Health assessment in refugee camps around Mosul, Iraq

Mohamad Haidar, Epicentre, France

Introduction
The war in Mosul, Iraq has led to mass population displacement, with almost 300,000 individuals residing in camps neighboring the city. Malnutrition assessments revealed prevalence rates beneath emergency thresholds for children 6-59 months old. However, data from the intensive therapeutic feeding centre (ITFC) in Médecins Sans Frontières (MSF) hospital is suggestive of a different trend of malnutrition, undetected by these assessments. Almost 95% of the children admitted are under the age of one with the majority being under six months. The aim of this study was to estimate the prevalence rate of malnutrition among both age groups, as well as the barriers to feeding.

Methods
An exhaustive malnutrition assessment was conducted in three major camps. Severe acute malnutrition (SAM) criteria were considered by age groups as: i) Weight-for-age z-score≤-3 or MUAC<110 mm for children 1-6 months and ii) MUAC <115 mm for children 6-11 months. Moderate acute malnutrition (MAM) was considered for children 6-11 months with a MUAC between 115-124 mm. The barriers to feeding were assessed qualitatively using a complementary approach.

Results
Preliminary results from the screening of 958 children under the age of 12 months in two sectors of one camp revealed that the overall proportion of SAM, according to the criteria used, has reached 14.1% (n=141).

Conclusion
Preliminary results of the study are suggestive of a large burden of malnutrition among children under the age of 12 months. Importantly, this study also reveals a trend of malnutrition among children less than six months of age, highlighting gaps in case management and treatment of these patients. As a response to these results, MSF reoriented the operational strategy to establish an ambulatory therapeutic feeding center (ATFC), increase the ITFC bed capacity in Qayyarah hospital, and adapt medical protocols for treatment of these children.

Despite all the screening conducted in IDP camps in Iraq, a trend of malnutrition went undetected among children under the age of 6 months. The operational implications of this trend include ambulatory or in-camp interventions in addition to adaptation of case-management and treatment of hospitalized children.