



### 33,409 consultations are provided to the Syrian Refugees in primary health care services

#### APRIL HIGHLIGHTS:

- In Sulaymaniyah and Duhok high level Inter-sectoral committees were established by the Governor's Office which will take the lead in preparing for and responding to any possible outbreak of Cholera. Cholera is endemic in KRI, the last outbreak occurred in 2012.
- A task force was formed to standardize reporting and investigation of neonatal deaths. Results of the investigations will contribute to the planning and adjustment of the health sector response.
- IMC completed its health project in Qushtapa and Basirma refugee camps. Services will continue to be provided by DoH Erbil with financial support from WHO.
- UPP conducted a 2 days Training of Trainers 11 local social workers and educational psychologist. Topics focused on the establishment of resilience groups and psychological first aid (PFA).

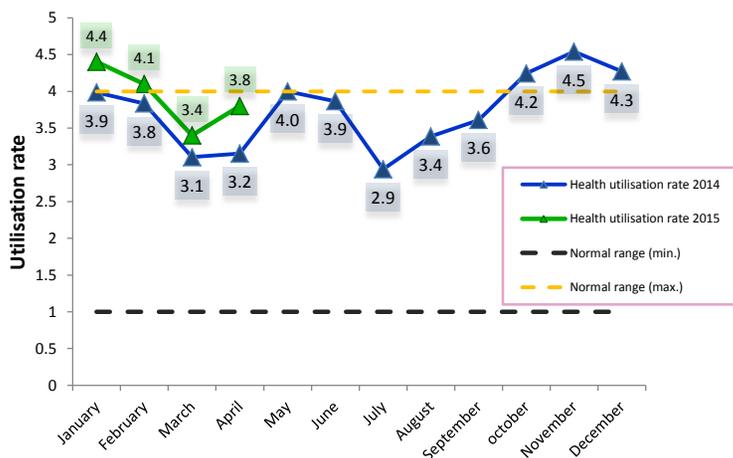


Vaccination of new arrivals at Ibrahim Khalil Border point, Duhok. UNHCR/ R. Rasheed

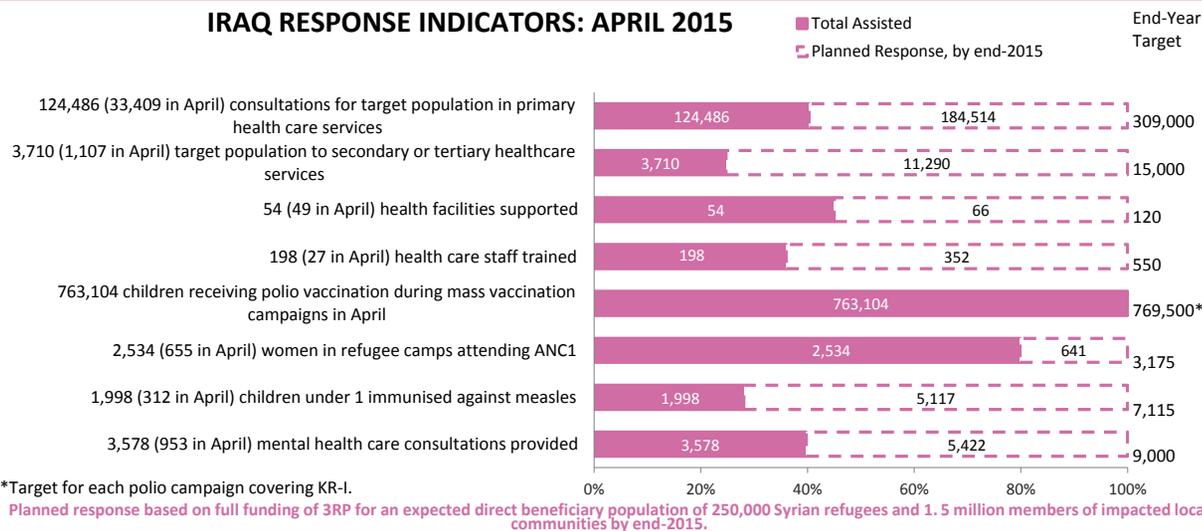
#### NEEDS ANALYSIS:

- Continued support for health care services provided by the Ministry of Health and humanitarian actors is a key priority to prevent excess morbidity and mortality among the displaced Syrian populations.
- With the onset of summer, control of communicable diseases needs to be strengthened further in close cooperation with other sectors.
- Access to health care services for non-camp populations needs to be further strengthened. Drug shortages remain a key concern in public health facilities. Lack of awareness on available health services and insufficient health knowledge impact health seeking behaviour. Access to mental health and psychosocial care services remains an area in need of further support for both camp and urban refugee populations.

#### Monthly health care utilisation rates 2014/ 2015



#### IRAQ RESPONSE INDICATORS: APRIL 2015



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