

HEALTH CLUSTER BULLETIN

BULLETIN NO. 6

(June 2020)



Name of the Country: Iraq

Emergency type: Conflict

Reporting period: 01.6.2020- 30.6.2020

- In the last week of May, the Health and Shelter clusters began the coordination to support delivery of a number of tents to WHO to serve as waiting areas for newly arriving IDPs in camps in Dohuk, Erbil, Ninewah and Sulaymaniyah while test results for COVID-19 were pending. The tents were deployed to the sites during June.
- Since UNDP is leading the process to draft a COVID-19 response strategy for Iraq, the Health Cluster Coordinator had a meeting with the Recovery Strategy Adviser of UNDP on 3rd June to provide more information and clarification on the COVID-19 Strategic Preparedness and Response plan (SPRP), developed by WHO with inputs from other agencies, which focused more on the humanitarian aspect of the COVID-19 response.
- The Iraq Humanitarian Fund (IHF) conducted an information/Q&A session on 3rd June on the IHF Strategic/Technical Review Committee (S/TRC) process for the 2020 1st Standard Allocation. The requirements from clusters throughout the allocation process were explained and a briefing on the GMS system was provided. Subsequently, the Health Cluster conducted the Strategic Review Team (SRT) meeting on 11th June 2020 to review/vet the two health projects submitted by partners under the IHF allocation. Both the projects were approved to be moved forward to the Technical Review and subsequent funding. The overall request of the Health Cluster under this allocation is USD 1.47 million to support continuity in service provision to affected population, with focus to the COVID-19 situation.
- WHO Iraq Country Office continued to spread COVID-19 prevention messages through the major Iraqi media channels in order to have as wide an audience as possible. Some of these articles can be found in the links below:
 - <https://www.almirbad.com/detail/53215>
 - <https://www.almirbad.com/detail/53224>
 - <https://www.almirbad.com/detail/53225>
 - <https://alsabaah.iq/26193/>
 - WHO Representative's [interview](#) with CNBC Arabia T.V. channel
 - WHO Representative's [interview](#) with the Iraq Oil Report Newspaper
 - WHO Representative's [interview](#) with Iraqia news T.V. Channel
 - WHO Representative's [interview](#) with Alghad Radio

Humanitarian Response Plan 2020

1.25M Targeted Population **51%** Reached Beneficiaries

29 Partners Reported **17** INGO **12** LNGO

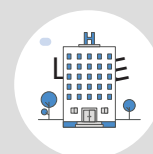
HCO* 1: Avoid preventable morbidity/mortality among 284,505 IDPs out of camps, 324,512 IDPs in camps and 943,948 returnees through provision of essential primary healthcare services, referrals of complicated cases and secondary healthcare services at higher-level facilities.



199K Total Number of Consultations

26K No. of Cases Received Gynaecological Consultations

4K No. of Children Under 5 In Camps IDPS Children Screened For Malnutrition by MUAC or Anthropometric Measures



6K No. of MHPSS Individual Sessions Provided

3K Total No. of Patients attending Secondary /tertiary Hospitals

HCO* 2: Ensure continuation of provision of quality healthcare services to affected & vulnerable populations after handover from cluster partners to the DoH through training of 2,000 health care workers in various topics.



3K No. of Children 9-59 Months Vaccinated Against Measles (Measles-containing Vaccine) In Crises Affected Areas Through Routine Immunization

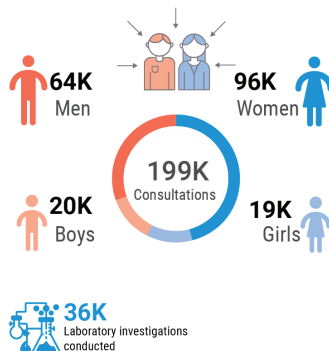
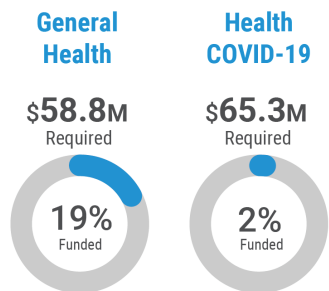
- The Health Cluster provided country-level input on Response Results/Achievements/Challenges to the Global Humanitarian Response Plan document and the Iraq COVID-19 HRP Addendum. It is planned that the update to the GHRP will be launched on 16th July. Input also included an update on the COVID-19 response, including concrete examples of progress and challenges in the response, focusing on results rather than activities.
- The Sulaymaniyah sub-cluster had an urgent meeting with the DoH and CDC manager in the governorate with the purpose of assessing the current COVID-19 situation and necessary steps to be taken due to the rapid increase in the lab-confirmed cases, specifically in Penjween, a location on the border with Iran. The Director General of DoH Sulaymaniyah stated that an MoU would be signed with the Iranian Health authorities based on the International Health & Regulations.
- Given that there were positive COVID-19 cases in camps in Sulaymaniyah (Ashti and Tazade camps), CCCM arranged an emergency meeting on 8th June, including participation of WASH, Health, Protection and OCHA national and sub-national focal persons. The purpose of the meeting was to discuss the response to ensure all key sectoral activities are taking place and to identify as quickly as possible any additional humanitarian support needed.
 - One of the decisions made during the meeting was for a joint mission, comprising WHO, UNHCR and DOH, to be conducted to assess a place near Arbat Refugees Camp to be used as an isolation unit for COVID-19.
- On 8th June, USAID-BHA (previously OFDA) met with the Health Cluster Coordinator to discuss COVID-19 related needs and gaps, in light of the increasing numbers of cases, particularly in the south of the country.
- As part of the Global Health Cluster survey on the funding status for COVID-19, the Iraq Cluster reached out to partners to identify what funding they had received to date for the COVID-19 health response. This information was subsequently shared with the Global Health Cluster for advocacy purposes.
- A meeting between the Emergency Directors' Group and a small group of top humanitarian donors was held in Geneva on 9th June to discuss a number of issues including the GHRP/COVID, with a particular emphasis on the funding of NGO partners and ways in which this can be improved. Iraq contributed to this meeting through provision of information requested by the Global Health Cluster.
- The Global Health Cluster conducted a webinar titled "COVID-19: Integrating GBV into Health Sector Response" on 9th June 2020. Iraq presented a summary of the results of the [rapid assessment](#) of health services available for survivors of GBV during the COVID-19 outbreak, which focused on health workers from Primary Health Care Centers (PHCCs), hospitals and mobile medical clinics (MMC) from 16 districts in Iraq.
- The Iraq Information Center (IIC) reached out to the Health Cluster for advice on distribution of information about the Call Center visibility materials in Basrah governorate, since they were not receiving calls from this governorate. This was considered important to address, particularly in the backdrop of an increasing COVID-19 caseload.
- During June, the Iraq Health Cluster COVID-19 Task Force Planning Group has been in the process of developing a Preparedness and Response Plan for humanitarian settings, which is based on operationalizing the Iraq Country SPRP, while also using the guidance for in-camp preparedness from the [COVID-19 Outbreak Preparedness and Response Operations in IDP camps](#) in terms of setting up of quarantine/isolation sites.
- The Cluster rolled out the health supplies/services mapping exercise to identify the supplies or services provided by the humanitarian partners to the MoH/DoH under the COVID-19 response from the beginning of 2020. The purpose of this exercise is to conduct a gap analysis by comparing it with the expressed needs of the DoH of different governorates. It is planned to update the information on a monthly basis to remain abreast of the updated response by partners.
- The WHO Iraq [COVID-19 Dynamic Infographic Dashboard](#) was updated to include two new pages:
 - Reproduction or growth rate (R_0) for the entire country, each DoH, and each Governorate (page 16)
 - A color-coded heat mapping of the country showing R_0

- The Global Health Cluster conducted the Information Management Technical team (IMTT) meeting on 16th June, to share information on the Public Health Information Services (PHIS) available with different country clusters. Iraq was one of the countries, along with Nigeria and South Sudan, asked to make a presentation on the country-level PHIS.
- The Iraq Shelter Cluster has produced the "[Safety protocol for construction sites in COVID-19 contexts](#)", with the aim of minimizing health related risks for humanitarian programs, under the Do No Harm and AAP principles. The document is inspired by the current shelter programs in Iraq – rehabilitation/upgrade of substandard shelter, including war-damaged residential properties, unfinished/abandoned buildings used by IDPs and returnees as shelter, etc. This document was shared with the Global Health Cluster for information and to be used as a guide for other countries should this be required.
- As part of a global advocacy strategy, the Global Health Cluster has begun publishing web stories from different country clusters on a periodic basis. A web-story on the Iraq Health Cluster GBV response activities during COVID-19 titled "Responding to uptick in GBV in the context of the COVID-19 pandemic" was written during the second half of June and published [here](#). It will also be featured in the Global Health Cluster COVID-19 Updates newsletter that will be distributed on 1st July 2020 at global level.
- The Global Health Cluster Dashboard was updated as of June 2020. The information on this dashboard is absolutely key to present the Health Cluster work to partners and donors, as well as to WHO Health Emergencies Program. The Iraq Cluster provided data to update the [Iraq Country Cluster](#) webpage on the Global Health Cluster website
- Ground Truth Solutions shared their findings from the first round of perceptions surveys on the COVID-19 response, conducted in partnership with the UNOPS Iraq Information Centre. This was circulated through the Health Cluster mailing list to all stakeholders. In addition, seeking feedback and insight from humanitarian staff and volunteers on the response to the COVID-19 pandemic, Ground Truth Solutions also disseminated a survey that, when completed, would help in comparing the perceptions of humanitarian actors with those of the affected population in order to pinpoint concrete areas for response improvement.
- The [Iraq Health Cluster Annual Report 2019](#) was finalized and shared with the MoH in June. Subsequently, it was disseminated to all partners and the Global Health Cluster.
- WHO Eastern Mediterranean Regional Office (EMRO) is conducting a study to assess the role and engagement of the private health sector (PHS) in emergency care systems (ECS) in the region, including in the current COVID-19 response. The survey link was shared through the Health Cluster to all partners. It is envisaged that the findings from Iraq would inform the development of actionable recommendations to enhance the benefit from PHS resources (both for-profit and not-for-profit) in strengthening the national ECS as a whole.
- WHO [launched](#) an awareness campaign on 30th June on COVID-19 prevention measures, targeting densely populated areas in Baghdad which also reported the highest number of COVID-19 cases. The campaign is a social mobilization and community engagement activity where 250 male/female youth (from communities in targeted areas) are being mobilized alongside mobile booths, screens and 2 Mobile Medical Clinics to distribute prevention messages through a variety of ways like flyers, direct explanation by mobile teams or big mobile screens and radio messages, etc.
- The cumulative number of COVID-19 cases in Iraq during June 2020 were **42,670** with **1,738** deaths.

FUNDING INFORMATION¹

TREATMENT OF COMMON DISEASES

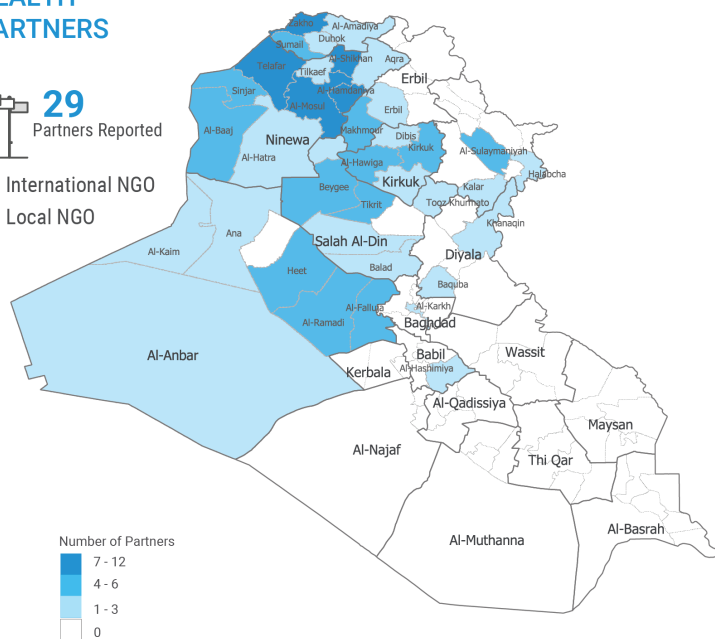
HEALTH PARTNERS



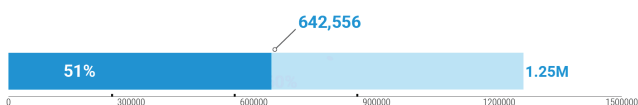
29 Partners Reported

17 International NGO

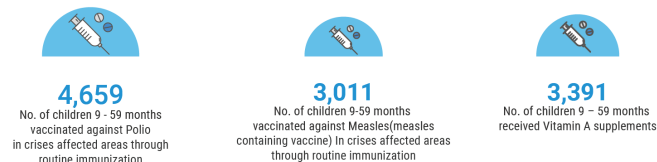
12 Local NGO



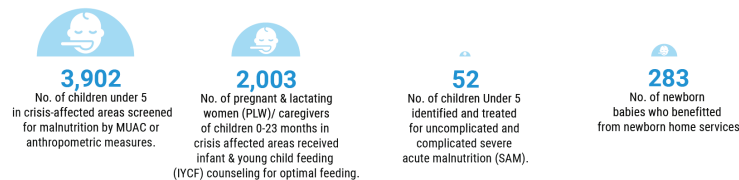
REACHED TARGET



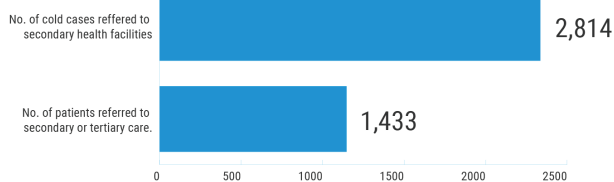
IMMUNIZATION



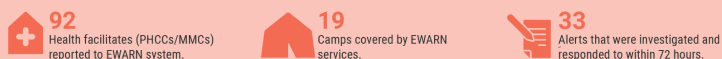
NUTRITION



SUPPORT TO HEALTH FACILITIES



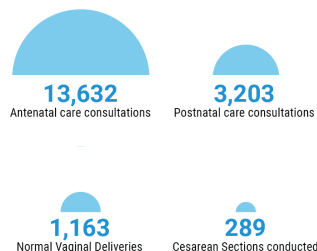
EWARN



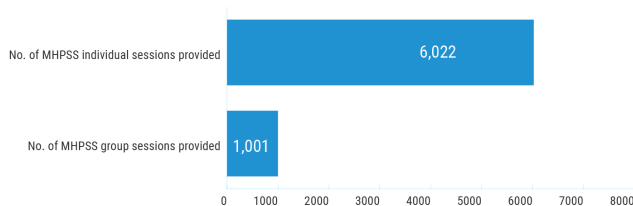
PHYSICAL REHAB OF PATIENTS



REPRODUCTIVE HEALTH



MENTAL HEALTH & PSYCHOSOCIAL SUPPORT SERVICES

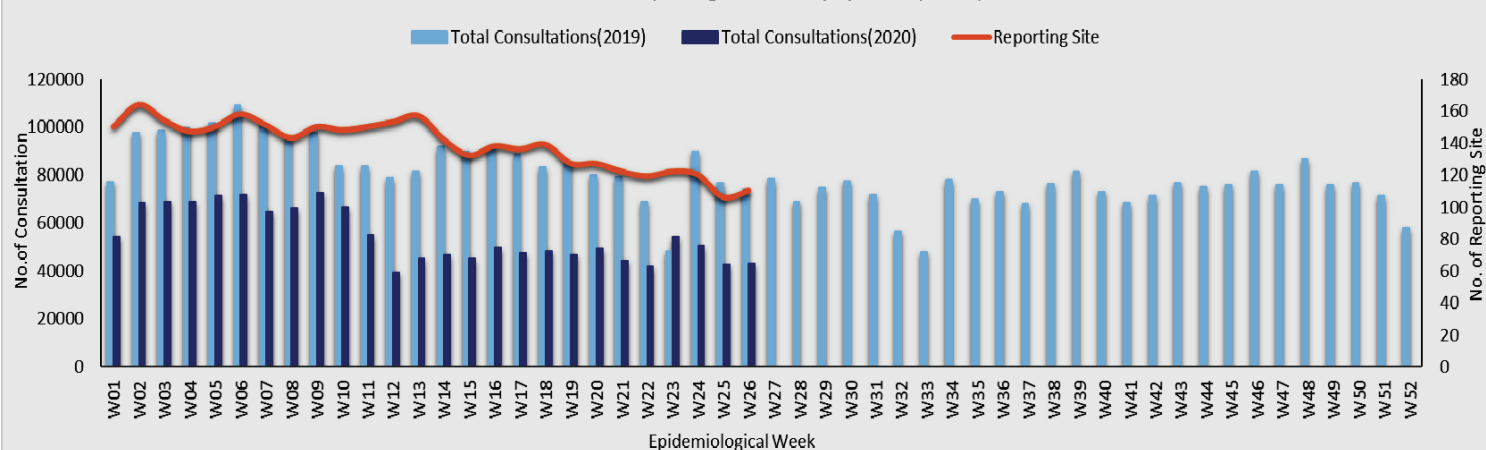


CAPACITY BUILDING



Early Warning Alert and Response Network (EWARN)

Total Consultation & No. of Reporting Sites in Iraq By Week (01-52), 2019 - 26, 2020

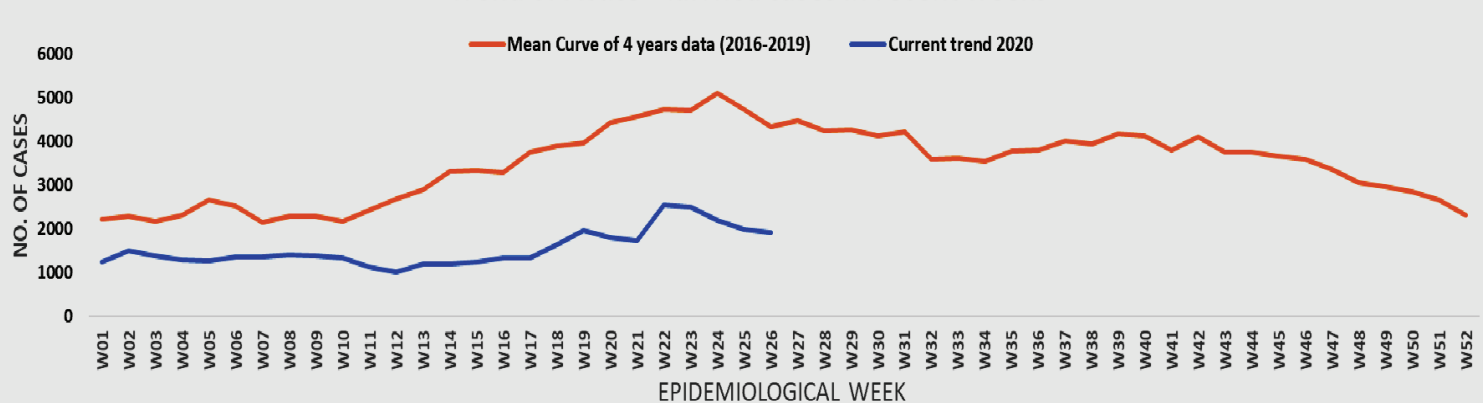


Alerts / Outbreaks - June 2020

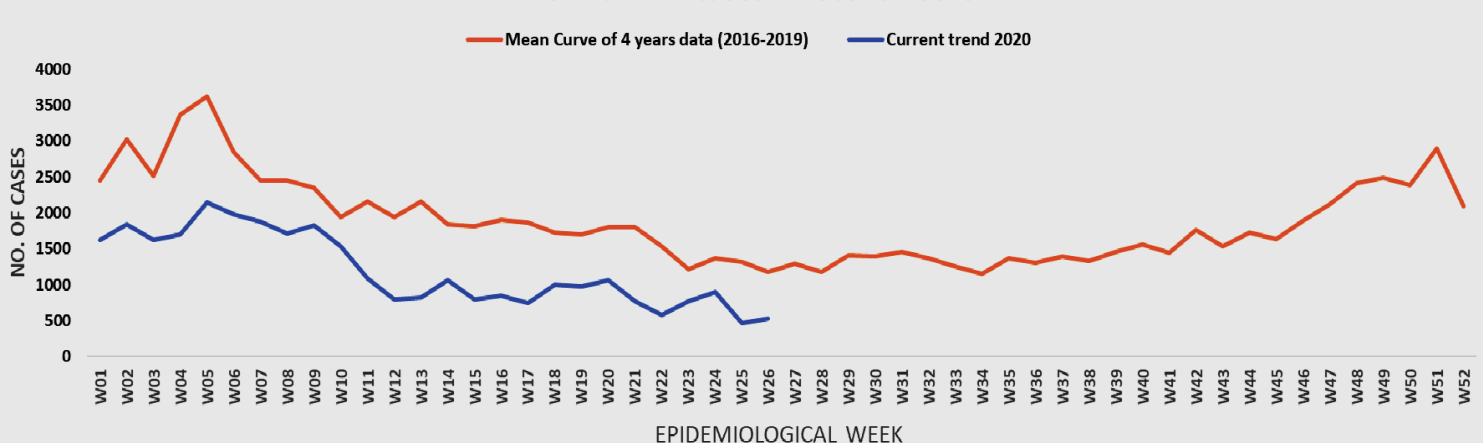
Disease	No. of alerts	No. of cases investigated	No. of clinical outbreaks	No. of cases treated	No. of lab confirmed outbreaks	No. of cases treated
Suspected Cholera	1	1	0	0	0	0
Acute Flaccid Paralysis (AFP)	0	0	0	0	0	0
Suspected Measles	1	1	0	0	0	0
Suspected Meningitis	13	13	1	1	0	0
Suspected Diphtheria	0	0	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 leishmaniasis	0	0	0	0	0	0
Avian Influenza A	0	0	0	0	0	0
Suspected COVID-19	35	35	0	0	1	1
Suspected Tuberculosis	1	1	0	0	0	0
Suspected Anthrax	1	1	0	0	0	0
Total	52	52	1	1	1	1

Disease trend during Jan-Dec 2019 compared to 2020

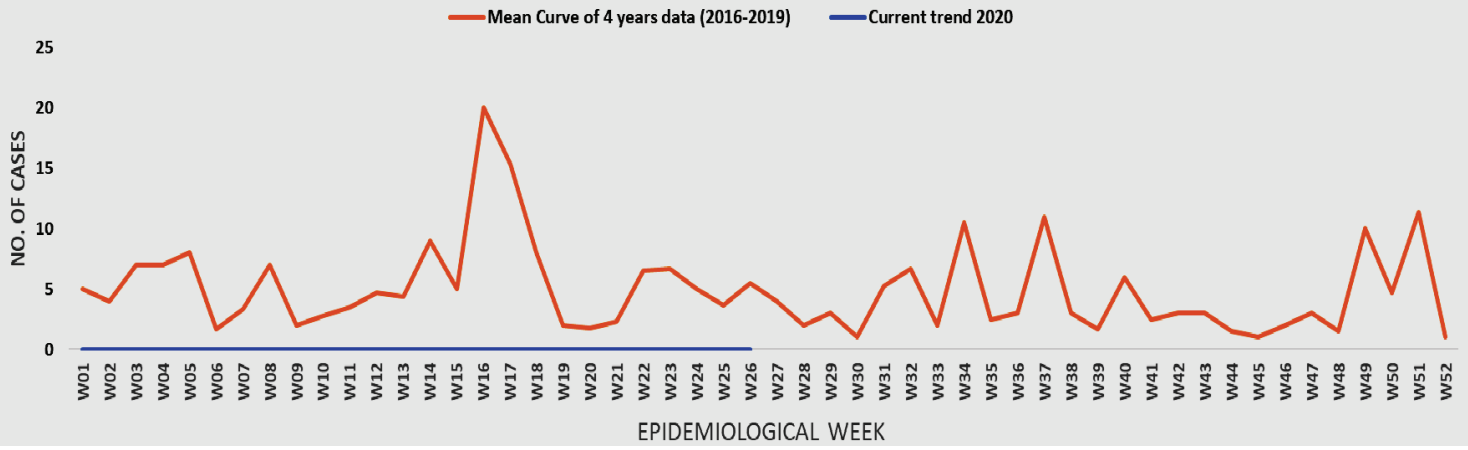
Trend of Acute Diarrhea cases in recent weeks



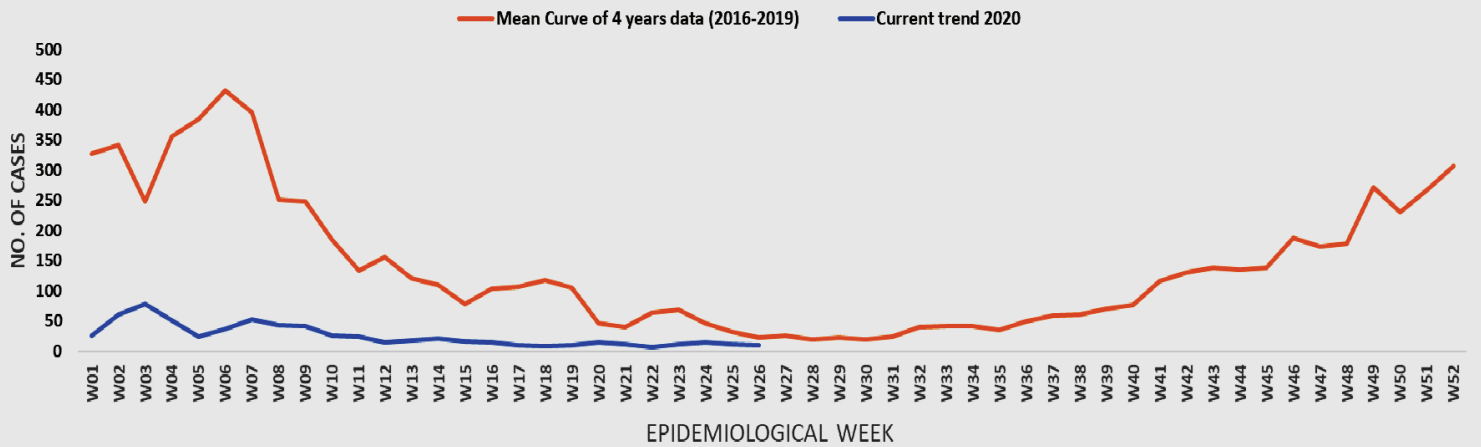
Trend of LRTI cases in recent weeks



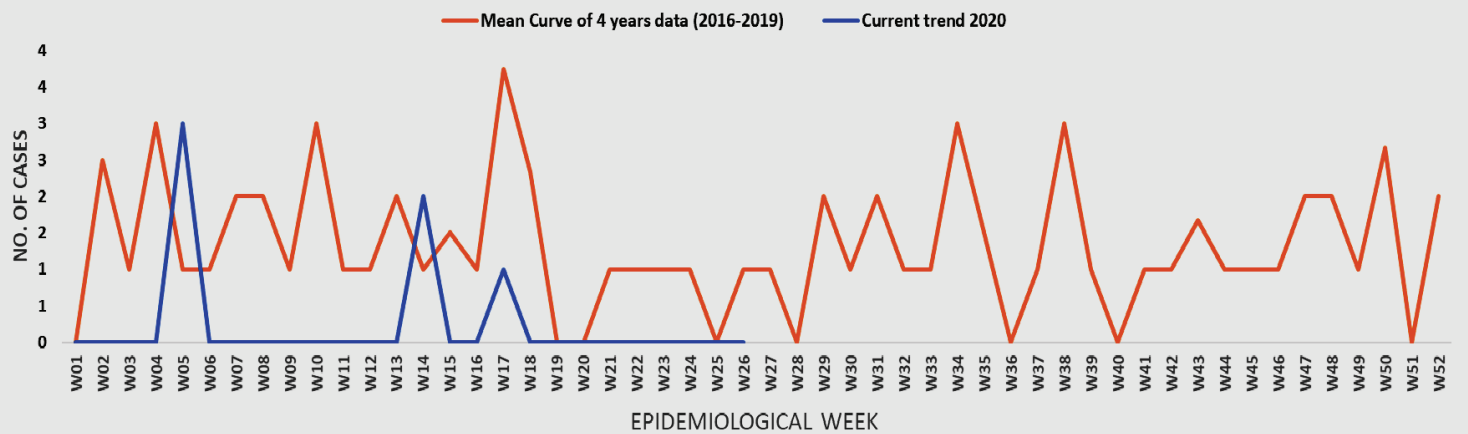
Trend of Suspected Measles cases in recent weeks



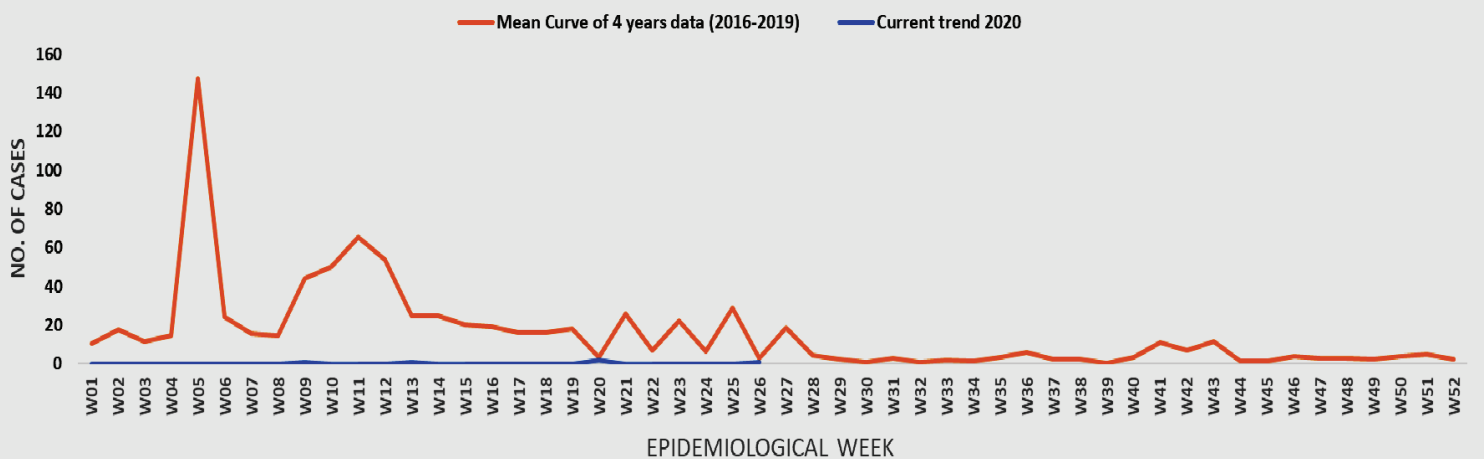
Trend of Suspected Leishmaniasis cases in recent weeks



Trend of Suspected Meningitis cases in recent weeks



Trend of Suspected Pertussis cases in recent weeks



Health Cluster

1. Health Cluster partners supporting the COVID-19 response are requested to reach out to the Cluster IM focal person, Bakhtyar Khoshnaw (khoshnawb@who.int) to receive access to the platform in order to update the reporting dashboard for the service/supplies mapping exercise.
2. Health Cluster/Humanitarian Financing Unit (HFU) to provide feedback on whether it would be possible to change the priority locations in the projects under the IHF 1st Standard Allocation 2020, given that the situation is rapidly evolving due to the COVID-19 outbreak.
 - Follow up: The Cluster has consulted with the IHF and was informed that IHF would like to ensure that all geographical areas targeted under the Allocation remain the priority areas (focusing on out-of-camp and underserved locations). Therefore, any deviation from these locations would not be possible.
 - Nevertheless, if the requested changes fall within these parameters and if the Cluster considers the change operationally relevant, partners can make adjustments in consultation with both the Cluster and IHF

Reproductive Health

1. Procurement of supplies continues to be difficult due to extended port closures. This is in addition to the price of items being doubled/tripled in the local market.
2. So far, no pregnancy cases have been complicated due to COVID-19 infection. In Erbil, the cases reported were treated and normal deliveries took place.

MHPSS

1. MHPSS Suicide Committee has made all the arrangements to identify journalists to be trained on how to responsibly and sensitively report on suicide without victimizing or blaming the survivors.
 - Azhee NGO will provide the first round of the training this month.
2. MHPSS Capacity Building and Human Resources Management committees held a meeting to share experience about the capacity building activities during COVID-19 crisis

Nutrition

1. Nutrition services are being provided for children in all camps.
2. All staff have the required PPE equipment to ensure their safety during work.

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>

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