



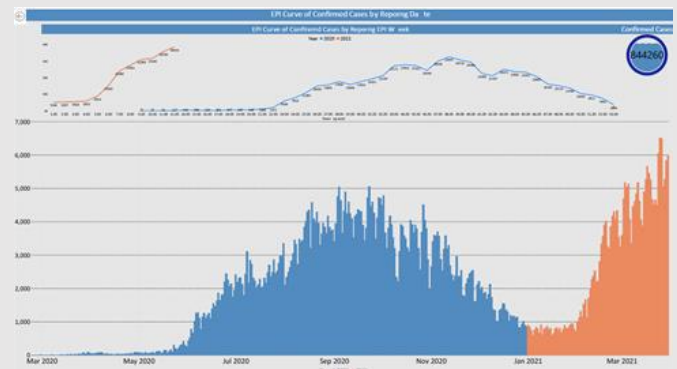
**Key figures of COVID-19 as of 28 March 2021**

	Recorded in the last 24 hours	Weekly (WK 12)	Cumulative Since 24 February 2020
<b>Tested</b>	41,897	254,049	7,908,378
<b>Confirmed</b>	5,837	38,536	832,428
<b>Active</b>		38,514	72,281
<b>Cured</b>	4,500	30,862	745,935
<b>Death</b>	37	205	14,212

**Highlights**

- During Wk12, a total of 254 049 cases, including associated 205 deaths, were reported from all the governorates in Iraq
- The positivity rate during this week is 15%, marking continuity of community transmission<sup>1</sup> of the COVID-19 pandemic.
- Iraq received 336,000 doses of COVID-19 vaccines AZD1222 (Astra Zeneca) through COVAX facility on Thursday, 25 March 2021.
- The Expanded Programme for Immunization (EPI) department at the Ministry of Health together with WHO organized a meeting with Health Directorates and EPI managers from all governorates of Iraq, with the aim to prepare for implementing the COVID-19 vaccination roll-out plan on 24 - 25 March.
- The first orientation workshops for journalists, media managers, and spokespersons, organized in collaboration between the MOH Iraq and WHO. The workshop ambitioned to build a strong and continuous partnerships between media practitioners, Iraq health authorities and WHO.
- A Risk Communication and Community Engagement campaign to ensure the success of the vaccination campaign was launched during the media orientations.

**Graph 1: Epidemiological curve of confirmed cases by reporting date**



Data source: Ministry of Health, Iraq  
For more information on the COVID-19 figures, visit WHO Iraq dashboard on: <https://covid19.who.int/region/emro/country/iq>

<sup>1</sup> Community transmission is defined (when the positivity rate of the COVIDS19 PCR tests are above 5%)

## 1) Disease Epidemiology

- The reported cases of COVID-19 continue to increase during the second wave of 2021, with an overall incidence of 2103/100 000 population.
- The most affected age group within Iraq is 30-39 years, overall male-female ratio of 57%: 43%
- Health care providers account for 3.4% of the total cases recorded, the highest among nurses and paramedical staff (53%).
- Most deaths have been reported among persons aged 60-69 years, about 60% of them with comorbidities.
- The overall active case rate is 8.8%, cure rate 89.5%, and hospitalized fatality ratio 1.7%

## 2) WHO preparedness and Response

### a) COVID-19 Response

- The government has continued to enforce partial and complete curfews in different locations in the country, advocating for face masks wearing and social distancing in public to limit the spread of the infection.
- To ensure coordination of COVID-19 among the WHO country departments, a task force team in WHO has been established to coordinate the Response, provide adequate technical support, and timely response to requests from the Ministry of Health.
- WHO continues to disseminate the guiding documents developed by WHO EMRO and HQ in the context of COVID-19

### b) Vaccination

- On Thursday, 25 March 2021, Iraq received its first shipment of 336,000 doses of COVID-19 vaccines through the COVAX facility. The AstraZeneca vaccines manufactured by SK-Bio Institute of South Korea were received by the Minister of Health, Iraq, His Excellency Dr Hassam Mohammed Al-Tamimi, accompanied by the teams of the MOH, WHO, and UNICEF. The vaccination campaign was rolled out on Friday 26 March and is being conducted in 666 health facilities across the country.
- The Expanded Programme for Immunization (EPI) and Pharmacovigilance departments at the Ministry of Health together with WHO organized a meeting with Health Directorates and EPI managers from all governorates of Iraq, with the aim to prepare for implementing the COVID-19 vaccination roll-out plan on 24 - 25 March.
- With the support of WHO, the Ministry of Health conducted training of sixty EPI focal points from Erbil, Sulaymaniyah, Kirkuk, Ninewa, Duhok districts, and Pharmacovigilance focal points from Kirkuk and Ninewa hospitals to orient them on different types of vaccines, vaccine platforms, and general descriptions for each. The training also aimed at orienting participants on different types of Adverse effects after immunization (AEFI) and adverse effect of serious interest (AESI),

Table 1: Additional figures of COVID-19, as of 28 March 2021

Key figures	2020		2021		Wk12
Total Confirmed cases	597 774		234 654		38 536
Incidence rate <sup>2</sup> /100000/week	37		48		96
Top 5 DoHs with highest incident rate	DAHUK	62	NAJAF	122	155
	WASSIT	55	KERBALA	99	96
	BAGHDAD	53	BASRAH	86	175
	KIRKUK	47	BAGHDAD	78	169
	ERBIL	46	WASSIT	71	159
Case fatality rate <sup>3</sup>	2.1		0.6		0.6
Top 5 DoHs with highest case fatality rate	SULYMANIYAH	5.4	SULYMANIYAH	1.8	0.01
	THI-QAR	3.4	DAHUK	1.6	0.01
	BABYLON	2.9	ERBIL	1.4	0.02
	ERBIL	2.5	KIRKUK	1.1	0.01
	MISSAN	2.4	MUTHANNA	1	0.01
Percentage of deaths <48 hours of hospitalization	53%		21%		13
Percentage of active cases	7%		29%		16%
Percentage of cured cases	90%		86%		80%
No. PCR tests	4 547 545		3 353 879		254 049
Overall PCR test Positivity rate <sup>4</sup>	13%		7%		15%
Percentage inpatient	78%		58%		60%
Percentage of cases treated in ICU	10%		11%		9%
No. Health care providers infected	24,283		4 417		415
No. Health care providers dead	256		7		2
No. IDPs and refugees reported with COVID-19	IDPs = 312 Refugee = 299		IDPs = 15 Refugee = 1		0

<sup>2</sup> The incidence rate refers to the frequency with which some event, such as a disease or accident, occurs over a specified time period.

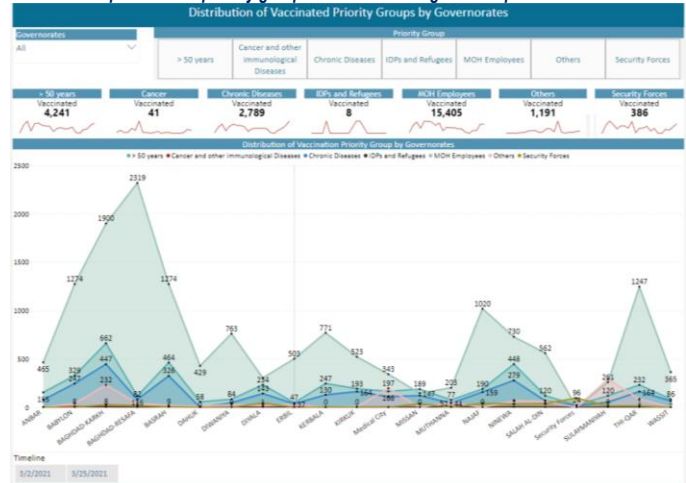
<sup>3</sup> Case Fatality Rate is the proportion of fatalities from a specified disease among all individuals diagnosed over a certain period of time.

<sup>4</sup> PCR positivity rate is the percentage of all PCR tests confirmed positive for COVID19 among all the PCR tests performed over a period of time.

their roles, and responsibilities on the implementation of the newly launched digital platform for reporting AEFI & AESI.

- WHO, UNICEF, and the World Bank supported the Ministry of Health to finalize the National Vaccine Deployment Plan ahead of the vaccination campaign. The plan includes various aspects that will support planning and coordination, the roll-out, communications, monitoring, and evaluation of the vaccination process.
- Iraq previously received 50,000 dozes of Sinopharm vaccine from China. Between 02 - 25 March 2021, a total of 18,827 persons had been vaccinated across the country using the Sinopharm vaccine.

Graph 2: shows priority groups vaccinated using the Sinopharm vaccine



### c) Risk Communication and community engagement

- Ninety-five media practitioners attended the first orientation workshops for journalists, media managers, and spokespersons, organized in collaboration between the MOH Iraq and WHO. The workshop ambitioned to build a strong and continuous partnerships between media specialists, Iraq health authorities and WHO. During the orientations, a Risk Communication and Community Engagement campaign was launched with the aim to ensure adequate vaccine uptake during the vaccination campaign.
- WHO, UNICEF, and the World Bank supported the Ministry of Health to develop a national communications plan and budget for the upcoming COVID-19 vaccination campaign. The campaign is being implemented according to the agreed plan with slight adjustments made to accommodate some last minutes changes in the field.
- To ensure harmonization of messaging by all partners, WHO has compiled key messages that generate demand and promote the COVID-19 vaccination campaign and disseminate to partners.
- A mass awareness campaign dubbed "Maskup" campaign started on 21 March on social media platforms across UN Risk Communications and Community Engagement group members. The campaign runs for 2 weeks and will close with a joint video on mass wearing by all heads of UN agencies involved in the campaign. Three videos produced by WHO on mask-wearing involving WHO staff showing the importance of mask-wearing were broadcasted during the last 2 weeks.
- With support from the Solidarity Funds, a mass awareness campaign is underway in Sulaymaniyah and Dahuk Governorates, targeting six IDP camps (1 in Sulymania and 5 in Dahuk) featuring WHO's implementing partner Heevi.



### d) Logistics and supply management

- In February and March 2021, WHO supported the Ministry of Health in Iraq and in Kurdistan Region with medical devices and equipment's which was distributed to various health facilities handling COVID-19 cases all over Iraq.
  - 90 complete ICU beds (patient monitors, Intensive Care Unit beds, bedside cabinet, and overbed tables)
  - 358 sets of spare part kit for Oxygen Concentrators.
  - 62 650 throat and Nasal swabs,
  - 45,00 disposable sampling kits,
  - 79 050 PCR test kits, and 74 304 Nucleic Acid Extraction Kits
  - 300 finger pulse oximeters, and
  - 74 800 personal protective equipment (PPEs),
  - These including 28 000 PCR kits, PPEs, and disposal sampling kits.



- At East Emergency Hospital in Erbil, WHO supported with on-site installation and training of a horizontal Steam sterilizer and Computed Radiography (CR) to ensure continuity of health services. In Sulaymaniyah Burn, and Plastic Surgery Hospital, WHO supported the renovation and equipment of 4 surgical theatres.
- To enhance COVID-19 testing capacity in Dahuk Governorate, WHO delivered a PCR machine and kits to the central public health Laboratory. A sizeable supply of medical equipment including computed radiography system, X-ray protection shield, patient monitors, steam sterilizer, Handheld pulse oximeter, and ear Thermometer, was also provided to the Directorate of Health.

### 3) Urgent needs & requirements

- Ensure a steady supply of COVID19 vaccines through the COVAX facility and other sources to ensure adequate immunity among a large proportion of the eligible population as soon as possible.
- Launch and maintain an urgent Risk Communication and Community Engagement campaign to increase the uptake of the vaccine among the Iraqi populations
- Seek additional funding to support the vaccination campaign both through RCCE as well as through adequate evaluation and timely field monitoring

### 4) Challenges

- Vaccine hesitancy among the communities intensified with negative media news on AstraZeneca
- Ongoing community transmission of COVID-19 and cases continue to be on the rise.
- The low adherence to the precautionary measures and the recommended partial lockdown poses a great risk to communities.
- Funding to sustain and support COVID-19 interventions like Risk Communications and Community engagement that encourage good community practices to prevent the spread of COVID-19 and uptake of vaccines, and to strengthen preparedness, detection and response to COVID-19 cases.

### 5) Recommendations

- Intensify community sensitizations and engagement to encourage COVID-19 vaccine demand and uptake in the population.
- Hasten the community mobilization, sensitizations, and engagement campaigns at the community level to encourage people to continue wearing masks and adhere to the COVID-19 guidelines.
- Through community sensitizations and engagement, encourage more people to seek medical attention at health facilities to treat COVID-19.

The Response to the COVID-19 pandemic in Iraq is made possible with the generous contributions from WHO Iraq's long-term partners:



1. Ms Pauline Ajello, WHO Communications, mobile: +96477729877288, email: [ajellopa@who.int](mailto:ajellopa@who.int)
2. Dr. Vicky Sabaratnam, Technical Officer, Public Health, Mobile: +9647729877244, email: [sabaratanmv@who.int](mailto:sabaratanmv@who.int)
3. Dr Jehan Al-Badri, Technical Officer, Communicable Diseases, Mobile: +9647901673299, email: [albadrij@who.int](mailto:albadrij@who.int)
4. Ms Ajyal Sultany, WHO Communications, Mobile: +9647740892878, email: [sultanya@who.int](mailto:sultanya@who.int)