



TECHNICAL BRIEF

USAID/PHCP Activities Focus on the Health Needs of Internally Displaced Persons (IDPs)

The USAID-funded Primary Health Care Project in Iraq (PHCPI) is working to improve health services for internally displaced persons (IDPs) in Iraq. PHCPI developed tailored interventions to target displaced persons and increase their use of quality primary health care services and ensure that they are adequately covered by strengthened primary health care clinics (PHCCs) in the target regions. PHCPI is working to safeguard IDPs' health and social support needs, especially for women and children.



PHCPI IDP outreach activity in Dohook

Background

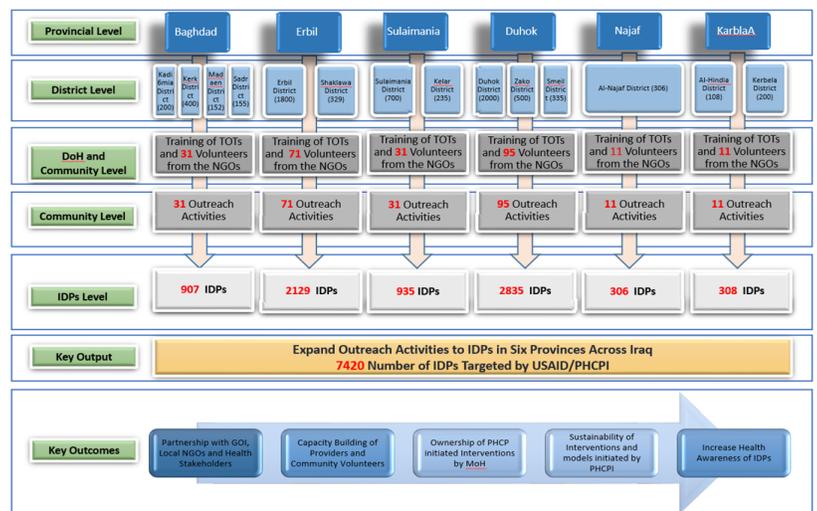
The Internal Displacement Monitoring Centre (IDMC) estimates that the number of Iraqi internally displaced since January 2014 has exceeded 2.18 million. Increased armed conflict across the central provinces of Iraq, and constantly changing security conditions, have resulted in new and secondary movements of IDPs across central Iraq and Kurdistan. The deterioration of the security environment will continue to add additional burdens to the Ministry of Health (MOH) and all these events have placed a great strain on the Governorates' public services - education, health care, and infrastructure and will continue to add additional burdens to the Ministry of Health (MOH).

Many of the displaced live in substandard conditions and lack basic services, increasing their risk of disease. IDPs are in urgent need to access health care. The dire living conditions of the IDPs together with the poor water and sanitation conditions are contributing to increased health problems and the high risk of outbreaks.

From its inception, PHCPI has been designed to strengthen the Iraqi health sector's capacity to benefit the population as a whole; increasing access to health coverage for key vulnerable populations such as children under five, pregnant women as well as IDPs. As part of these efforts, in 2012 PHCPI surveyed the largest IDP settlements in various regions of Iraq to gain a better understanding of the health-related needs of this population. Based on the survey results, PHCPI has worked to increase IDPs' knowledge and access to quality reproductive and child health care services with the goal of reducing short- and long-term maternal and child morbidity and mortality (United Nations Millennium Development Goals 4 & 5). Among the IDP population, PHCPI will place special focus on pregnant IDP women, children under five, and women or caregivers with children under the age of five.

Methodology

PHCPI, jointly with the MOH, finalized the outreach methodology for providing health awareness sessions to IDP families and accessing key vulnerable IDPs. There are 296,856 IDP families in PHCPI's six target governorates (Erbil, Sulaimaniyah, Najaf, Baghdad, Dohuk and Karbala) and PHCPI will target 2.5%, or 7,420 of all IDP families, allowing PHCPI to access over 37,000 IDPs. Two hundred and fifty outreach activities are required to reach all 7,420 families.



In order to reach the IDPs, PHCPI, with the MOH, conducted 8 orientation workshops for health volunteers. During outreach activities over two hundred health volunteers cover key topics and messages related to maternal and child health, personal hygiene and protection from communicable diseases such as polio, measles and cholera.

PHCPI worked jointly with the MOH to develop guidelines on health topics of importance to IDPs including Prevention and Control of Communicable Diseases, Maternal and Child Health, Trauma, Non-Communicable Diseases, and Mental Health, to be used during IDP outreach activities.

PHCPI completed the process of editing, formatting and designing IDP guidelines for Basic Health Promotion Services, Psychological First Aid and Gender-Based Violence in English, Arabic and Kurdish.



Health Volunteers provide vulnerable populations with health awareness materials

These guidelines were prepared by PHCPI in an effort to assist the MOH address the health needs of IDPs in order to have widely agreed upon standards for use in Iraq in which people leave their homes due to wars and internal conflicts. They are designed, as a first step, to create awareness and sensitization among health care professionals and community workers who interact with those impacted by conflict, especially IDPs and refugees, and have a position in which they can contribute to the assistance of survivors.

Involving health volunteers from the IDP communities has been crucial in ensuring sustained and extended reach of health messages to those in need of health care, as well as providing moral support during this difficult time.

Fieldwork

In May 2014, health volunteers conducted health awareness workshops in the selected IDP camps and one woman was invited from each family within the camps to participate. Around 40 women attended each of these workshops and received IDP orientation handouts developed by PHCPI. Following each session, health volunteers distributed hygiene kits including wound plaster, bandages, sterilized cotton, sterilizing agent, toothpaste, and toothbrushes, among other health care items to each attendee. These kits were supplied by PHCPI to motivate IDP families to adopt sanitary habits within their daily routines. Information, Education, and Communication (IEC) materials on Maternal and Child Health were also distributed to participants in some of workshops.

PHCPI is using project-developed training materials while rolling out IDP guidelines to local NGOs (see Table) and health volunteers. PHCPI trained 41 MOH Health Promotion Unit staff on these guidelines, who in turn trained NGO members and health volunteers from target provinces.

PHCPI worked closely with the MOH to identify volunteers from the NGOs who participated in the MOH Health Promotion Unit trainings and conduct IDP awareness sessions in the targeted communities, training 206 health volunteers.

The orientation workshops, conducted for NGOs working in the targeted provinces, provided relevant health information and appropriate methods for reaching IDPs. Participants learned about health messages to raise IDPs awareness of relevant health issues and ways to improve their health.

Local NGO	Province
Mercy Hands	Baghdad
We Do Help	Najaf
Women for Justice	Karbala
Sarwary Mass Organization	Sulaimania
Shingal League	Duhok
Mart Shmoni Church	Erbil
Yazidi Solidarity and Fraternity League	Erbil



By reaching the male heads of families, PHCPI is ensuring the spread of these messages throughout the IDP community,

The workshops familiarized attendees to the IDP guidelines developed and finalized by both the MOH and PHCPI. Additionally, participants learned how to provide psychological first aid for IDPs to help them to overcome adversity and difficulties that they are experiencing among the IDP population. The health volunteers are conducting outreach activities for IDPs in the six-targeted provinces for improved health and support. **As of January 2015, more than 345 outreach activities were performed by PHCPI with nearly 10,356 IDP families receiving health promotion materials, including IDPs targeted by the project before September 2014. PHCPI plans to reach at least 6,000 IDP families (30,000 IDPs) in the targeted provinces by February 2015.**

Achievements to Date

- ◆ Raised IDP awareness regarding the main health problems and concerns of children under the age of 5 and women's health.
- ◆ Encouraged IDP families to adopt basic hygiene within their daily routines.
- ◆ Strengthened the link between primary health care centers and the community.
- ◆ Trained 206 health volunteers on PHCPI-developed guidelines and health messages to use at outreach activities.
- ◆ Conducted 167 outreach activities in January 2015.
- ◆ Reached 10,356 IDP families health volunteer outreach activities in Baghdad, Maysan, Karbala, Najaf, Erbil, Duhok and Sulaimania.
- ◆ Finalized three IDP Guidelines on Basic Health Promotion Services, Psychological First Aid and Gender-Based Violence in English, Arabic and Kurdish.
- ◆ Developed IDP health messages in the form of brochures and leaflets that concentrate on concentrate on key chronic and communicable diseases, maternal and child health, proper nutrition, food safety, and ways to avoid food poisoning.

Impact

Currently, IDPs represent some of the most vulnerable among the Iraqi population. PHCPI, in an effort to assist the MOH address the health needs of IDPs, is working to create awareness and sensitization among health care professionals and community workers who interact with those impacted by conflict, especially IDPs and refugees, and have a position in which they can contribute to the assistance of survivors. Additionally, the guidelines will help to standardize response efforts across Iraq allowing for more cohesive and consistent support for IDPs. While PHCPI's goal is to reach between 4,000 and 6,000 IDP families through outreach activities, the IDPs' enthusiasm to share their knowledge will allow the health messages to reach far more families.

Provinces Targeted by USAID/PHCP Outreach Activities for IDPs 2014-2015

PRIMARY HEALTH CARE PROJECT

Duhok Area 6553 km2, total population 1180158
18 PHCCs (IDPs are registered at all clinics as normal visitors)
Total population in the catchment area of the PHCCs 133040
Number of IDPs in the province 571084
No. of IDPs in the catchment area of the PHCCs 230
No. of IDPs families reached by project

Ninawa Area 37323km2, total population 3438104
22 PHCCs (IDPs are registered at all clinics as normal visitors)
Total population in the catchment area of the PHCCs 794946
Number of IDPs in the province 6439
No. of IDPs in the catchment area of the PHCCs 300

Kirkuk Area 9679 km2, total population 1470167
14 PHCCs (No information of IDPs at all clinics)
Total population in the catchment area of the PHCCs 116176
Number of IDPs in the province 244352
No. of IDPs in the catchment area of the PHCCs No Information

Salah-Aldin Area 24363km2, total population 1474882
17 PHCCs (No information of IDPs at all clinics)
Total population in the catchment area of the PHCCs 205213
Number of IDPs in the province 29029
No. of IDPs in the catchment area of the PHCCs No Information

Anbar Area 137808 km2, total population 1636831
20 PHCCs (No information of IDPs at all clinics)
Total population in the catchment area of the PHCCs 254100
Number of IDPs in the province 307564
No. of IDPs in the catchment area of the PHCCs No Information

Baghdad Area 4555 km2, total population 7457773
40 PHCCs (4 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 1700150
Number of IDPs in the province 196463
No. of IDPs in the catchment area of the PHCCs 823
No. of IDPs families reached by project

Karbala Area 5034 km2, total population 1122400
23 PHCCs (13 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 536523
Number of IDPs in the province 61661
No. of IDPs in the catchment area of the PHCCs= 21000
No. of IDPs families reached by project

Najaf Area 28824 km2, total population 1354180.
20 PHCCs (2 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 789617
Number of IDPs in the province 60153
No. of IDPs in the catchment area of the PHCCs 40183
No. of IDPs families reached by project

Muthanna Area 51740 km2, total population 753024
20 PHCCs (6 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 294361
Number of IDPs in the province 4272
No. of IDPs in the catchment area of the PHCCs 850

Erbil Area 15074 km2, total population 1703243
19 PHCCs (IDPs are registered at all clinics as normal visitors)
Total population in the catchment area of the PHCCs 565561
Number of IDPs in the province 403960
No. of IDPs in the catchment area of the PHCCs 500
No. of IDPs families reached by project

Sulaymaniyah Area 17023 km2, total population 1944007
20 PHCCs (IDPs are registered at all clinics as normal visitors)
Total population in the catchment area of the PHCCs 342461
Number of IDPs in the province 194047
No. of IDPs in the catchment area of the PHCCs 500
No. of IDPs families reached by project

Diyala Area 17685 km2, total population 1512737
17 PHCCs (No information of IDPs at all clinics)
Total population in the catchment area of the PHCCs 325720
Number of IDPs in the province 37957
No. of IDPs in the catchment area of the PHCCs No Information

Wasit Area 17153 km2, total population 1271708.
18 PHCCs (9 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 387465
Number of IDPs in the province 24363
No. of IDPs in the catchment area of the PHCCs= 3775

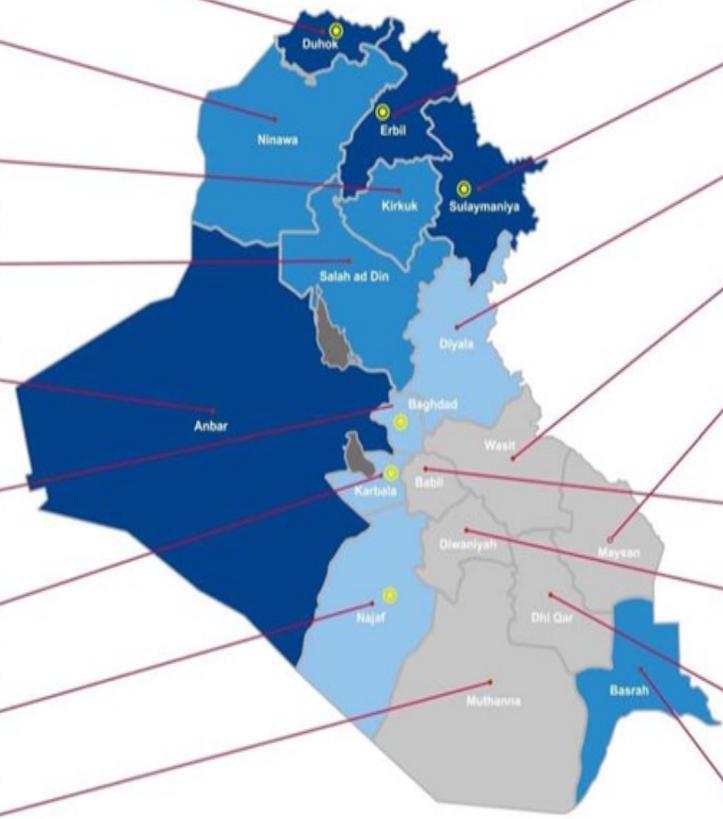
Mayaan Area 16072 km2, total population 1023690.
18 PHCCs (14 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 458758
Number of IDPs in the province 4753
No. of IDPs in the catchment area of the PHCCs 1220

Babil Area 5119 km2, total population 1908214
19 PHCCs (No information of IDPs at all clinics)
Total population in the catchment area of the PHCCs 388793
Number of IDPs in the province 44323
No. of IDPs in the catchment area of the PHCCs No Information

Diwaniyah Area 8153 km2, total population 1191106.
20 PHCCs (18 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 697373
Number of IDPs in the province 13821
No. of IDPs in the catchment area of the PHCCs 3273

Dhi-Qar Area 12900 km2, total population 1930635
20 PHCCs (2 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 753731
Number of IDPs in the province 7686
No. of IDPs in the catchment area of the PHCCs 158

Basrah Area 19070 km2, total population 2572425.
15 PHCCs (1 PHCCs of IDPs)
Total population in the catchment area of the PHCCs 491500
Number of IDPs in the province 8122
No. of IDPs in the catchment area of the PHCCs 500



References
Area and Total Population / MoH Report 2013
PHCCs Selected by USAID/PHCP
Total Population in the Catchment Area of the PHCCs / MoH Report 2013
No. of IDPs in the Province / WHO report on IDP through Nov 18, 2014

 Provinces with IDPs population targeted by USAID/PHCP
 1 to 30000 IDPs
 30000 to 50000 IDPs
 50000 to 100000 IDPs
 100000 to 500000 IDPs