



31,695 consultations are provided to the Syrian Refugees in primary health care centers

OVERVIEW:

Health services in refugee camps continue to be provided by Directorate of Health (DoH) and INGOs with support from UN agencies. The handover process of camp based PHC from INGOs to DoH is going smoothly, UN agencies will continue to support DoH to provide primary health care services. Irregular payment of salaries for medical staff as well as shortage of medicines, particularly at secondary and tertiary facilities due to the ongoing financial crisis in Kurdistan region of Iraq affects the provision of health services. However, Syrian refugees have access to health services including curative and preventive services. Monitoring of disease outbreaks is ongoing, no disease outbreak has been registered so far.

NOVEMBER HIGHLIGHTS:

- 26,301 patient consultations were conducted in camp based Primary Health Care (PHC) during November (source UNHCR HIS-Health Information System). Health Utilization rate (visits/person/year) is 3.9 which lies within the expected range of 1- 4. Major causes for patient consultations during November; Upper Respiratory Tract Infections, Gynecological diseases, Urinary Tract Infection and Skin infections. 1, 358 patients were referred to secondary and tertiary hospitals for further investigations and/ or hospitalization. 925 patients attended mental healthcare services in camps.
- UNICEF delivered a shipment of essential antibiotics, analgesics and dermatologic medicines which are necessary for management of more than 25,000 children. The medicines were delivered to camp based PHCC in all refugee camps across KR-I.
- In Duhok governorate, the handover of Gawilan camp PHC from Première Urgence Internationale (PUI) to DoH-Duhok is ongoing smoothly, the process will be completed by end of 2016. DoH-Duhok will run Gawilan camp PHC in 2017 with support from UNHCR.

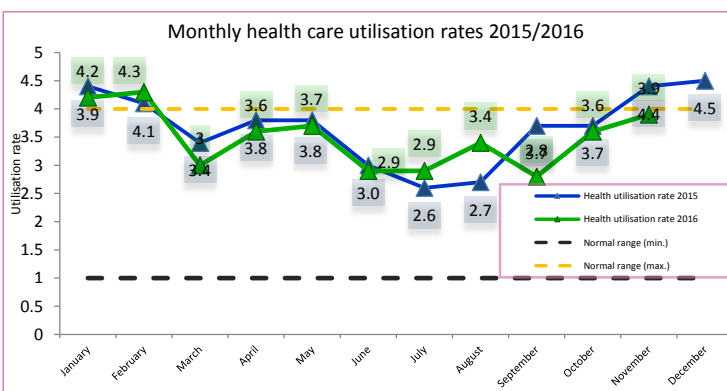
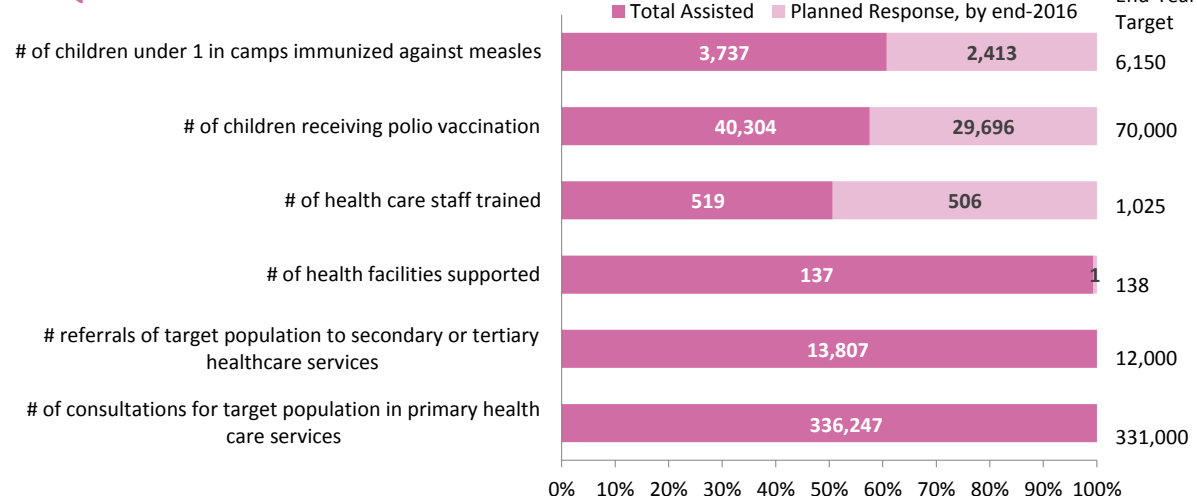


DoH Medical doctor provides counseling for a patient, Kawergosk camp PHC, Erbil

NEEDS ANALYSIS:

- Irregular payment of salaries has impacted provision of health services particularly at secondary and tertiary levels.
- Shortage of qualified staff for health care provision.
- transportation of medical waste from camp PHC to hospital, especially in Erbil.
- Shortage of medicines in public health facilities, particularly at secondary and tertiary facilities.

IRAQ RESPONSE INDICATORS: NOVEMBER 2016*



Leading Agencies:

Ministry of Health (MoH - KRI)
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World Health Organization



*Planned response based on full funding of 3RP for an expected direct beneficiary population of 250,000 Syrian refugees and 1.5 million members of impacted local communities by end-2016. By 30 November 2016, 228,894 Syrian refugees (74,984 households) live in Iraq. 38.9% = 89,039 live in 10 camps and 61.1% = 139,855 in non-camp/urban areas. 97% = 220,950 live in Kurdistan Region-Iraq (KR-I): in Erbil Duhok and Sulaymaniyah and 3% = 7,944 live in other locations in Iraq.