaching the peak during EPI week 16 (19-25 April 2021). An urgent need remains to scale up preparedness and response activities with all efforts to speed up the vaccination campaign, including counteracting anti-vaccination rhetoric through trustworthy key messaging, enhancing vaccination preparedness, and implementation of the campaign in IDPs and refugee camps.
- **COVID-19 Taskforce:** The regular Health Cluster COVID-19 Task Force meeting was held on 15th April 2021 with full participation of MoH, UN agencies, Risk Communication and Community Engagement (RCCE) Working Group and partner agencies.
One of the points discussed was the integration of COVID-19 Vaccination pillar into the workplan, making a total of nine pillars.
The MoH summarized the main pillars and activities of the National Deployment and Vaccination Plan (NDVP), including the implementation process. The NDVP clearly included IDPs and Refugees as part of the Government's priority groups for vaccination and collaboration with the Ministry of Migration and Displacement (MoMD) is ongoing to allocate vaccines for them.

Humanitarian Response Plan 2021

857K Targeted Population **21%** Reached Beneficiaries
22 Partners Reported **10** INGO **12** LNGO

HCO*: In 2021, the cluster plans to reach 221,392 IDPs in-camp, 126,125 IDPs out-of-camp and 509,412 returnees with essential Primary and Secondary Healthcare services. The cluster objectives will be to ensure continuation of outpatient consultations; provision of essential medicines; surveillance and rapid response and management of communicable diseases, including COVID-19; supporting referral of complicated cases to public hospitals; community awareness about prevention of communicable and non-communicable diseases; and provision of diagnostic and therapeutic equipment/supplies to public health facilities, which will contribute to the HRP strategic and specific objectives by ensuring uninterrupted essential service-availability to IDPs in and out of camps and vulnerable returnees while strengthening the health system to facilitate service handover to the Government and durable solutions.

130K Total Consultations



33K Cases Received Gynaecological Consultations

1K Children Under 5 in Camps IDPs Screened For Malnutrition by MUAC or Anthropometric Measures



6K MHPSS Individual Sessions Provided

1K Patients attending Secondary /tertiary Hospitals



0.5K Children 9-59 Months Vaccinated Against Measles (Measles-containing Vaccine) In Crises Affected Areas Through Routine Immunization

A system to assist online self-registration is in place which also provides a slot and assigns the specific vaccine centers to the applicants. The official NDVP (Arabic version) was shared with all Taskforce members.

The RCCE WG presented their COVID-19 response plan, the objectives, achievements, challenges and the needs to be addressed through fighting rumors and misinformation circulating within communities. The WG invited all stakeholders to engage in supporting these efforts as per their capacity and available resources. They stressed the need to enhance coordination mechanisms and strengthen collaboration on the ground via RCCE microplanning embedded in the COVID-19 vaccination campaign. The forum agreed to have key RCCE indicators included in the COVID-19 services/supplies mapping tool to enable stakeholders to report all their inputs for COVID-19 response in one platform. The Health Cluster reiterated the importance of partners regularly updating the COVID-19 services/supplies mapping in the ActivityInfo platform and demonstrated the [COVID-19 Dashboard](#) during the meeting, including how to navigate through available information. Additionally, the Health Cluster and RCCE decided on including Behavioral Risk Assessment under Communication pillar of COVID-19 Task Force workplan.

- **COVID-19 Vaccination campaign:** The campaign is in progress in line with the NDVP; partners are requested to boost their support of the microplanning, cold chain expansion, supervision and monitoring, and provision of remote temperature monitoring devices for Ultra Cold Chain (UCC) freezers in their respective operating settings. The MoH reported a total of 333,050 (at least one dose) people vaccinated as of 29th April 2021 and fortunately no severe Adverse Effects Following Immunization (AEFI) were reported. The Government expressed thanks to partners supporting internet services at vaccination centers.

The RCCE WG in collaboration with stakeholders developed “key messages for COVID-19 vaccination uptake” to tackle rumors and misinformation circulating in the community. These have been shared with all humanitarian partners operating in Iraq in three languages (English, Arabic and Kurdish).

- **Meeting on COVID-19 Vaccination for Erbil IDPs/Returnees:** The Health Cluster met with the Erbil Protection Working Group on 25th April 2021 to discuss some concerns the Working Group had regarding IDPs in Erbil having access to COVID-19 vaccination. Issues such as harassment or prevention from crossing checkpoints to be vaccinated in the bordering Ninewah governorate and difficulties arising from lack of transport cost were discussed. The Health Cluster agreed to raise these issues to the MoH for advocacy.

- **MoH Baghdad/KRG meeting on COVID-19 vaccination:** The Health Cluster, in collaboration with UNHCR, coordinated a meeting between vaccination focal persons from Federal and KRG Ministries of Health to discuss some of the issues raised by humanitarian partners regarding the COVID-19 vaccination campaign. The following issues were touched upon during the meeting:

- Vaccination for people without documentation
- Advocacy for movement across checkpoints
- Mobile vaccination services for people without access/without documentation
- Share awareness messages with IDPs coming into PHCCs
- Link for people to register for vaccination
- Status of camp management training on vaccine registration system

- **Anbar sub-cluster co-coordinator onboarding:** The Health Cluster coordinated with IOM Iraq to identify a co-coordinator for the Anbar sub-cluster, due to difficulties in WHO accessing the governorate, caused by movement restrictions as a result of security and the pandemic. The co-coordinator was officially on board from 1st April 2021 and received an orientation session from the national Health Cluster on 4th April 2021.
- **Health Cash and Voucher Assistance (CVA) progress update:** The Health and Protection Clusters are coordinating with Cash Working Group to develop a document which will provide guidance to interested partners on the modality of support to the most vulnerable population to overcome financial barriers in accessing basic health needs. A follow up meeting was held on 15th April 2021, where the specific concepts of supporting beneficiaries with transportation cost to health facilities in return locations or areas of secondary displacement, as well as ensuring access to essential NCD medicines through a voucher system by stockpiling such medication in pre-assigned facilities, was agreed upon. The Cash WG drafted the guidance note on the above-mentioned activities which was shared with the Health and Protection clusters for review. Technical input is also being sought from WHO-Eastern Mediterranean Regional Office (EMRO) and HQ focal persons. EMRO briefly presented and discussed CVA in different countries during the Health Cluster Coordination meeting in April 2021 to familiarize Iraq Health Cluster partners with the concept for better health outcomes. The presentation elaborated available ways to implement and support beneficiaries in addressing the financial barriers in accessing health services.
- **Health Cluster 2021 4W dynamic dashboard:** Following the official publication of the Iraq HRP 2021, the Health Cluster launched the 4W dynamic, interactive dashboard, which can be accessed [here](#). This dashboard covers activities reported under HRP 2020, HRP 2021 and non-HRP. An additional page has been added to highlight the target for each reporting indicator and show the progress.
- **One Stop Shop (OSS) - Kurdistan Medical Control Agency (KMCA):** The importation of drugs, medical equipment/supplies, and related items has remained a challenge for INGOs. MdM-France and INTERSOS presented a proposal and discussed with Kurdistan MoH on the possible reactivation of the OSS. All willing Health Cluster partners operating in KRG are requested to jointly sign an official support letter to be presented to KMCA through the Health Cluster.
- **Dohuk funding gaps for persisting IDPs:** Four IDP camps (Bersive 2, Bajed Kandala 1, Essiyan and Darkar) in Duhok, being supported under BHA fund implemented by PUI, are facing project phase out in August 2021. Advocacy for more fund mobilization and allocation to ensure basic health service-availability for the IDPs in these camps was raised in the April 2021 national Cluster Coordination meeting.

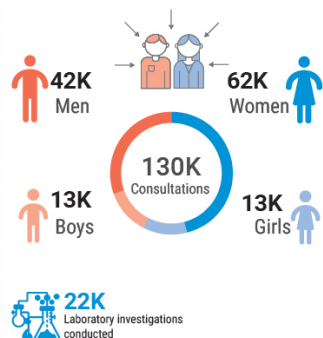
FUNDING INFORMATION¹

General Health

\$75.8M
Required

9%
Funded

TREATMENT OF COMMON DISEASES

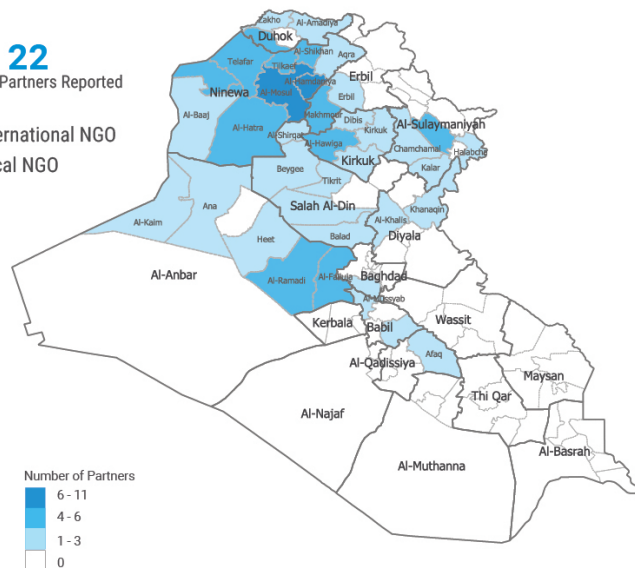


HEALTH PARTNERS

22
Partners Reported

10 International NGO

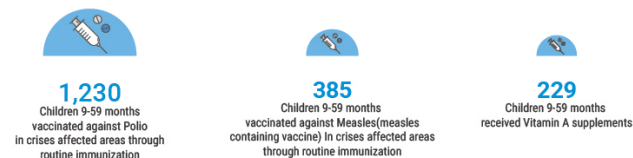
12 Local NGO



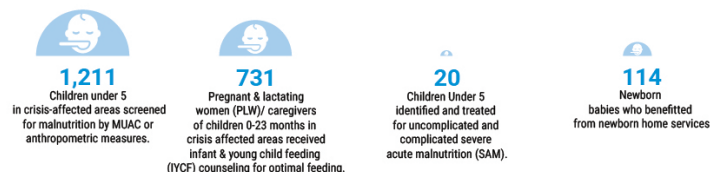
REACHED TARGET



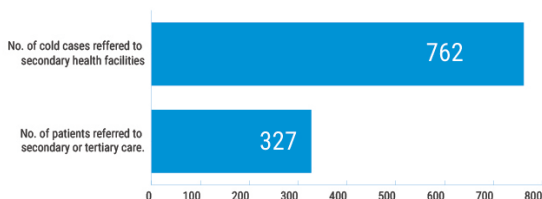
IMMUNIZATION



NUTRITION



SUPPORT TO HEALTH FACILITIES



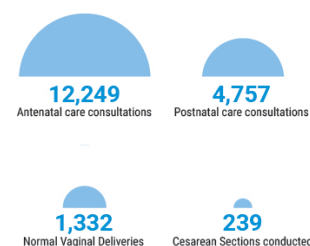
EWARN



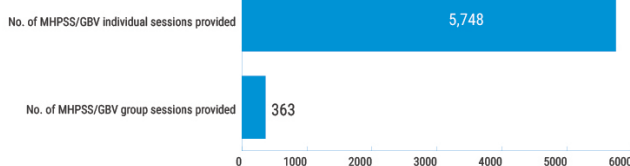
PHYSICAL REHAB OF PATIENTS



REPRODUCTIVE HEALTH



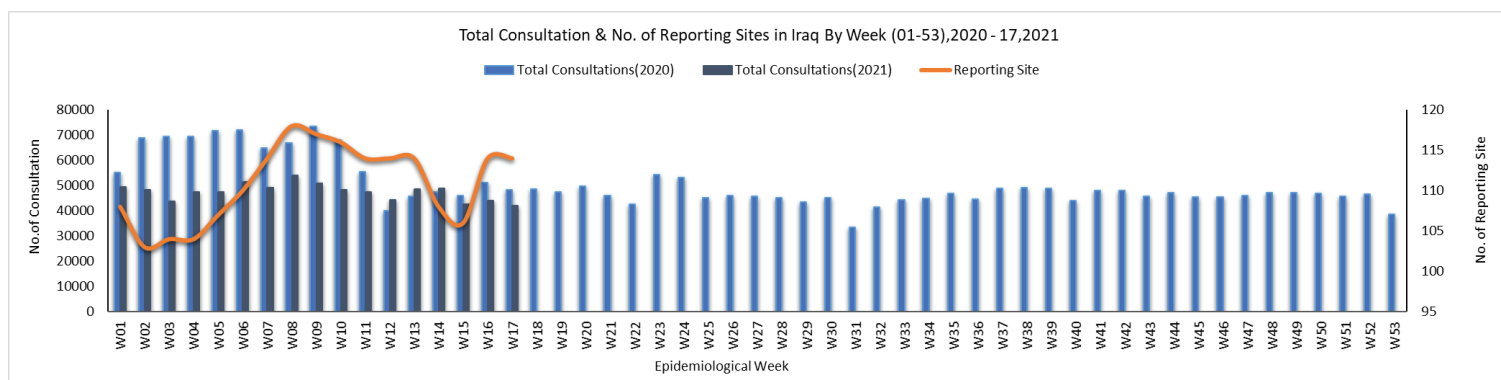
MENTAL HEALTH & PSYCHOSOCIAL SUPPORT SERVICES



CAPACITY BUILDING



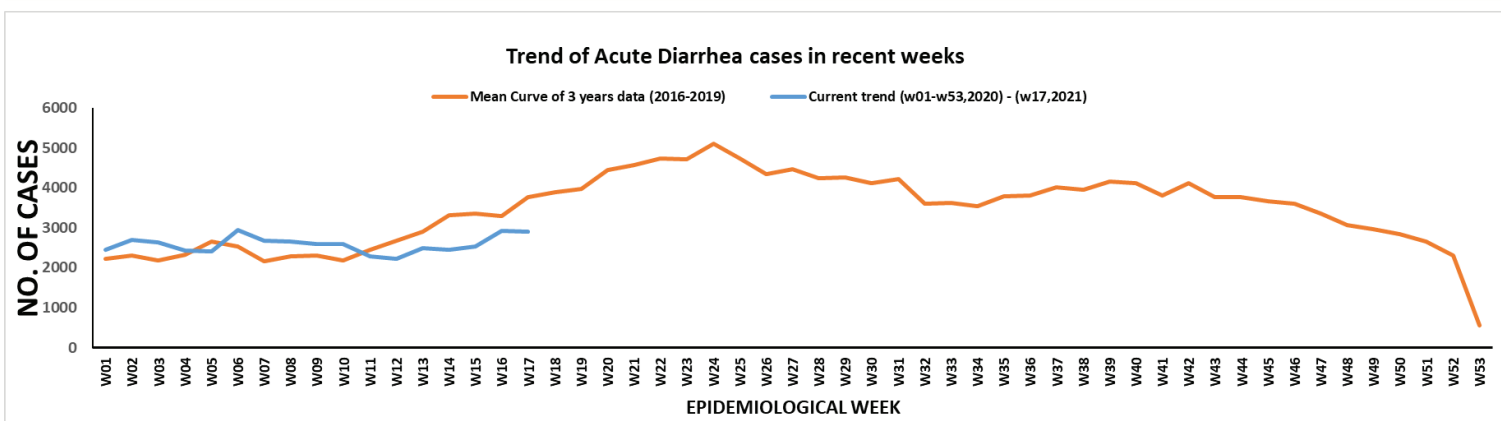
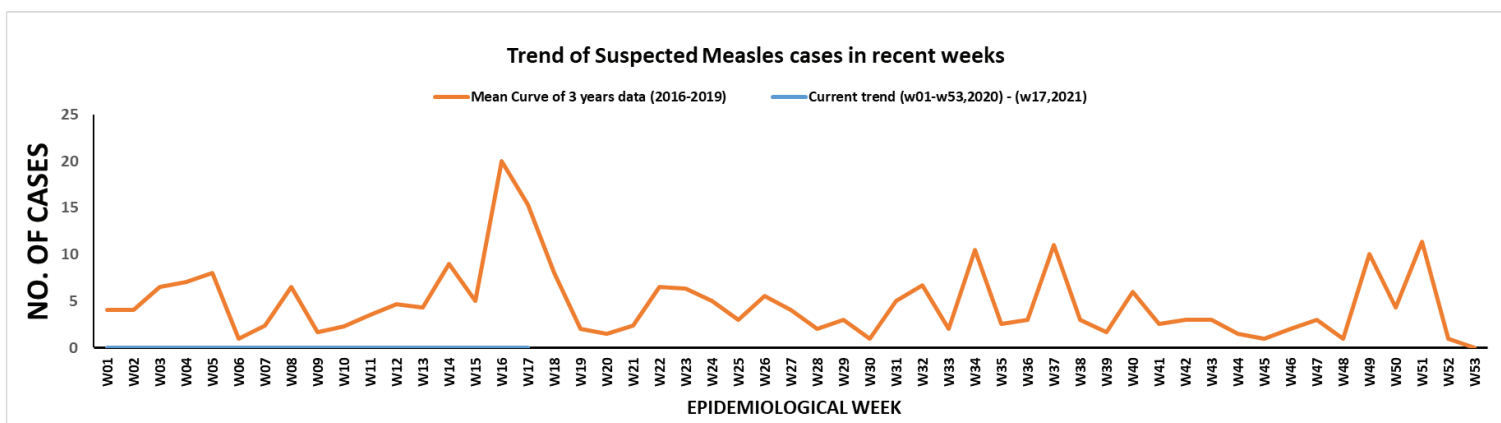
Early Warning Alert and Response Network (EWARN)

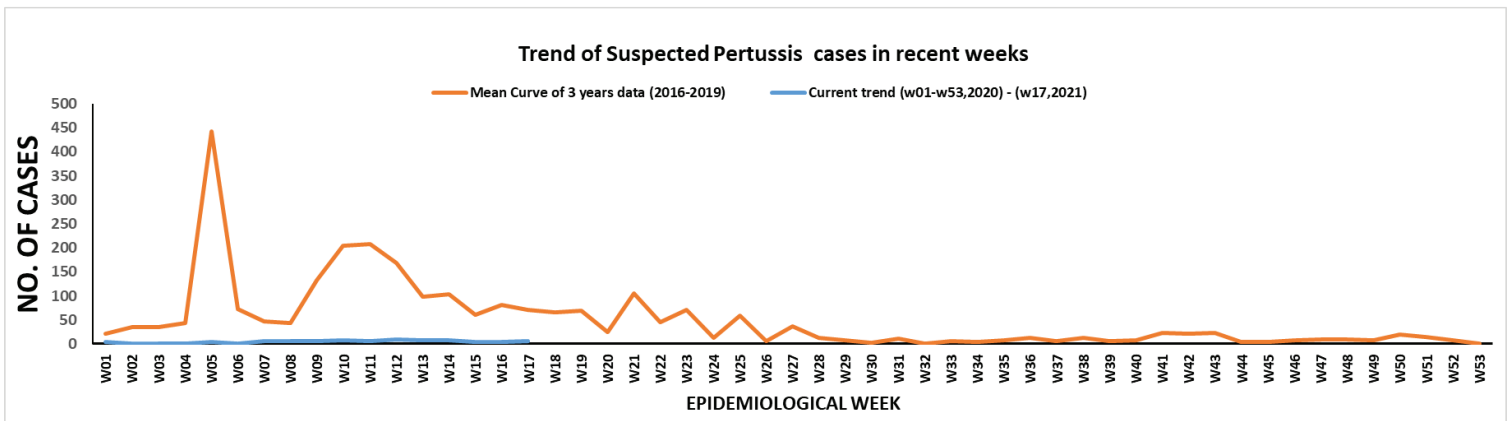
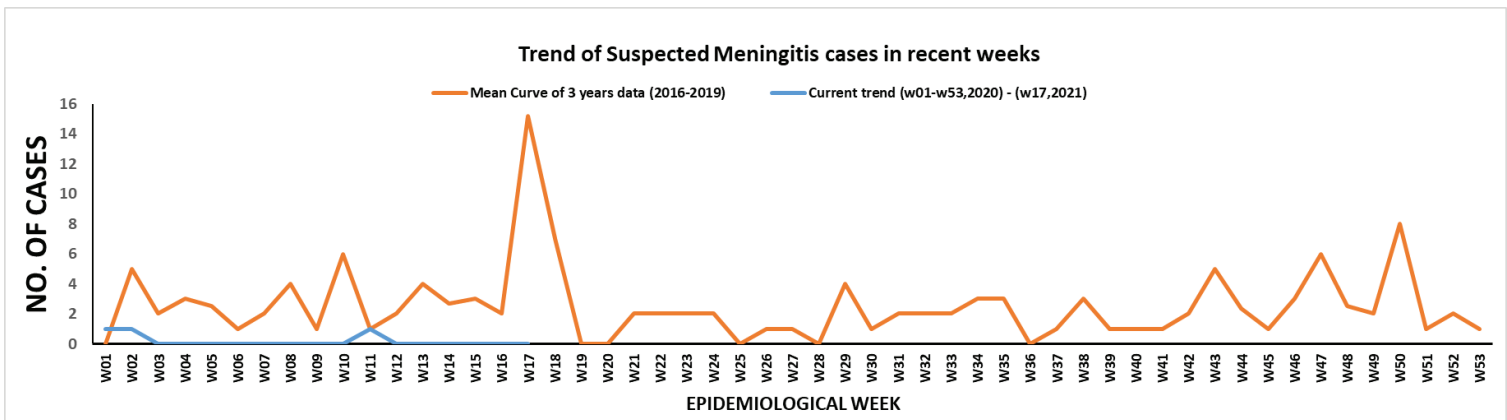
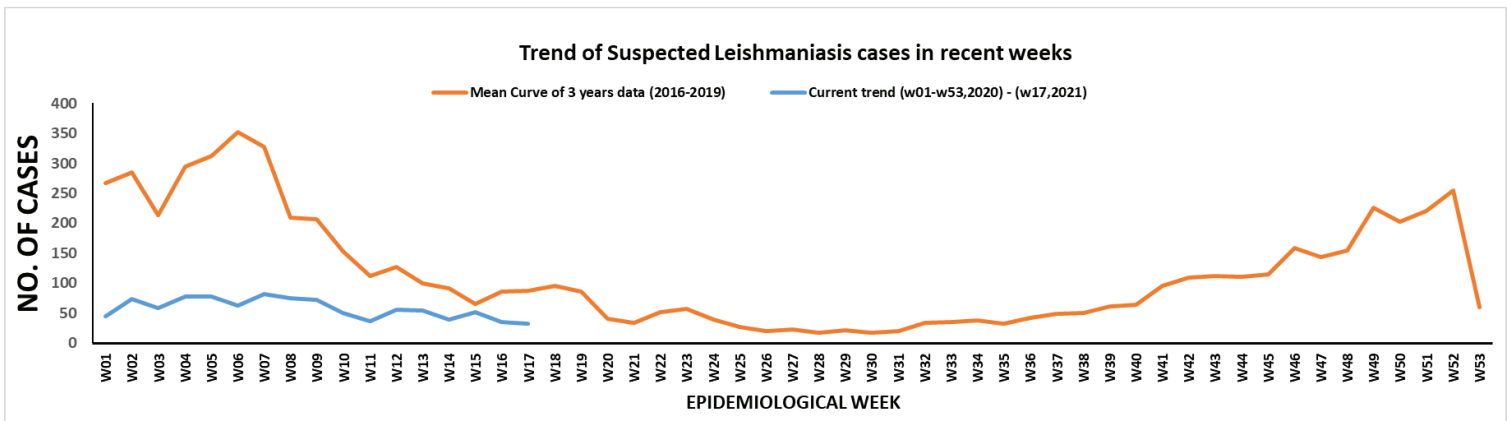
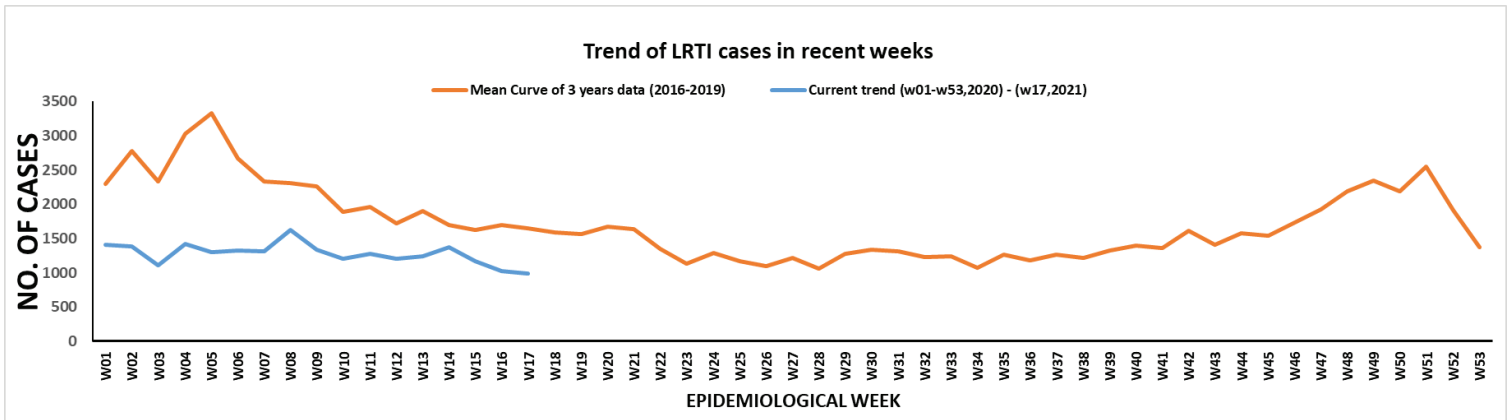


Alerts / Outbreaks - April 2021

Disease	No. of alerts	No. of cases investigated	No. of clinical outbreaks	No. of cases treated	No. of lab confirmed outbreaks	No. of cases treated
Suspected Cholera	0	0	0	0	0	0
Acute Flaccid Paralysis (AFP)	0	0	0	0	0	0
Suspected Measles	0	0	0	0	0	0
Suspected Meningitis	2	2	0	0	0	0
Suspected Diphtheria	1	1	0	0	0	0
Suspected Neonatal Tetanus	0	0	0	0	0	0
Suspected Acute Haemorrhagic fever	0	0	0	0	0	0
Food poisoning	0	0	0	0	0	0
Suspected visceral leishmaniosis	0	0	0	0	0	0
Avian Influenza A	0	0	0	0	0	0
Suspected COVID-19	214	214	0	0	61	61
Suspected tuberculosis	0	0	0	0	0	0
Suspected brucellosis	0	0	0	0	0	0
Typhoid fever	0	0	0	0	0	0
Suspected Anthrax	0	0	0	0	0	0
Total	217	217	0	0	61	61

Disease trend during 2016 - 2020 compared to 2021





Health Cluster

1. Cluster to coordinate with MoH to streamline COVID-19 Taskforce workplan with the national COVID-19 response plan and monitor the progress
2. All cluster partners willing to support the official request for reactivation of OSS to reach out to the Health Cluster/MdM-France about the content of the support letter.
3. Health Cluster to follow up advocacy efforts for Duhok funding for persisting IDPs in the mentioned camps so far being supported by PUI.

MHPSS Update

1. Initiating the drafting of a community-based suicide prevention action plan.
Action plan objectives include:
 - Preventing deaths by suicide and suicide attempts
 - Creating a supportive community environment
2. Developing the GBV strategy for MoH in Iraq is identified as a priority way forward.

Links for cluster dashboards and infographics on www.humanitarianresponse.info

1. Health Cluster meeting minutes: <http://bit.ly/2Kc3IFq>

2. Health Cluster infographics: <http://bit.ly/2I9SZZp>

CONTACTS

Dr. Kamal S. Olleri
World Health Organization
Health Cluster Coordinator
ollerik@who.int
+964 (0) 7740892955

Dr. Demis Arga Lega
Médecins du monde
Health Cluster Co-Coordinator
healthclusterco.coord.iraq@medecinsdumonde.net

Amar Sabah
World Health Organization
Health Cluster IMO
norea@who.int
+964 (0)7740892895

Bakhtyar Khoshnaw
World Health Organization
Health Cluster IM Assistant
khoshnawb@who.int
+964 (0)7740892943