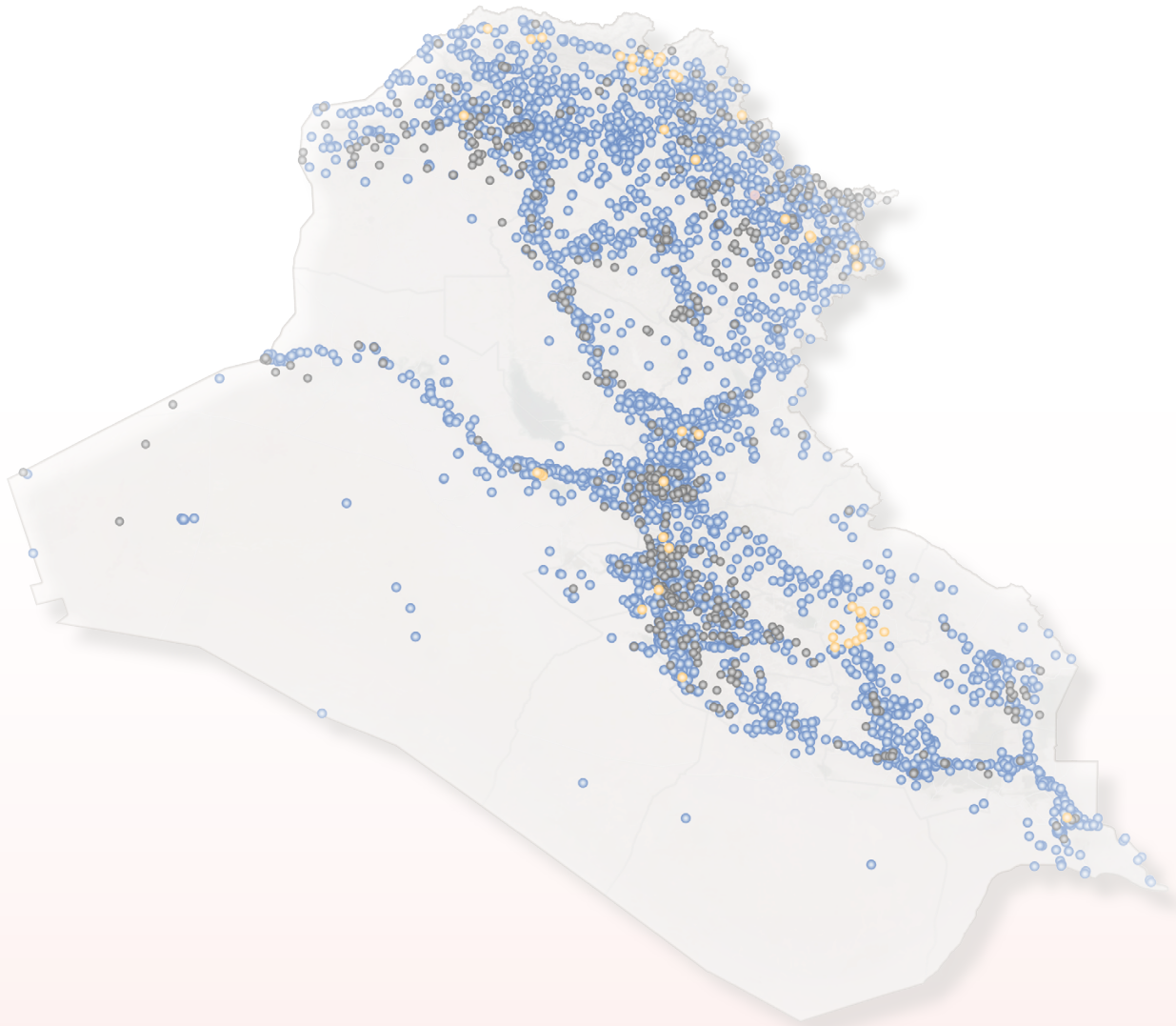




HeRAMS Iraq

Status update report

November 2024



Sexual and reproductive health services

A comprehensive mapping of availability of essential services and barriers to their provision



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ACRONYMS


ART	Antiretroviral Treatment
BEmOC	Basic Emergency Obstetric Care
CEmOC	Comprehensive Emergency Obstetric Care
HeRAMS	Health Resources and Services Availability Monitoring System
HIV	Human Immunodeficiency Virus
HSDU	Health Service Delivery Unit
IEC	Information, Education, and Communication
IYCF	Infant, Young, and Child Feeding
MVA	Manual Vacuum Aspiration
PEP	Post-Exposure Prophylaxis
PMTCT	Prevention of Mother-To-Child HIV Transmission
RDT	Rapid Diagnostic Tests
STI	Sexually Transmitted Infections
WHO	World Health Organization

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DISCLAIMER

Disruptions to health systems can impede provision of and access to essential health services. Communities' vulnerability to increased morbidity and mortality substantially increases when a lack of reliable information prevents sound decision-making, especially in rapidly changing environments that require continued assessment. The Health Resources and Services Availability Monitoring System (HeRAMS) aims to provide decision-makers and health stakeholders at large with vital and up-to-date information on the availability of essential health resources and services, help them identify gaps and determine priorities for intervention.

HeRAMS draws on the wealth of experience and knowledge gathered by the World Health Organization (WHO) and health sector actors, including nongovernmental organizations, donors, academic institutions and other technical bodies. It builds on a collaborative approach involving health service providers at large and integrating what is methodologically sound and feasible in highly constrained, low-resourced and rapidly changing environments such as humanitarian emergencies. Rapidly deployable and scalable to support emergency response and fragile states, HeRAMS can also be expanded to - or directly implemented as - an essential component of routine health information systems. Its modularity and scalability make it an essential component of emergency preparedness and response, health systems strengthening, universal health coverage and the humanitarian development nexus.

HeRAMS has been deployed in Iraq since July 2022 and has allowed for the assessment of 5106 health service delivery units (HSDUs). This analysis was produced based on the data collected up to 14 November 2024. It is important to note that the deployment of HeRAMS is ongoing, including data verification and validation. Hence, this analysis is not final and was produced solely for the purpose of informing operations. This report is an update to the baseline reports published in June 2023¹.

This is the fifth report of the **HeRAMS Iraq status update report November 2024** series, focusing on the availability of sexual and reproductive health services. It is a continuation of the first report on the operational status of the health system² and should always be interpreted in conjunction with results presented in the first report. Additional reports are available covering general clinical and trauma care services³, essential child health and nutrition services⁴, communicable disease services⁵, and non-communicable disease and mental health services⁶.

Caution must be taken when interpreting the results presented in this report. Differences between information products published by WHO, national public health authorities, and other sources using different inclusion criteria and different data cut-off times are to be expected. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change.

For additional information, please see <https://www.who.int/initiatives/herams> or contact herams@who.int.

¹ See [Annex 1](#) for a list of previously published reports.

² HeRAMS Iraq status update report November 2024 - Operational status of the health system: A comprehensive mapping of the operational status of health service delivery unit, <https://www.who.int/publications/m/item/herams-iraq-status-update-report-2024-11-operational-status-of-the-health-system>

³ HeRAMS Iraq status update report November 2024 - General clinical and trauma care services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-iraq-status-update-report-2024-11-general-clinical-and-trauma-care-services>

⁴ HeRAMS Iraq status update report November 2024 - Child health and nutrition services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-iraq-status-update-report-2024-11-child-health-and-nutrition-services>

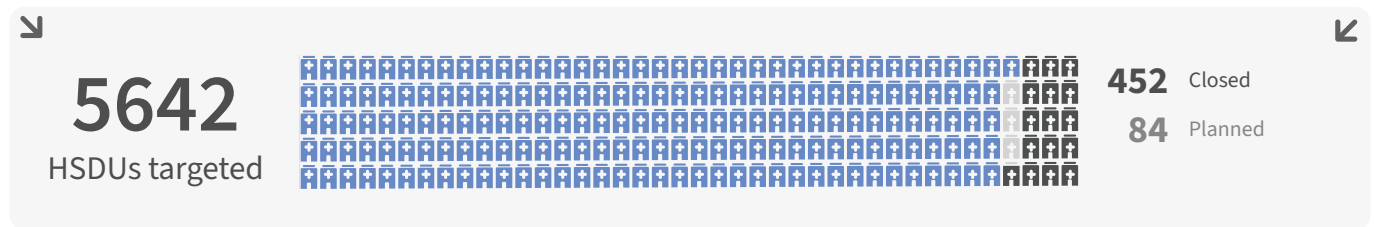
⁵ HeRAMS Iraq status update report November 2024 - Communicable diseases services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-iraq-status-update-report-2024-11-communicable-diseases-services>

⁶ HeRAMS Iraq status update report November 2024 - Noncommunicable diseases and mental health services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-iraq-status-update-report-2024-11-noncommunicable-diseases-and-mental-health-services>

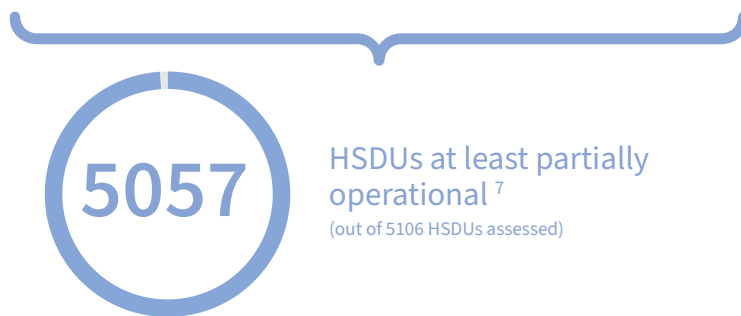
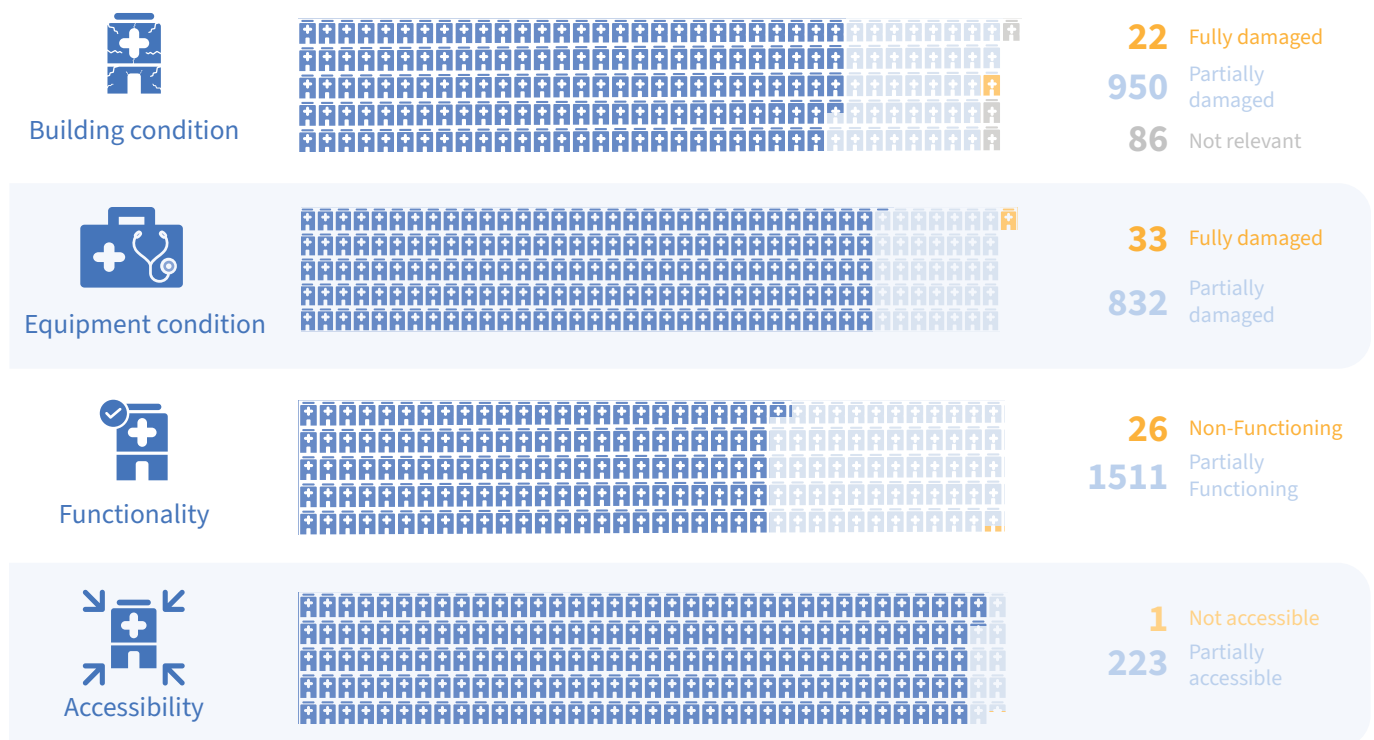


OVERVIEW OF HSDUS EVALUATED

Data collection summary



5106 HSDUs reporting



⁷ HSDUs (Health Service Delivery Units) reported as destroyed, non-functioning, or inaccessible are deemed unable to provide any health services, hence categorized as non-operational. Consequently, reporting ends upon confirmation of an HSDU's non-operational status.



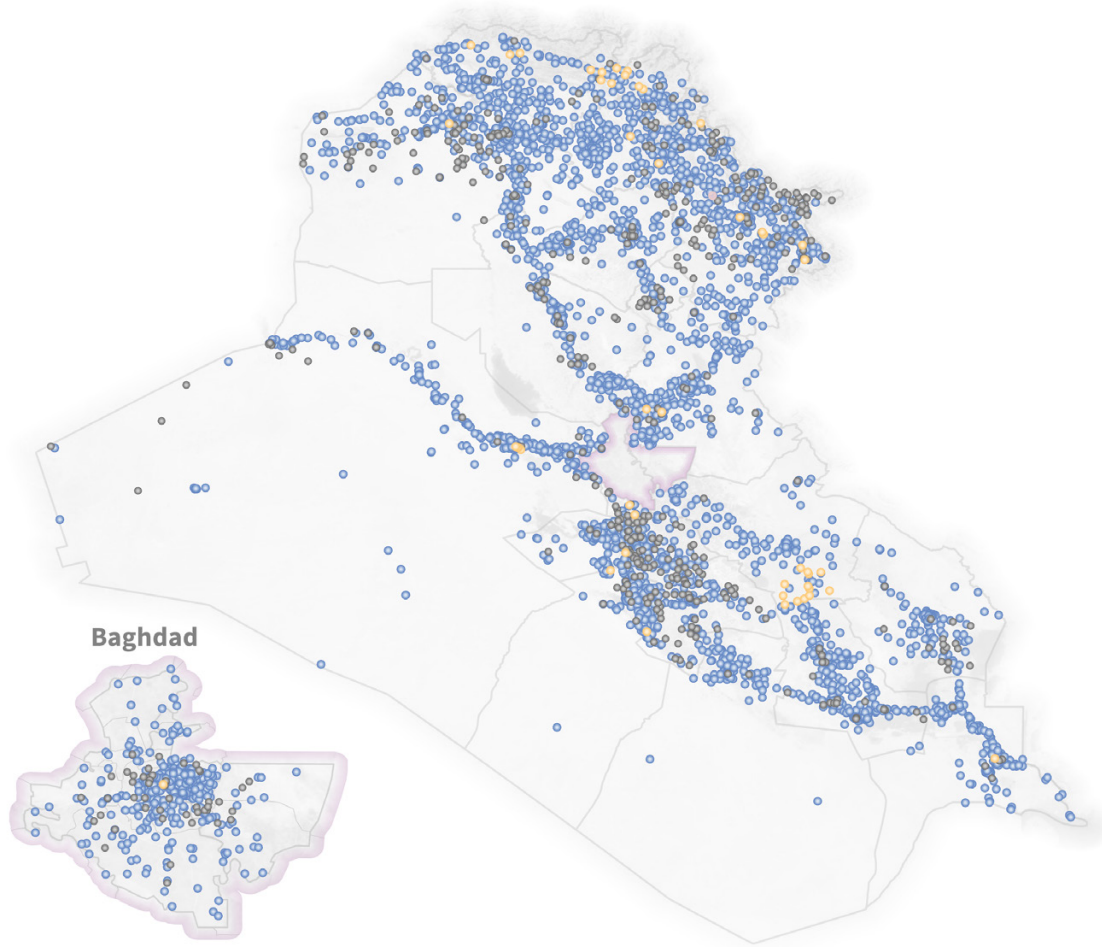
Reporting frequency and operational status by directorate of health

DIRECTORATE OF HEALTH	Ambulance			Blood bank			Public Medical Clinics			Health Center			Sub-health centre			Hospital			Mobile Clinic			Other			TOTAL HSDU				
	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O	P/C	O	N/O
ANBAR	25	-	-	1	-	-	26	3	2	97	-	4	110	1	5	20	-	1	3	-	5	43	-	10	325	4	27		
BABYLON	13	-	-	2	-	-	21	-	-	57	2	1	73	1	3	22	-	-	1	-	5	26	-	62	215	3	71		
BAGHDAD-KARKH	-	-	-	1	-	1	40	-	-	113	1	6	35	-	4	15	-	3	2	-	1	30	-	13	236	1	28		
BAGHDAD-RESAFA	-	-	-	2	-	-	41	-	-	122	-	3	13	-	7	42	-	-	-	-	-	40	-	9	260	-	19		
BASRAH	53	-	-	1	-	-	29	-	-	113	1	-	33	-	-	27	-	2	1	-	1	45	-	2	302	1	5		
DAHUK	3	-	-	2	-	-	29	-	3	86	2	1	78	3	3	27	-	1	-	-	-	9	-	1	234	5	9		
DIWANIYA	15	-	-	1	-	-	16	-	-	46	-	3	43	-	1	14	-	-	-	-	1	31	-	40	166	-	45		
DIYALA	15	-	-	1	-	-	11	-	-	83	2	2	52	-	1	15	-	2	7	-	-	83	-	6	267	2	11		
ERBIL	16	-	-	1	-	-	40	-	1	128	1	-	150	8	19	39	-	-	1	-	-	15	-	-	390	9	20		
KERBALA	8	-	-	1	-	-	17	-	-	40	-	2	21	-	1	10	-	-	2	-	1	43	-	3	142	-	7		
KIRKUK	11	-	1	1	-	-	25	-	-	66	-	4	64	-	11	11	-	1	3	-	-	42	-	6	223	-	23		
MISSAN	11	-	-	1	-	-	13	-	-	40	-	1	40	-	8	12	-	-	-	-	2	29	-	5	146	-	16		
MUTHANNA	1	-	-	1	-	-	9	-	-	39	-	-	44	-	-	14	-	1	3	-	-	15	-	1	126	-	2		
NAJAF	8	-	-	1	-	-	14	-	-	62	-	3	35	2	1	20	-	-	1	-	-	71	-	6	212	2	10		
NINEWA	22	-	-	1	-	-	27	-	5	130	-	9	136	-	18	23	-	1	6	-	9	102	1	34	447	1	76		
SALAH AL-DIN	3	-	3	1	-	-	16	-	-	74	-	4	66	-	17	14	-	7	6	-	-	56	-	10	236	-	41		
SULAYMANIYAH	15	-	1	6	-	-	53	-	1	143	2	4	328	4	87	61	1	4	-	-	-	33	-	6	639	7	103		
THI-QAR	17	-	-	1	-	-	29	-	-	104	-	3	84	-	-	12	-	3	6	-	-	74	-	15	327	-	21		
WASSIT	18	-	-	1	-	-	12	-	-	52	-	-	33	-	2	15	-	-	-	-	-	33	14	-	164	14	2		
TOTAL	254	-	5	27	-	1	468	3	12	1595	11	50	1438	19	188	413	1	26	42	-	25	820	15	229	5057	49	536		

O = At least partially operational - N/O = Not operational - P/C = Planned / closed

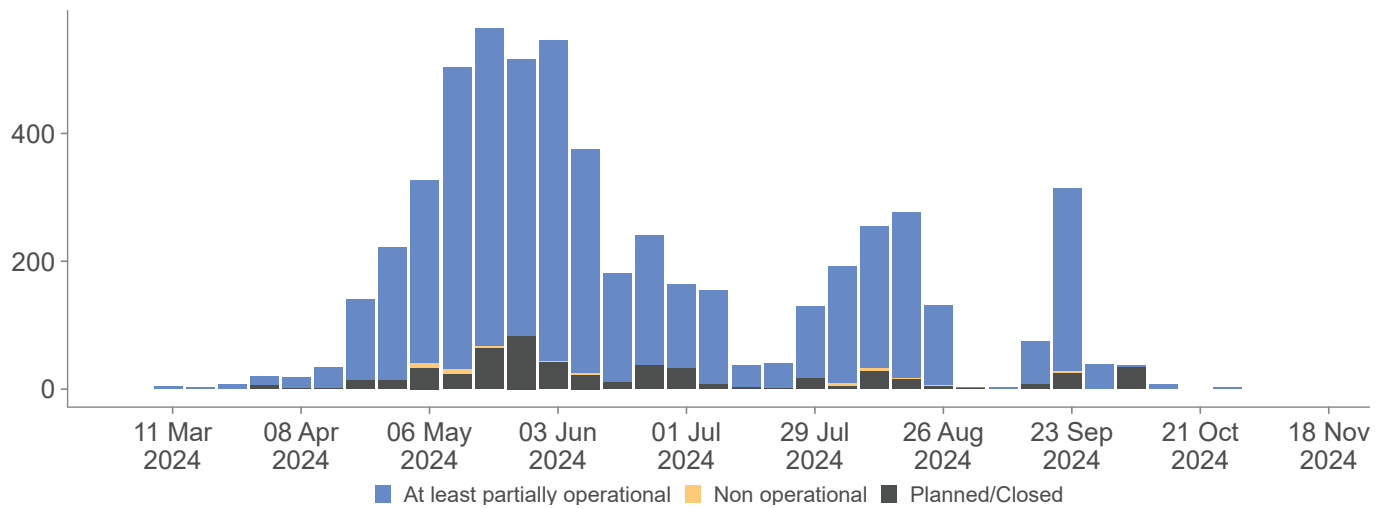


Geographic distribution of HSDUs



■ At least partially operational ■ Not operational ■ Planned / Closed

Date of last update





PART I:
Overview of sexual and
reproductive health
services





INTERPRETATION GUIDE

Service availability

The first part of this report provides an overview of availability of sexual and reproductive health services. A summary of HSDUs evaluated and their operational status is available on [page 8](#). Further details on the operational status of HSDUs can be found in the first report of the **HeRAMS Iraq status update report November 2024** series.

Overview

An **overview bar chart** general clinical and trauma care services is shown by services. The number inside the bars is the percentage of HSDUs falling in the availability category. For further information on services included and their definition, see [Annex III](#).



	Person	Building	Tools	Money
Service A	20	54	10	50
Service A	60	20	10	70

Barriers heat maps offer additional insights into main barriers for individual services not or only partially available. Cell opacity levels indicate the percentage of HSDUs reporting a given barrier. The integer inside the cell denotes the proportion of HSDUs reporting the barrier. Note that HSDUs not reporting a barrier (i.e., HSDUs where the service is fully available or not normally provided)

were excluded from these charts. HSDUs can report more than one barrier, meaning that the total percentage for each service can exceed 100%.

Service availability per population (heat map)

A comprehensive breakdown of the availability of individual services is depicted through **heat maps**. Each cell represents the number of HSDUs offering a specific service relative to its catchment population. It should be noted that different target populations are used for each services, depending on the number of people that are expected to use the service: specialized services have a bigger target population as one HSDU is expected to cover more people. For more details on population estimates, see [Annex II](#).

Service 1	0.9	0	0.4	2.1	0.7
Service 2	0.4	0	0.9	3.5	0.7
Service 3	0.3	0	0.7	0.3	0.2
Service 4	0.8	0	0.4	0.8	0.6
Service 5	0.5	0	0.9	1.9	0.8
	DoHA	DoHB	DoHC	DoHD	DoHE

To account for partially available services, a weighing was applied with a weight of 1 given to services reported as fully available and 0.5 for partially available services. As target populations may vary across services, an additional column has been included to the right of the graph to assist readers in comprehending the target populations associated with each service.



OVERVIEW OF SERVICE AVAILABILITY AND BARRIERS

Service	Availability (%)				Barriers (%)					
	Available	Partially available	Not available	Not normally provided	Lack of staff	Lack of training	Lack of medical supplies	Lack of medical equipment	Lack of financial resources	
STI & HIV/AIDS										
Availability of free condoms	14	3	24	58	22	6	83	16	41	
IEC on STI/HIV	34	9	15	42	50	23	33	25	52	
STI/HIV Advocacy	25	7	9	59	69	32	22	31	46	
Syndromic management of STIs	8	7	9	75	40	12	88	27	29	
HIV counselling and testing	9	7	10	74	35	18	69	52	33	
PMTCT	5	5	13	77	43	14	79	31	30	
Antiretroviral treatment	3	4	15	79	27	9	89	25	26	
Maternal and neonatal health										
Family planning	22	9	15	53	61	11	76	29	28	
Antenatal care	23	6	4	67	65	18	70	32	31	
Births by licensed midwives	5	3	14	78	71	27	51	34	28	
Skilled care during childbirth	4	1	5	89	64	25	55	41	40	
Basic emergency obstetric care	4	2	2	93	69	24	65	43	33	
Comprehensive emergency obstetric care	3	1	1	97	68	24	51	35	43	
Post-partum care	26	7	8	60	78	22	64	28	29	
Comprehensive abortion care	3	1	1	96	72	39	52	35	50	
Sexual violence										
Clinical management of rape survivors	1	1	1	98	75	44	32	25	39	
Emergency contraception	2	2	2	96	30	19	76	20	43	
Post-exposure prophylaxis	2	2	2	96	54	32	71	28	35	

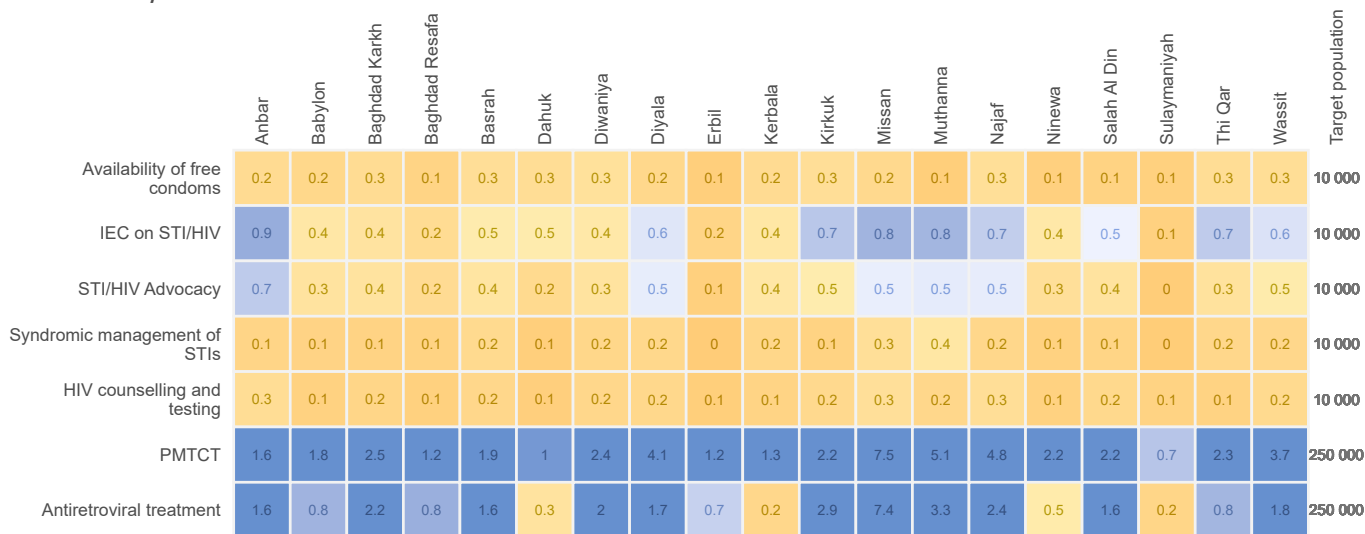
Availability: ■ Available ■ Partially available ■ Not available ■ Not normally provided

Barriers (icons from left to right): Lack of staff, Lack of training, Lack of medical supplies, Lack of medical equipment, Lack of financial resources.

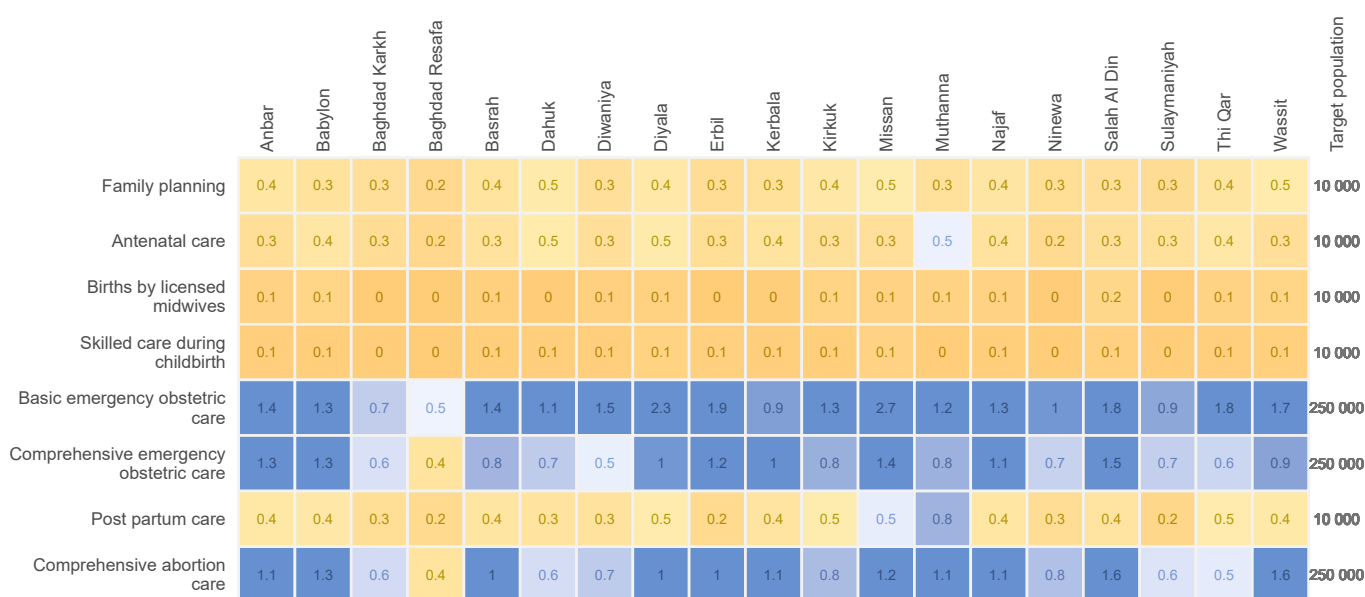


Number of HSDUs providing services per target population⁸

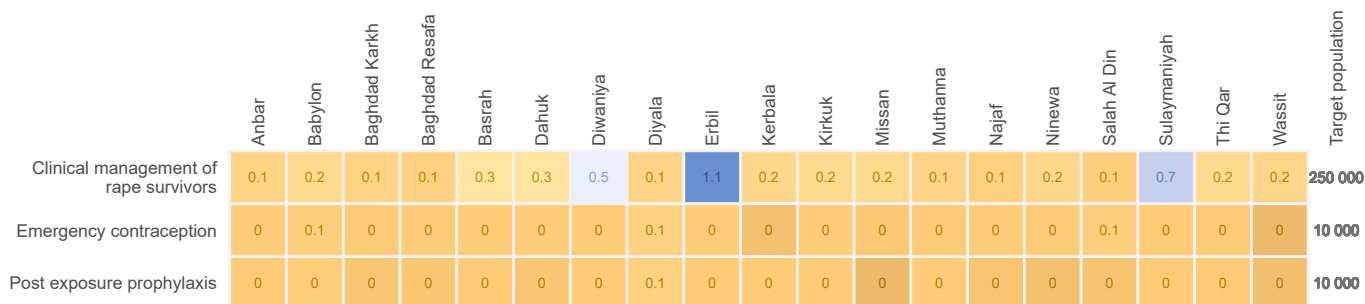
STI & HIV/AIDS



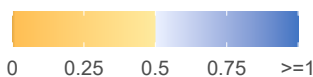
Maternal and neonatal health



Sexual violence



Number of HSDUs per target population



⁸ To account for partially available services, a weighing was applied with a weight of 1 given to services reported as fully available and 0.5 for partially available services. As target populations may vary across services, an additional column has been included to the right of the graph to assist readers in comprehending the target populations associated with each service. See [Annex II](#) for population estimates per directorate of health.





PART II:
In-depth analysis by
health service

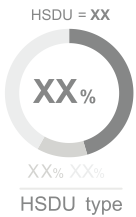
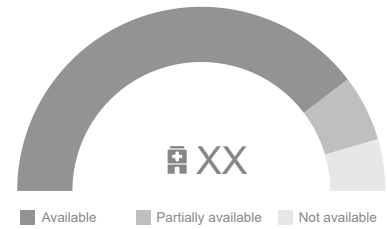




INTERPRETATION GUIDE

Service status

Arc charts provide an overview of the overall availability of a health service. The total number of HSDUs included in the analysis of a service is shown inside the arc chart. It should be noted that analysis of individual services was limited to operational HSDUs (see [page 8](#) for details).



For further insights, donut charts break down indicator availability by HSDU type. To improve readability, labels indicating the availability level for each category are provided either beside or below the chart. Additionally, to highlight the percentage of HSDUs where an indicator is available up to standard, the number may also be prominently placed inside the chart. Information on the total number of HSDUs included is clearly indicated above or below the respective donut.

Column charts offer a breakdown of service availability by directorate of health (DoH). Two numbers are represented in the bars: the number of HSDU and, under, the percentage of HSDU falling into the specified availability category. The length of each bar is determined by the total number of HSDUs in the directorate of health. A footnote indicates when these charts exclude HSDUs where a service was not normally provided or the HSDU did not report on it. The total number of HSDUs included in each directorate of health is indicated under the directorate of health name.



	DoH A HSDU = XXX		HSDU
Ambulance	67%	33%	3
Blood bank	50%	50%	2
Public Medical Clinics	86%	14%	21
Health Center	83%	15%	2

Column charts by HSDU type display the availability of services by DoH and HSDU type. Each bar represents the percentage of HSDU falling into each category for the specified HSDU type and DoH. The grey bar on the right shows the number of HSDU falling into the category. By default these charts exclude HSDUs where a service was not normally provided or the HSDU did not report on it.

Maps use pie charts to depict the availability of an indicator at the sector level. The size of each circle represents the total number of HSDUs in the sector, while each slice reflects a specific availability level..



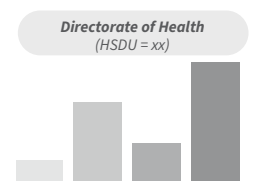
Barriers

To gain a more comprehensive understanding of the challenges faced by HSDUs, whenever a service was not or only partially available, main barriers impeding availability were recorded.



Each **donut chart** indicates the percentage of HSDUs having reported a specific barrier. The total number of HSDUs reporting at least one barrier is shown below the chart header.

Bar charts further break down barriers by directorate of health. Each bar represents a specific barrier, with the percentage value indicating the proportion of HSDUs reporting that particular barrier. Additionally, the number of HSDUs reporting at least one barrier is displayed below the directorate of health's name.

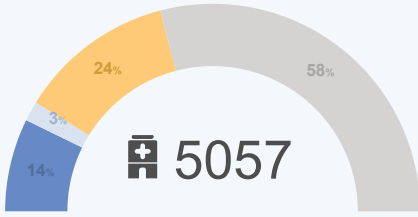


Important: The denominator for barrier charts excludes HSDUs where the service is fully available or not normally provided. It should further be noted that HSDUs can report up to three barriers for each service. Thus, the sum of all barriers may exceed 100%.

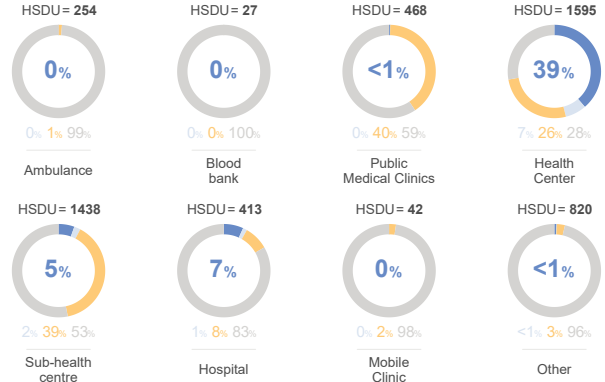


AVAILABILITY OF FREE CONDOMS

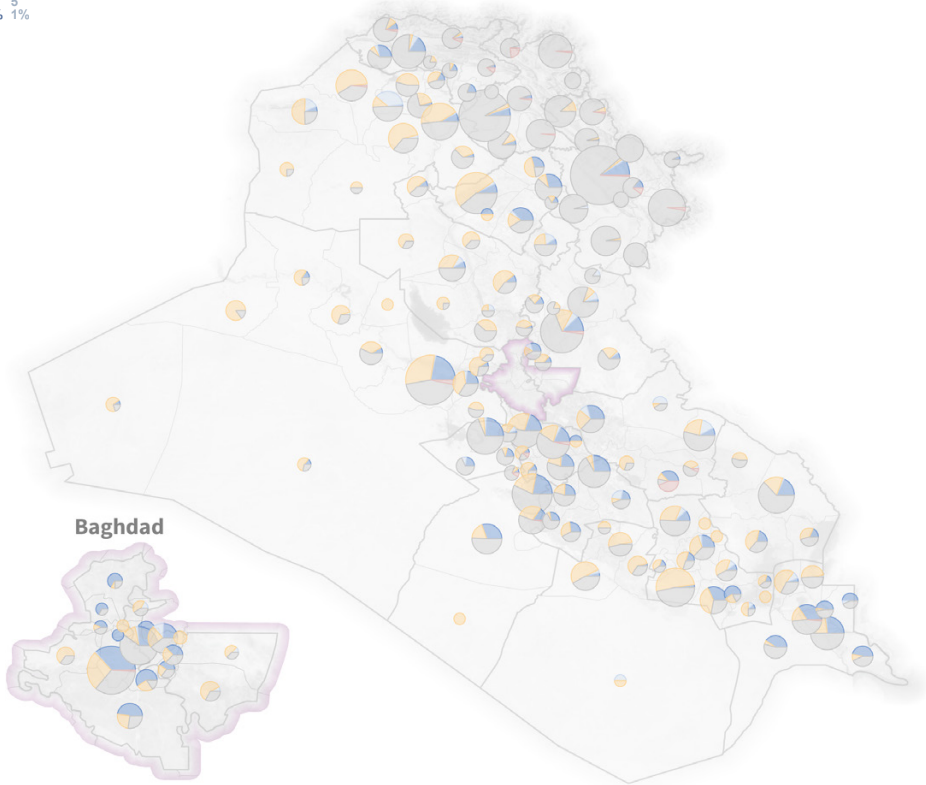
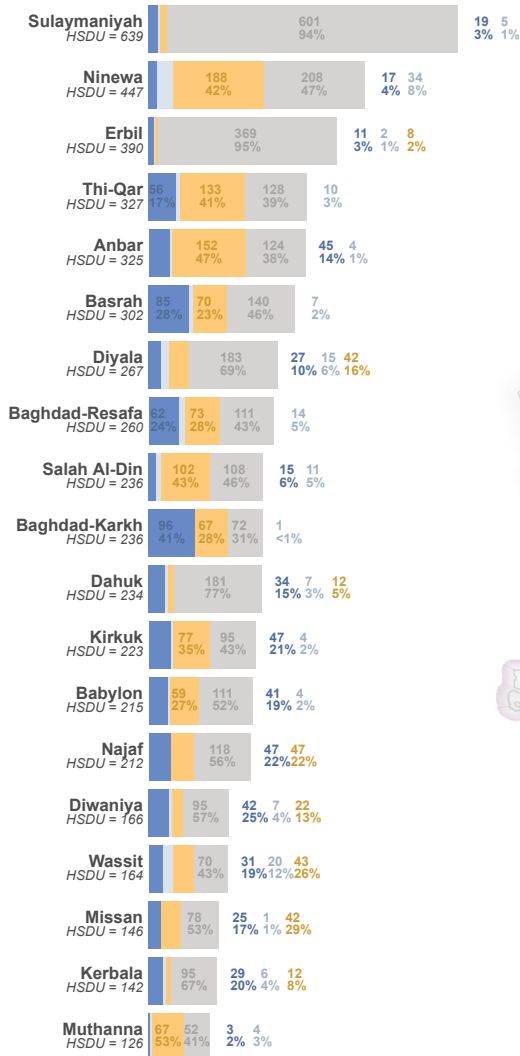
Service availability⁹



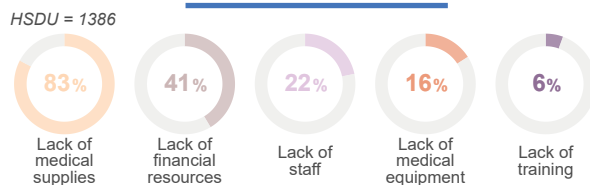
Service availability by HSDU type



Service availability by directorate of health

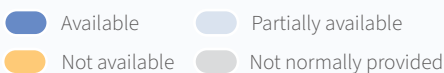


Main barriers impeding service delivery

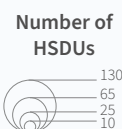
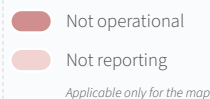


⁹ Refers to the availability of free condoms

Availability status

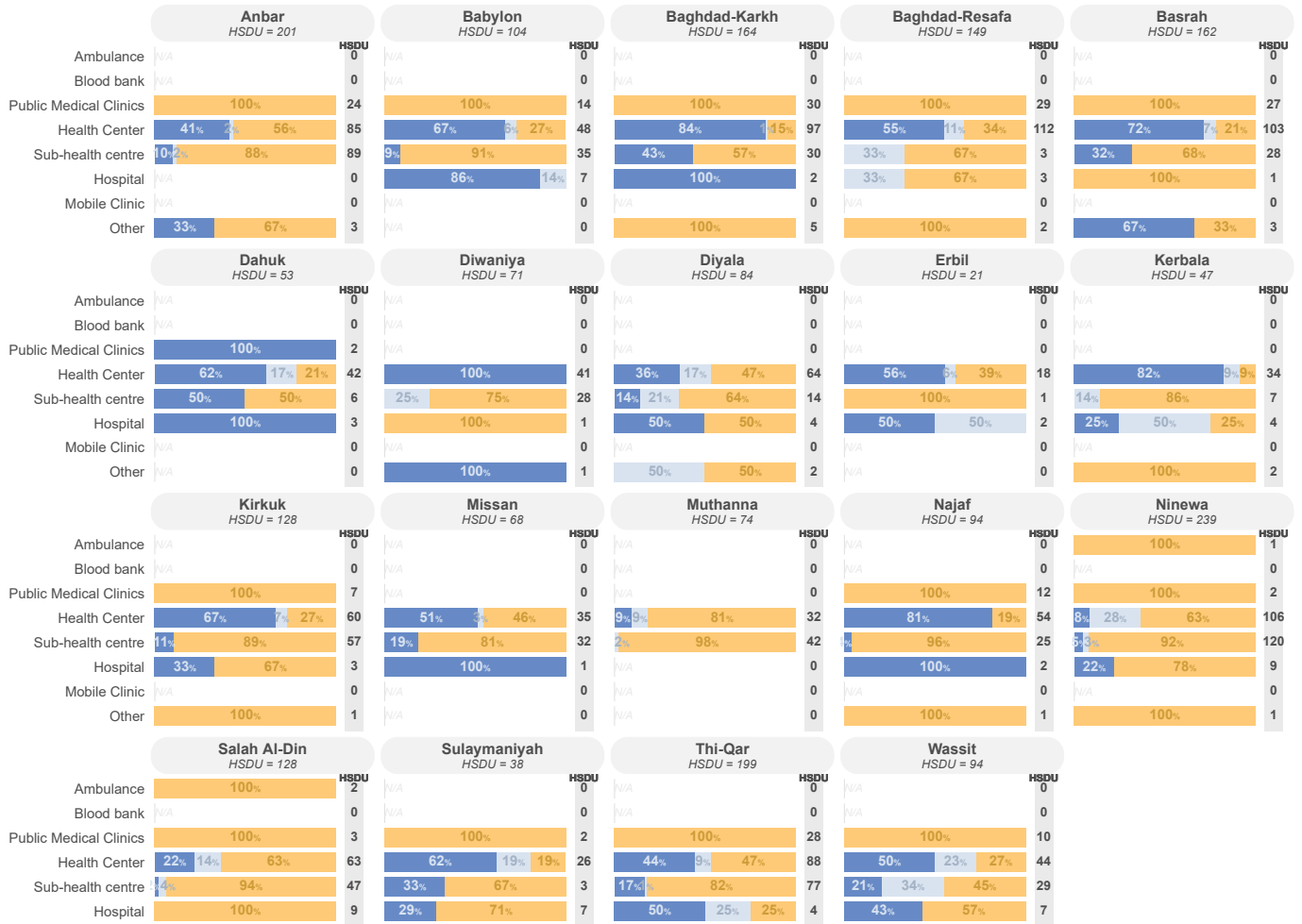


Maps

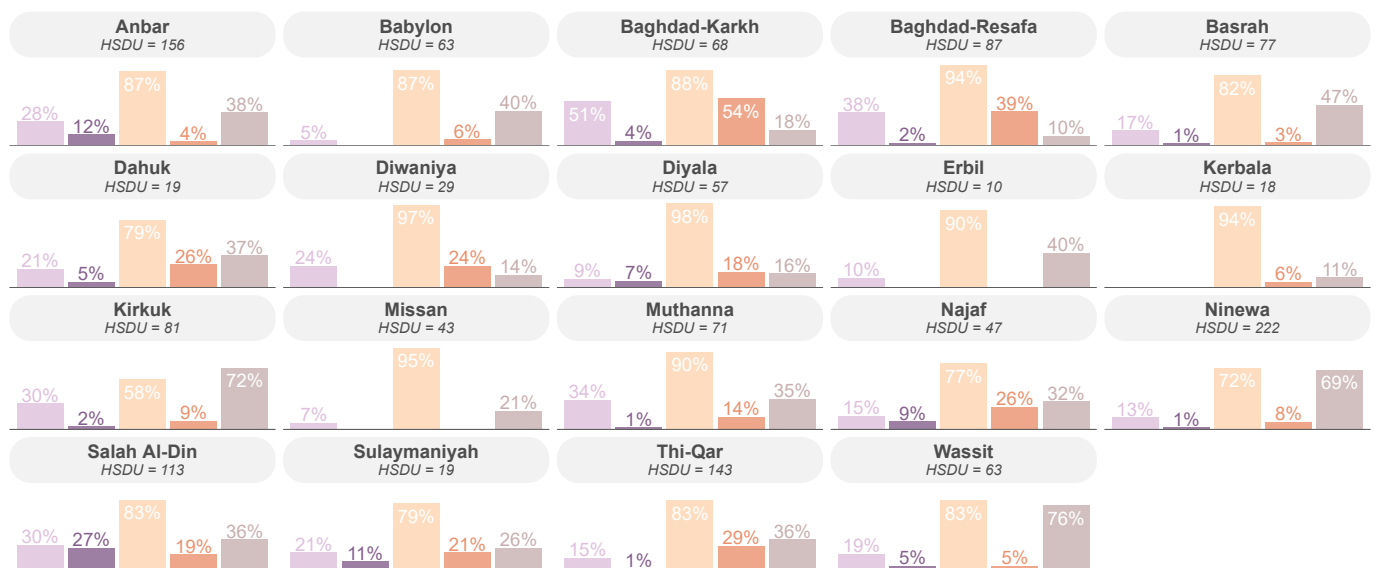




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

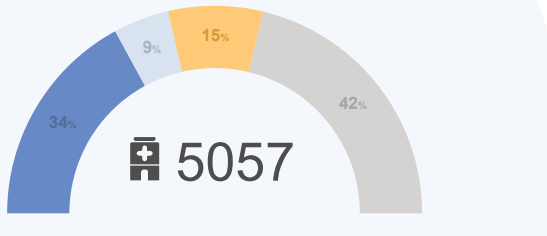
- Lack of staff
- Lack of training
- Lack of supplies
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

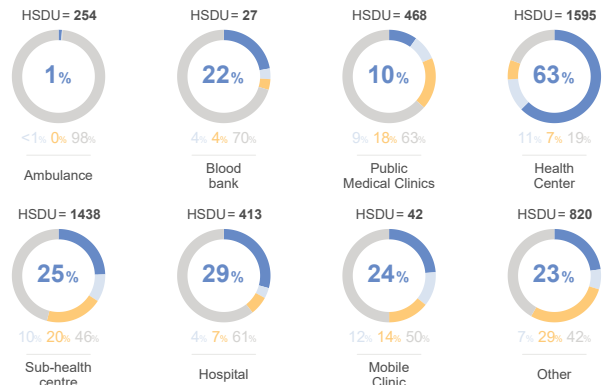


IEC ON STI/HIV

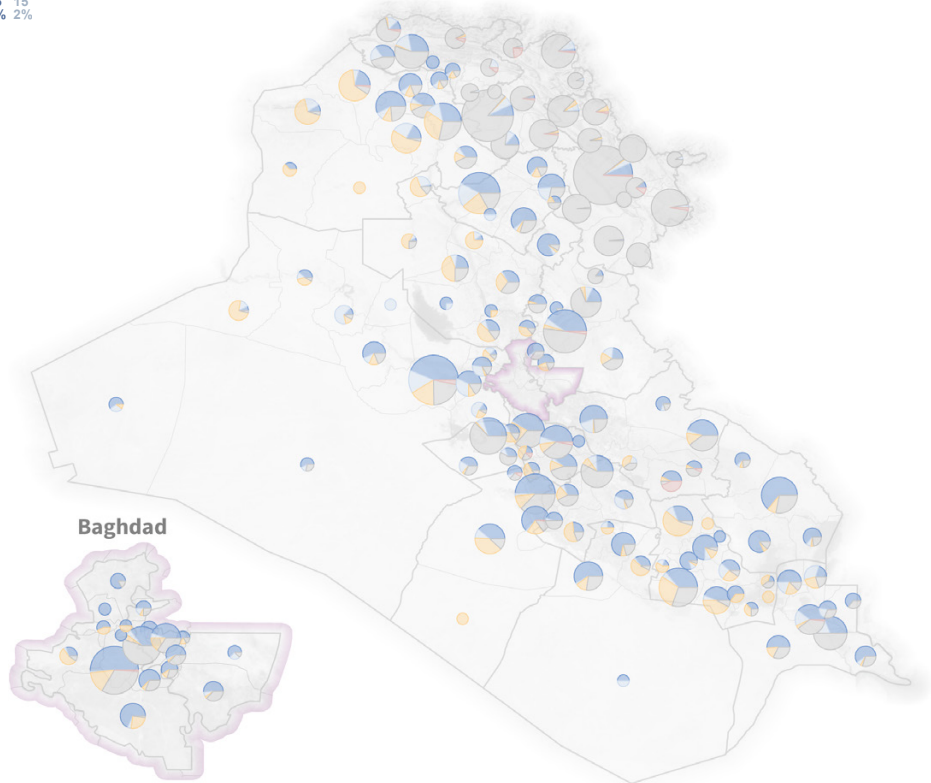
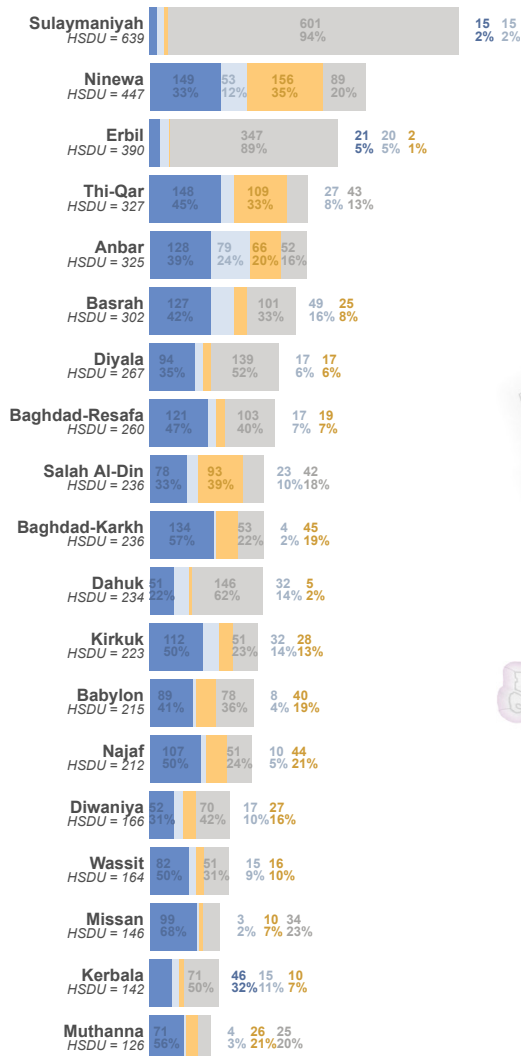
Service availability¹⁰



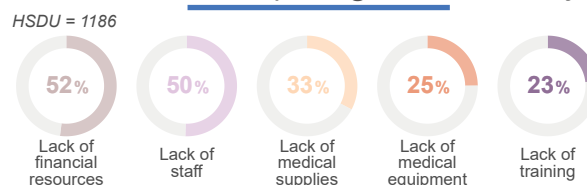
Service availability by HSDU type



Service availability by directorate of health

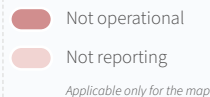
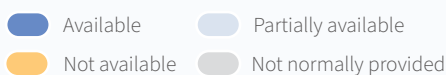


Main barriers impeding service delivery

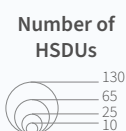


¹⁰ IEC on prevention of STI/HIV infections and behavioral change communications

Availability status

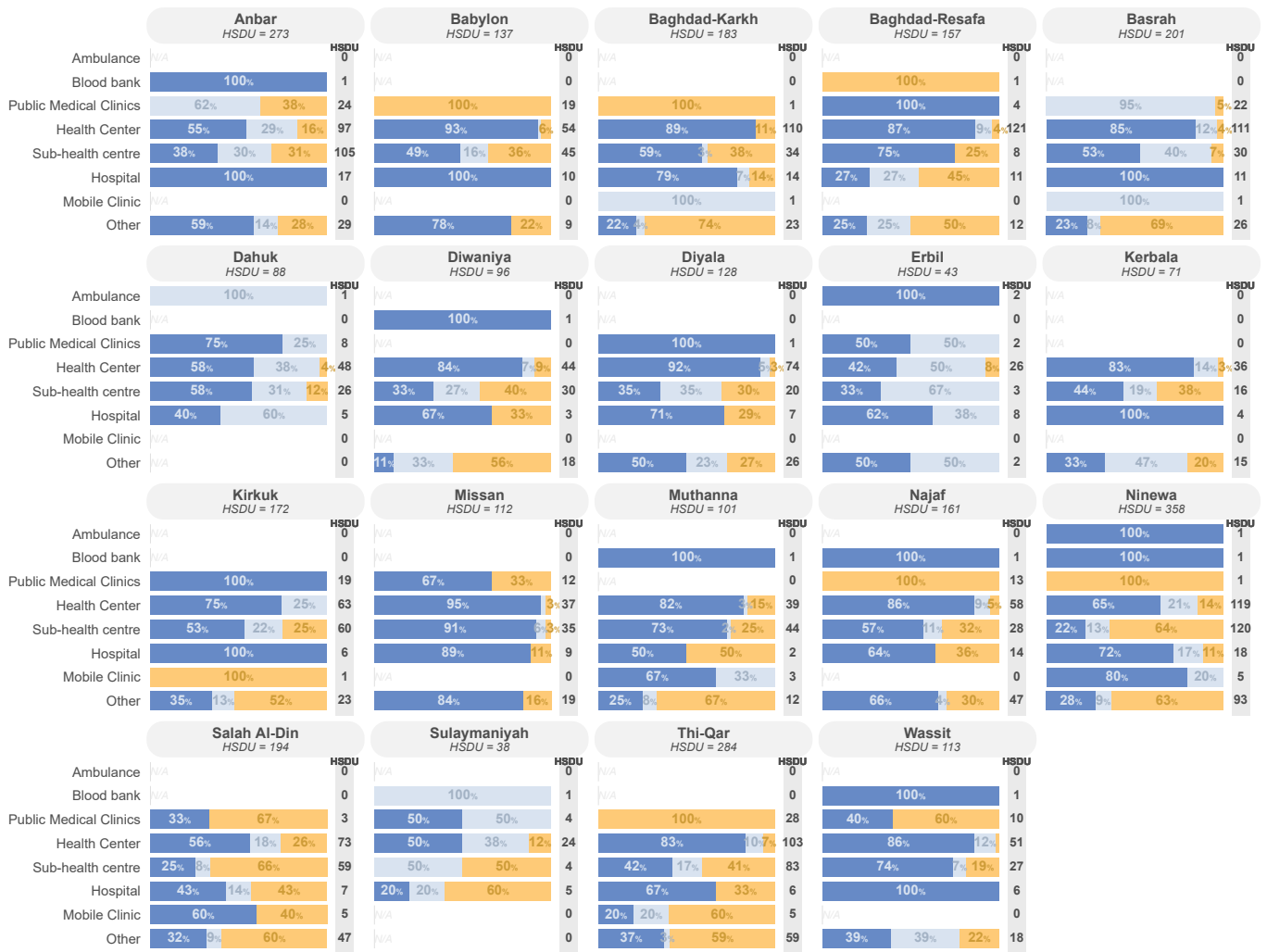


Maps

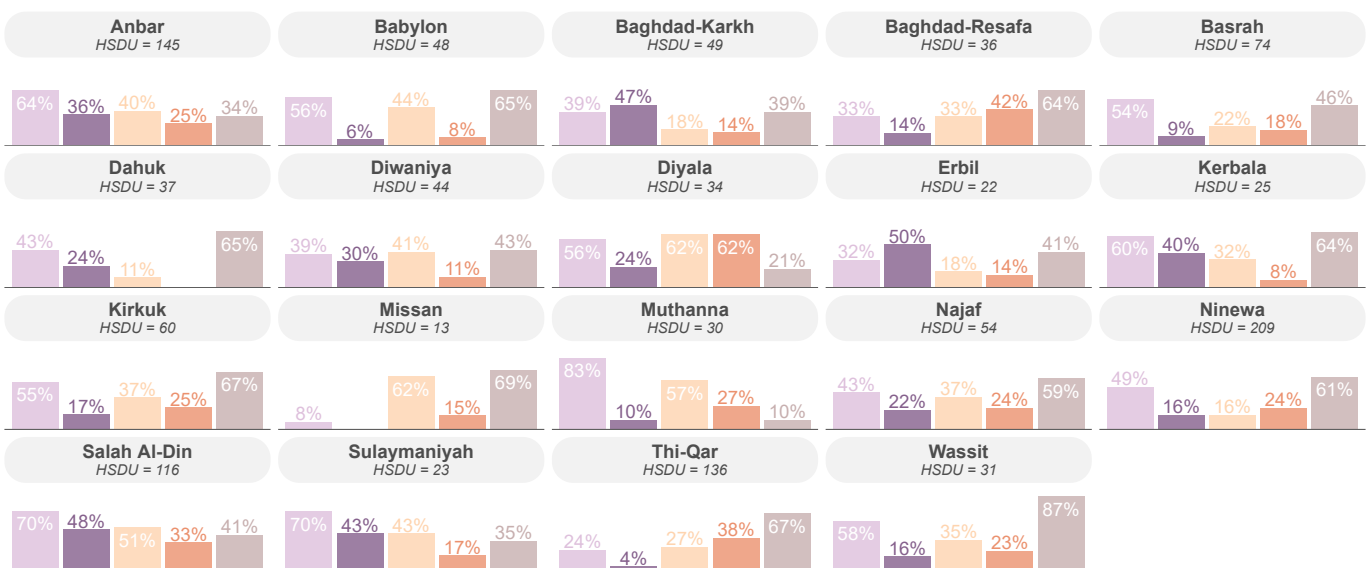




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

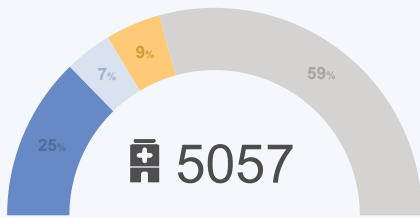
- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

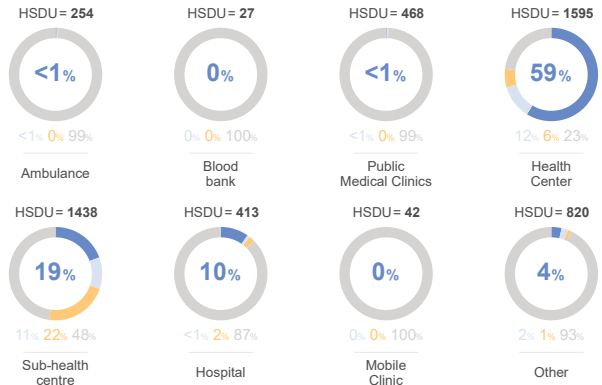


STI/HIV ADVOCACY

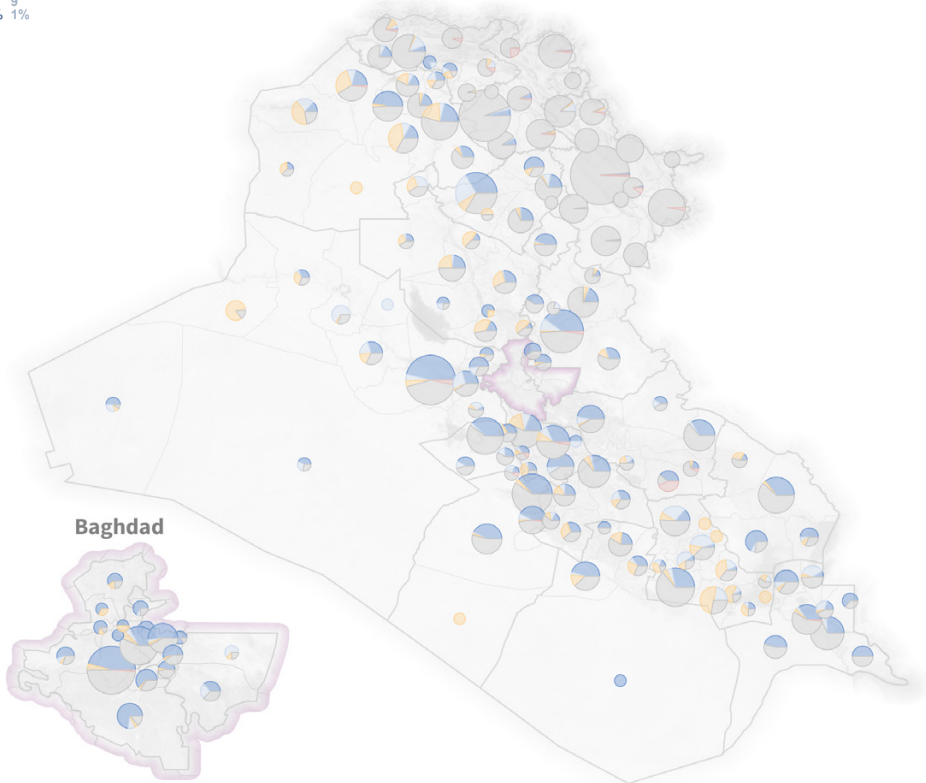
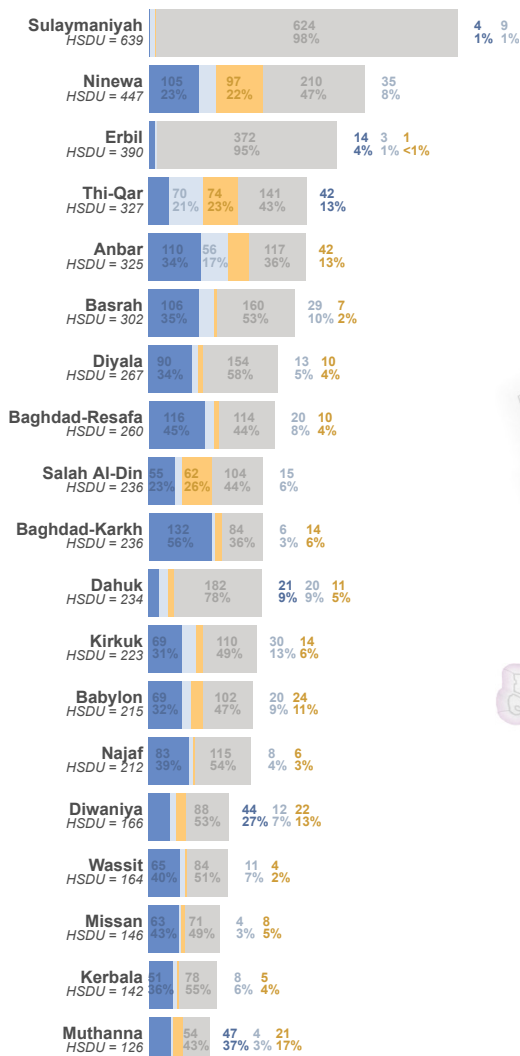
Service availability¹¹



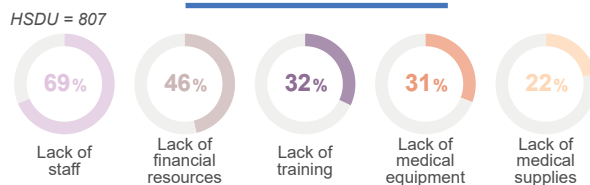
Service availability by HSDU type



Service availability by directorate of health

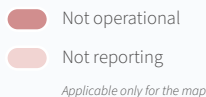


Main barriers impeding service delivery

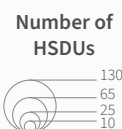


¹¹ Advocacy for community leaders on STI/HIV risks

Availability status

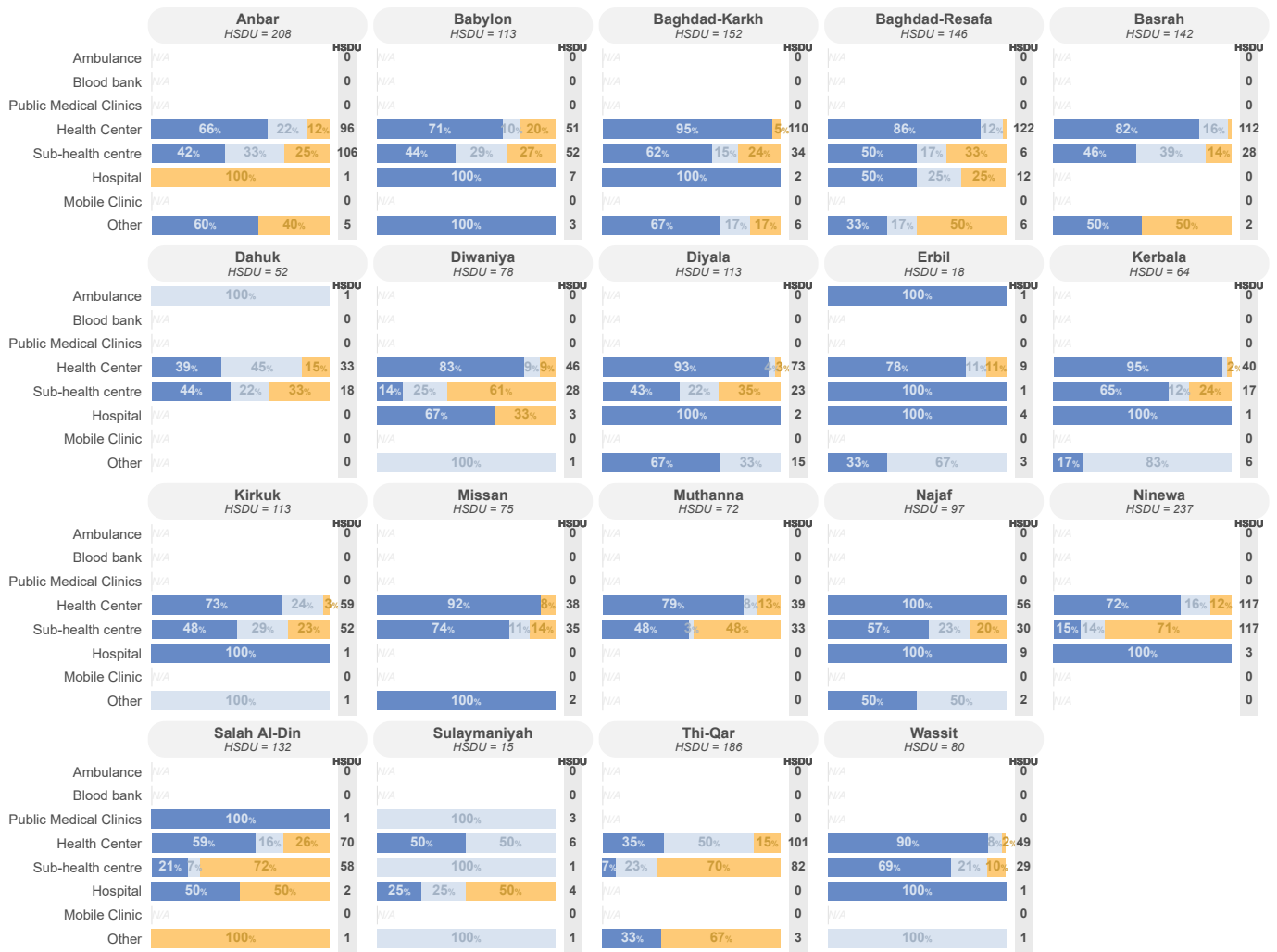


Maps

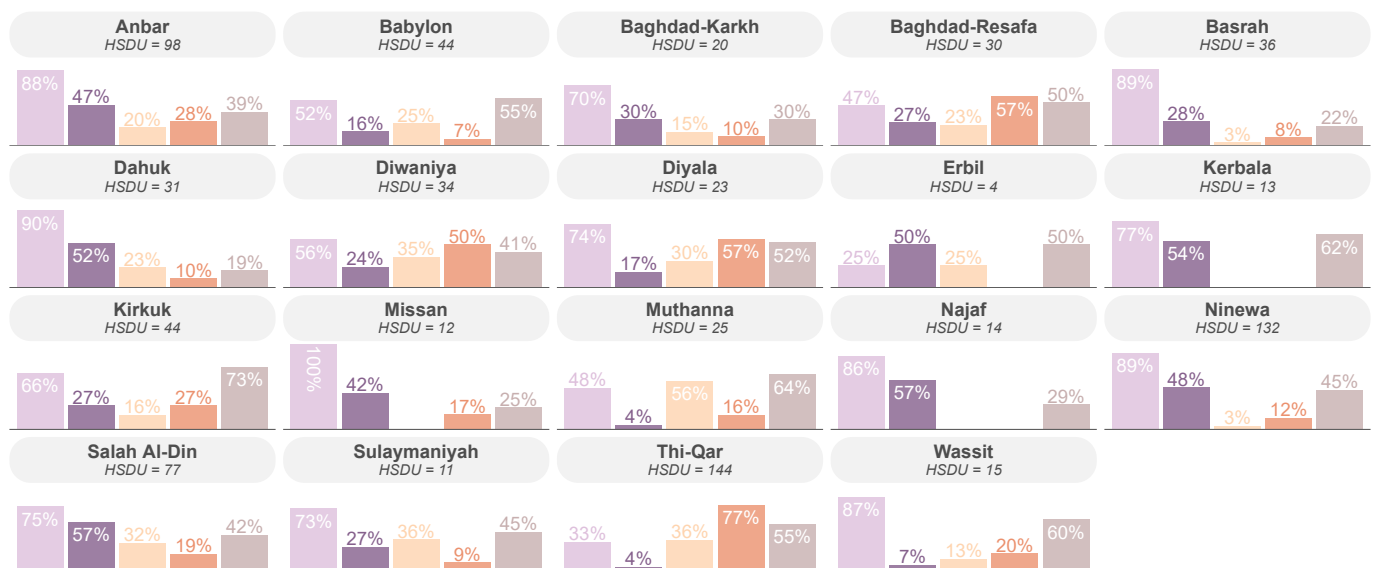




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

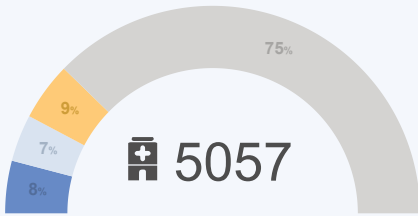
Barriers for partial availability or non-availability.

- Lack of staff
- Lack of supplies
- Lack of training
-

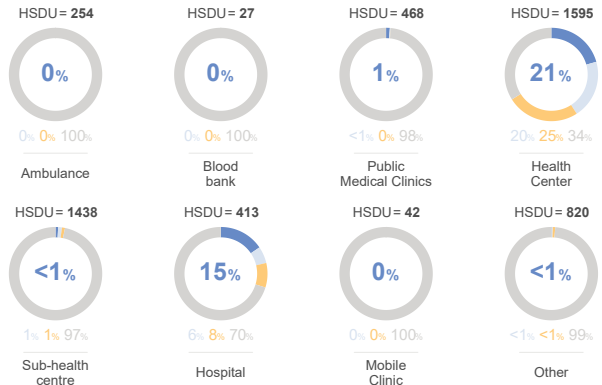


SYNDROMIC MANAGEMENT OF STIS

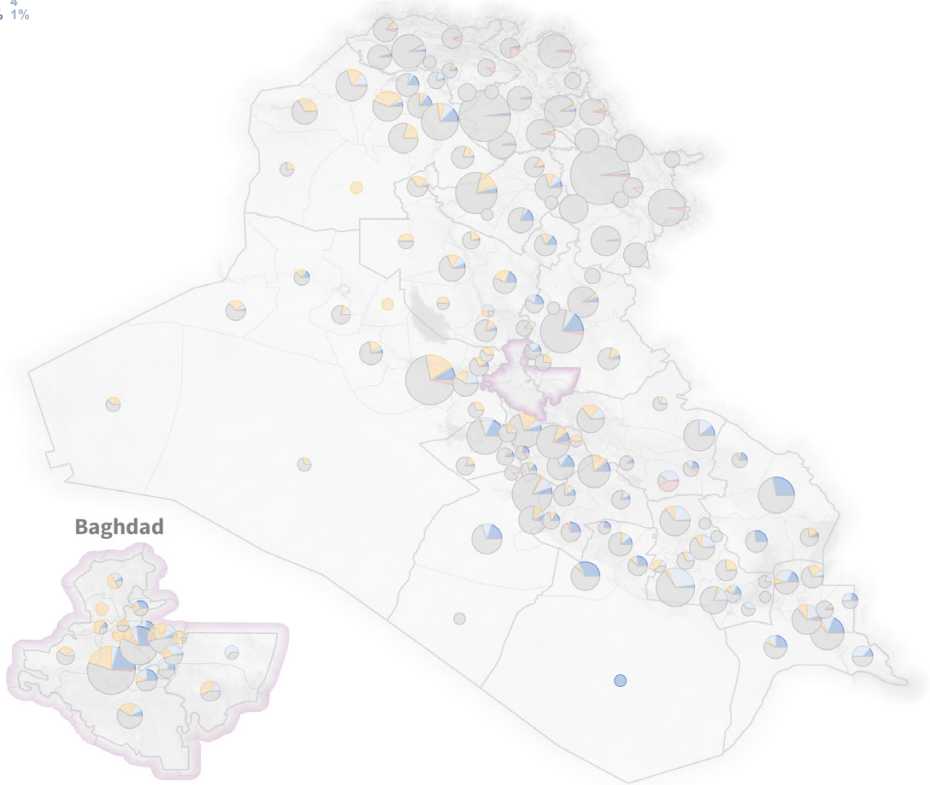
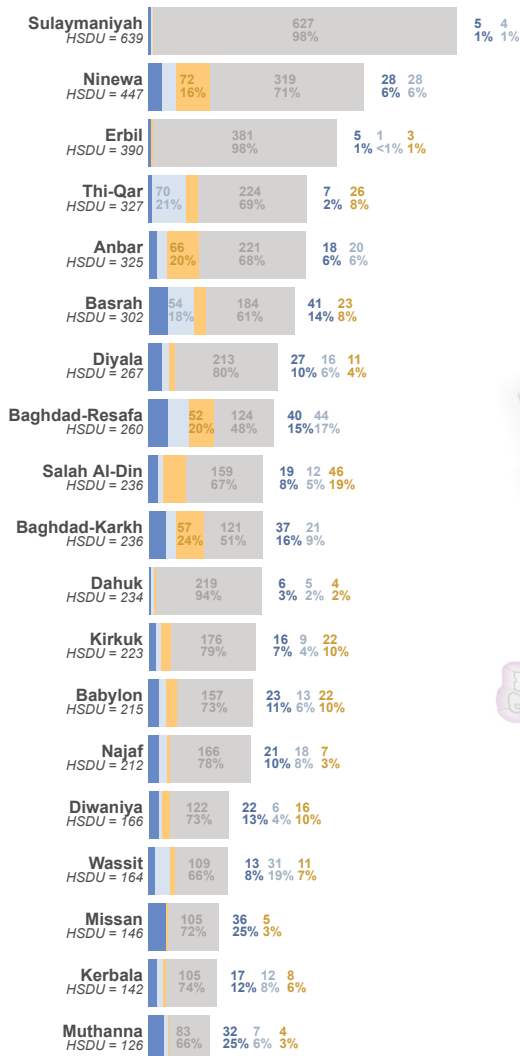
Service availability¹²



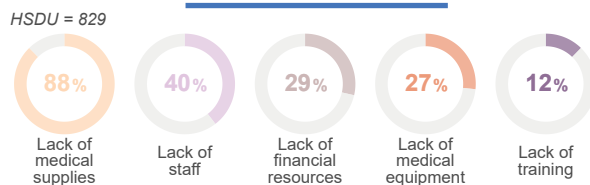
Service availability by HSDU type



Service availability by directorate of health

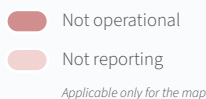
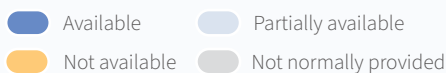


Main barriers impeding service delivery

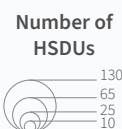


¹² Syndromic management of Sexually Transmitted Infections (STIs) means first-line antibiotics available nationally

Availability status



Maps

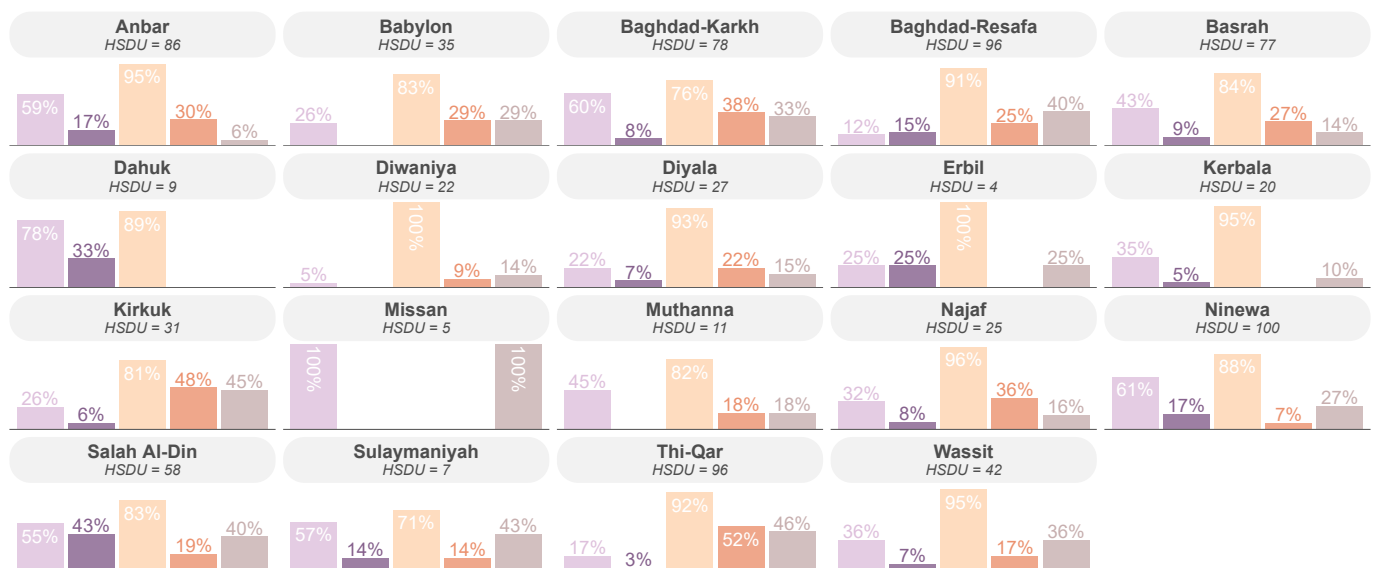




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

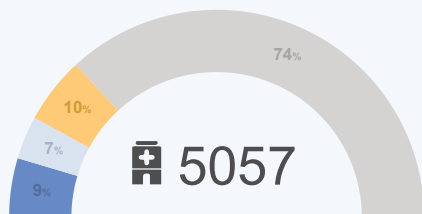
- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

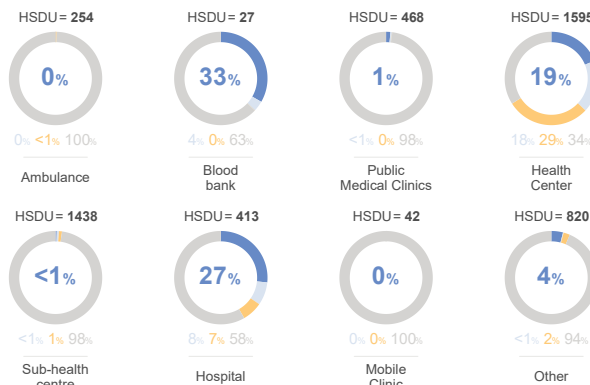


HIV COUNSELLING AND TESTING

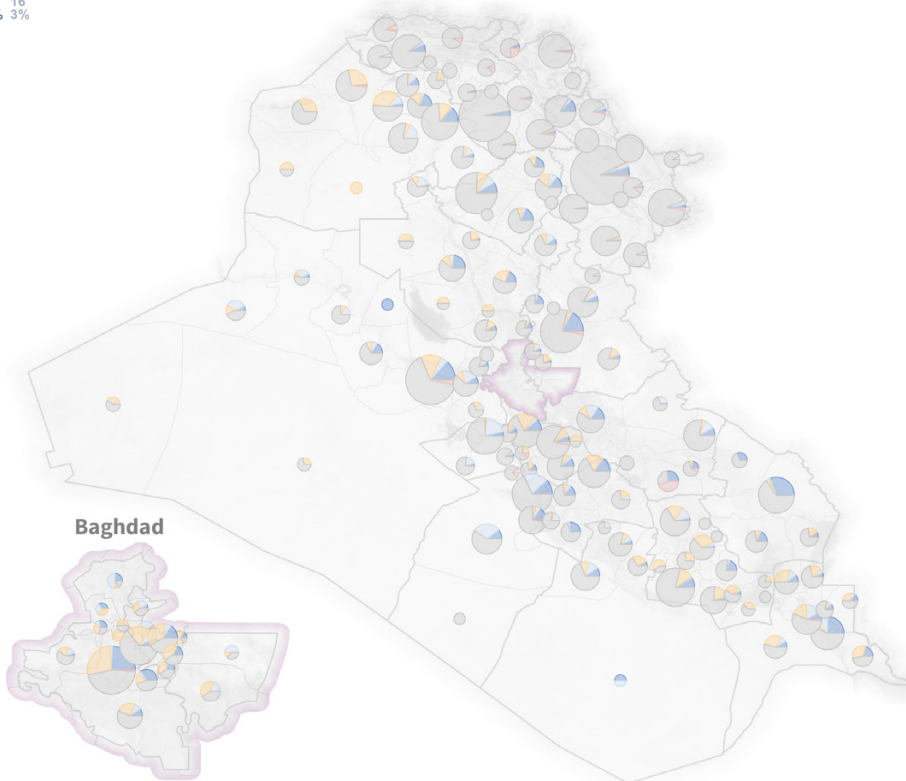
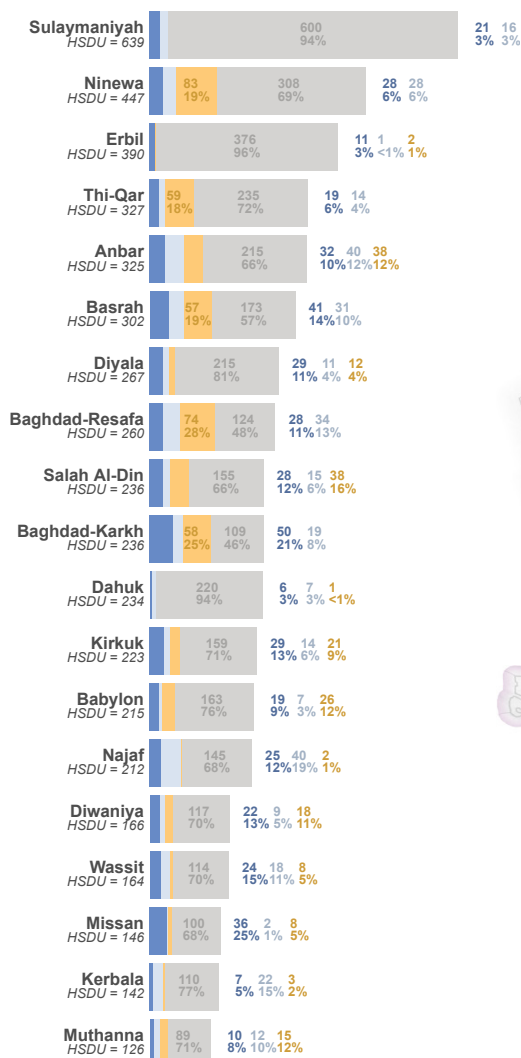
Service availability¹³



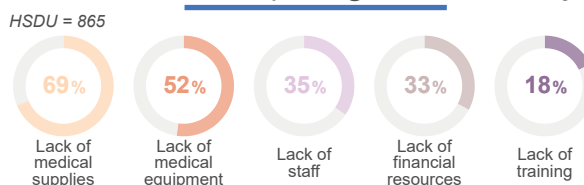
Service availability by HSDU type



Service availability by directorate of health

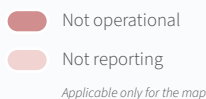
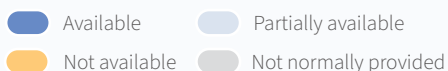


Main barriers impeding service delivery

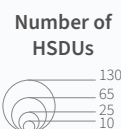


¹³ HIV counselling and testing

Availability status

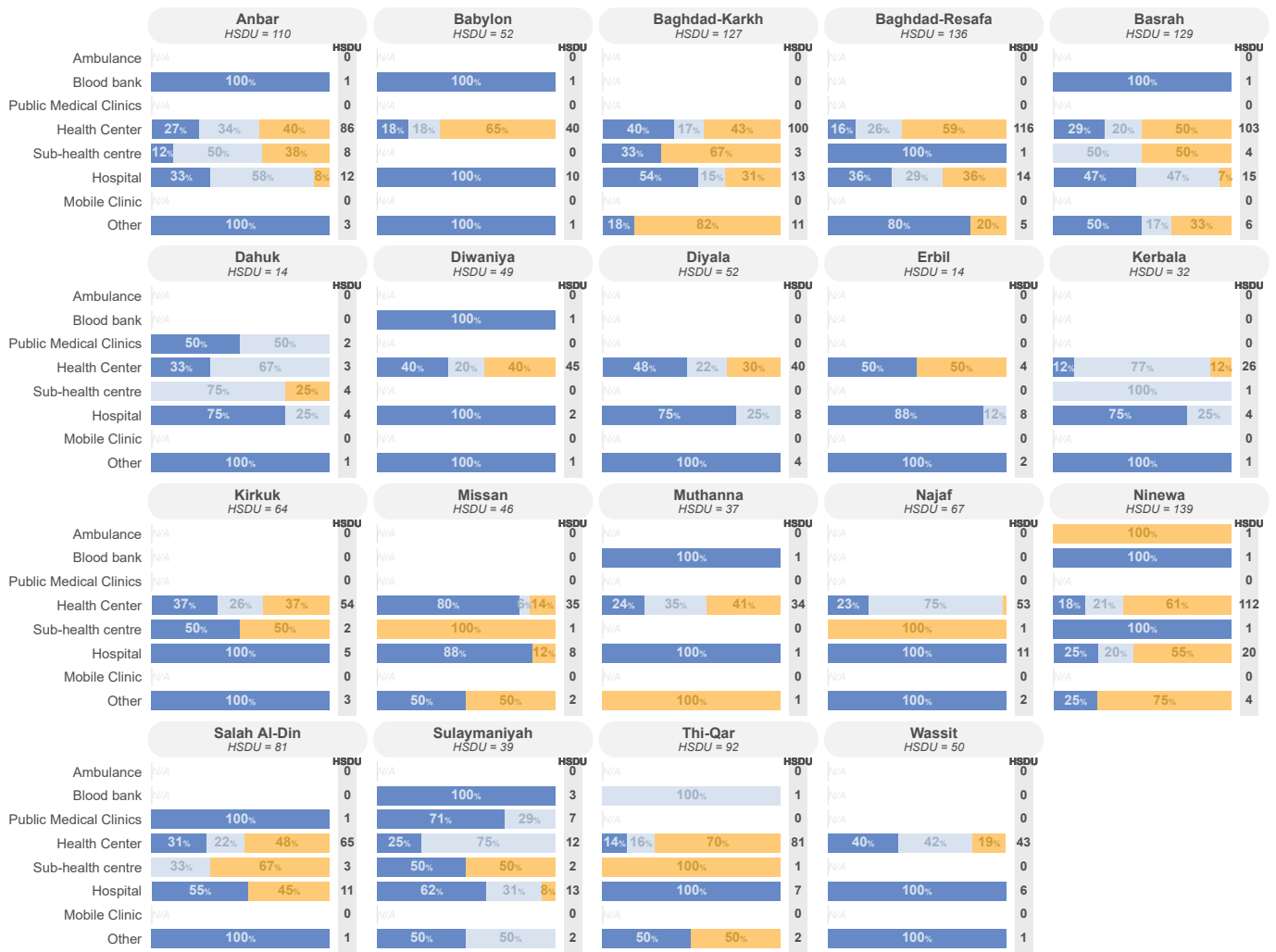


Maps

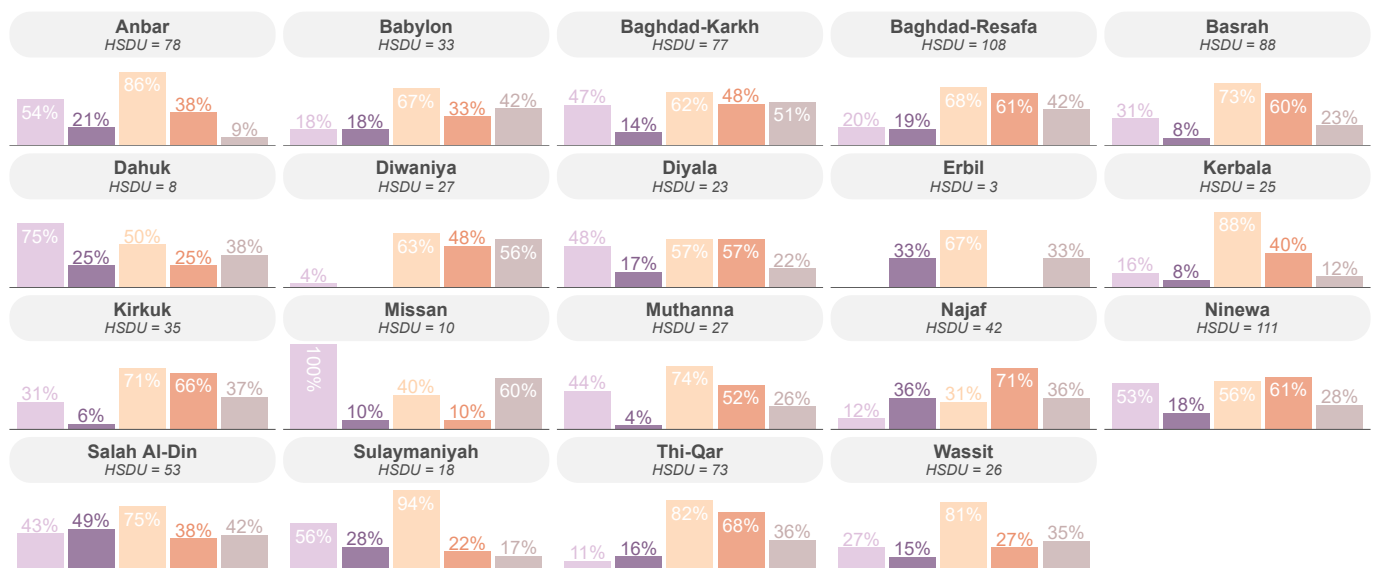




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

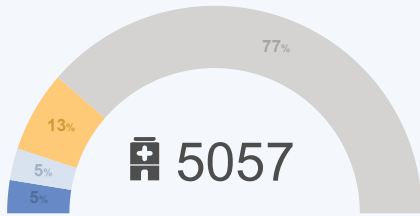
- Lack of staff
- Lack of training
- Lack of supplies
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

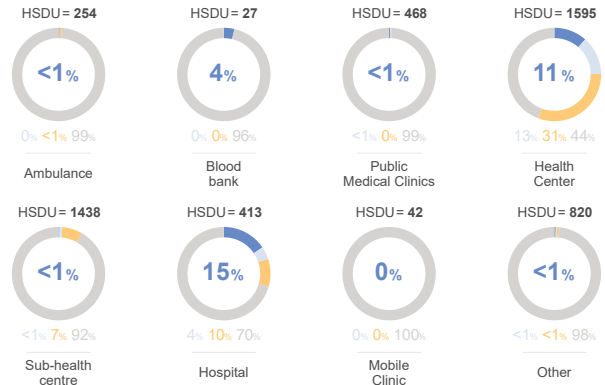


PMTCT

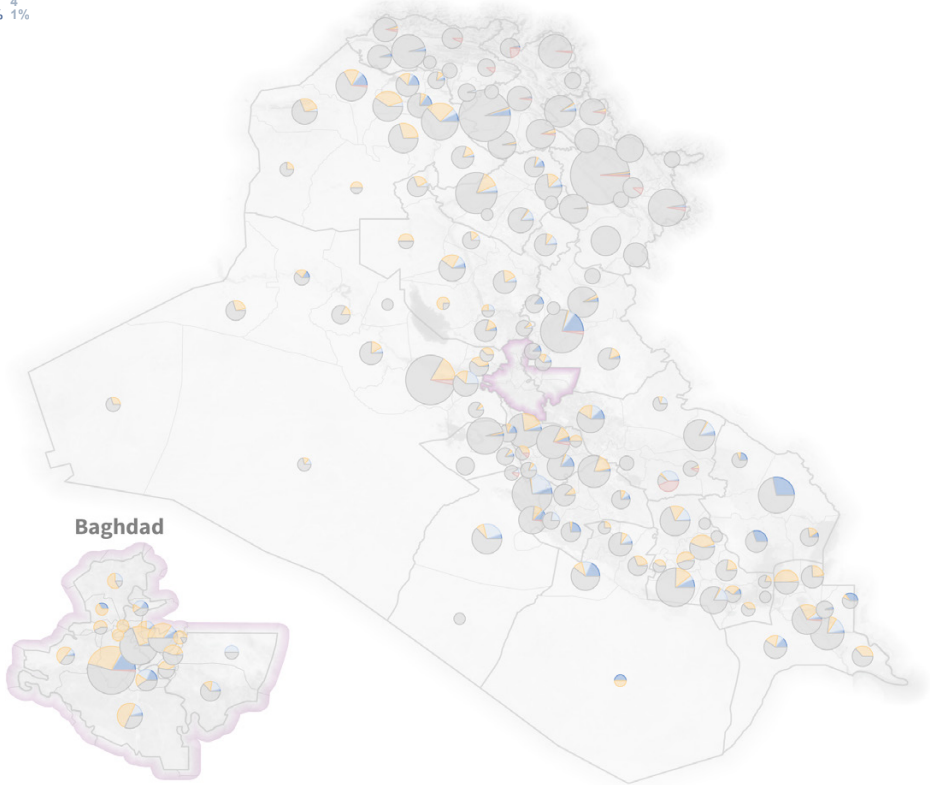
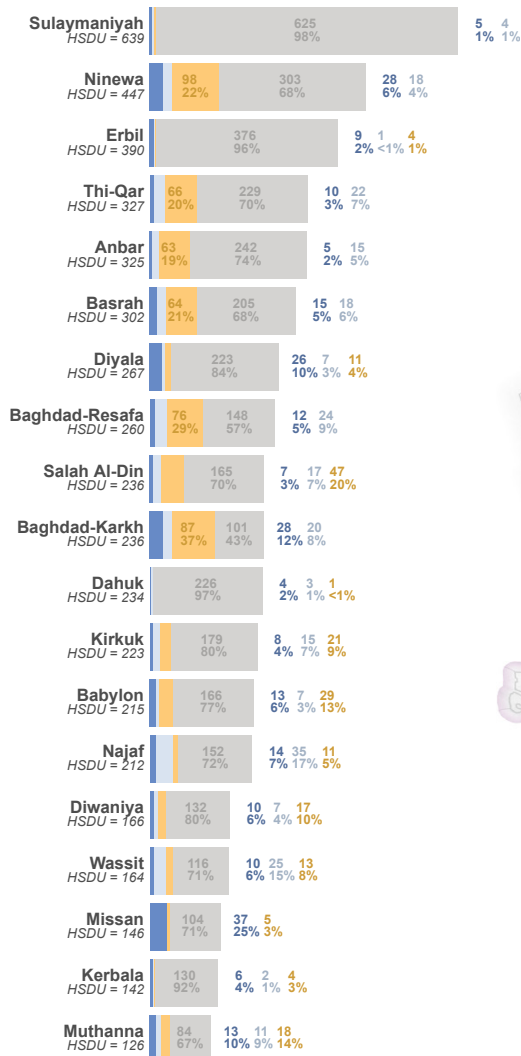
Service availability¹⁴



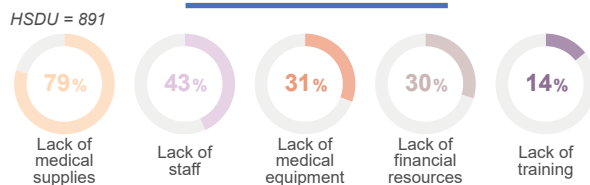
Service availability by HSDU type



Service availability by directorate of health

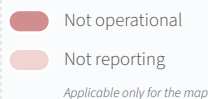
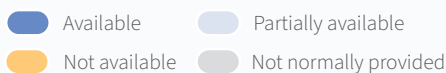


Main barriers impeding service delivery

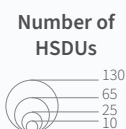


¹⁴ Prophylaxis and treatment of opportunistic infections, prevention of mother-to-child HIV transmission (PMTCT)

Availability status



Maps

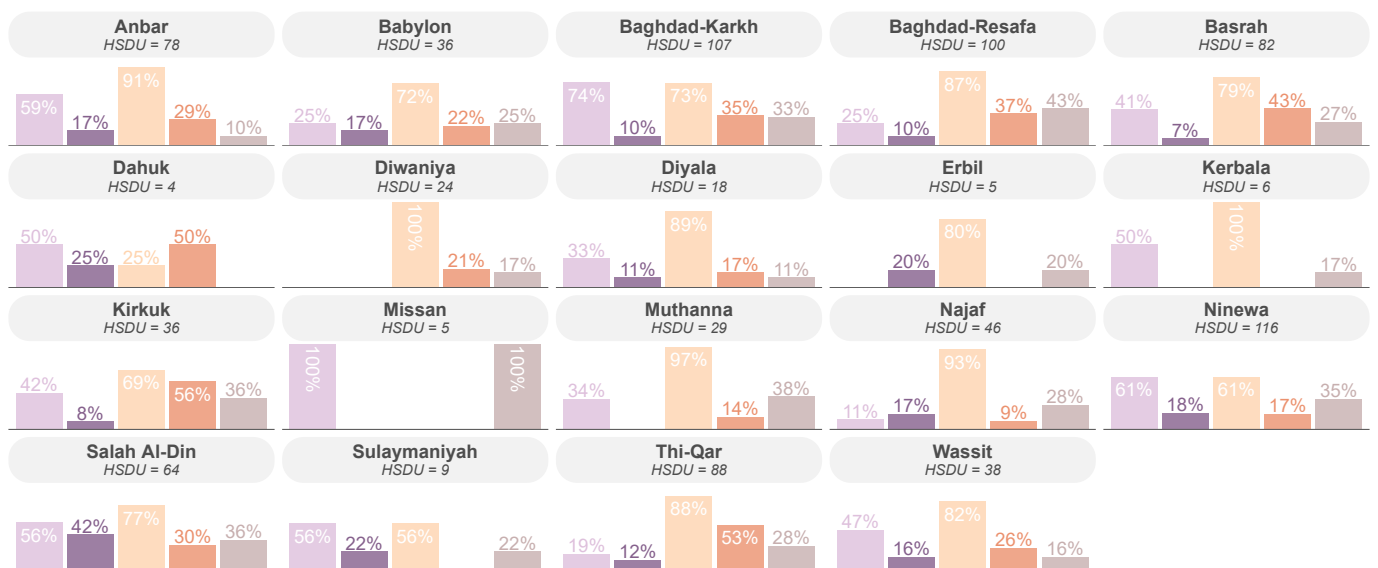




Service availability by HSDU type and by directorate of health*



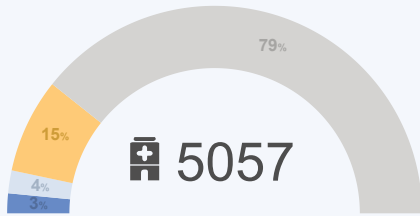
Main barriers impeding service delivery by directorate of health



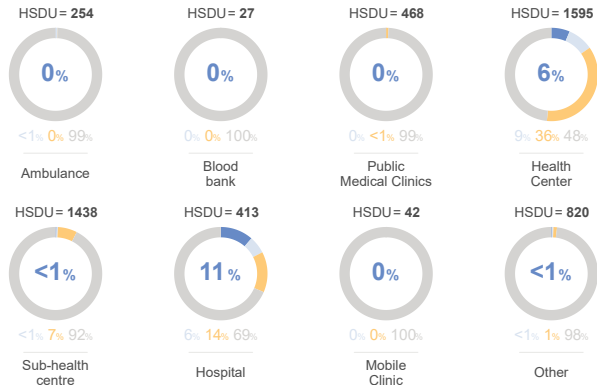


ANTIRETROVIRAL TREATMENT

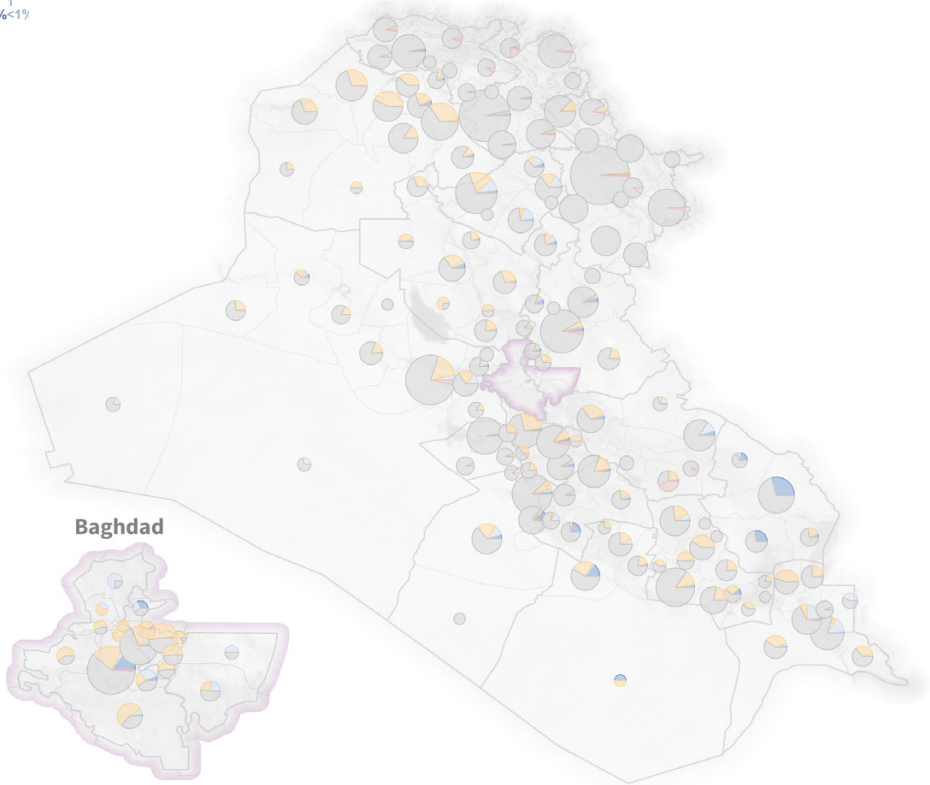
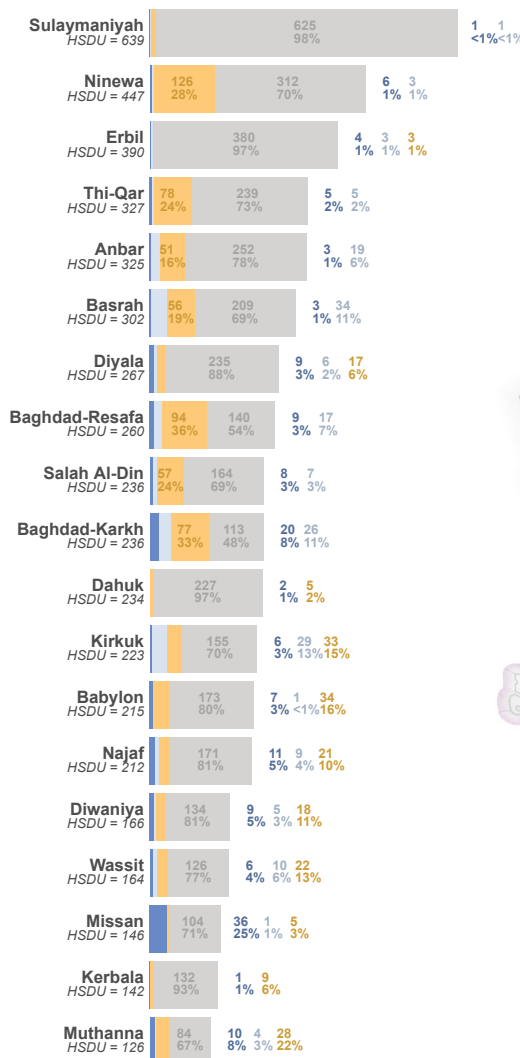
Service availability¹⁵



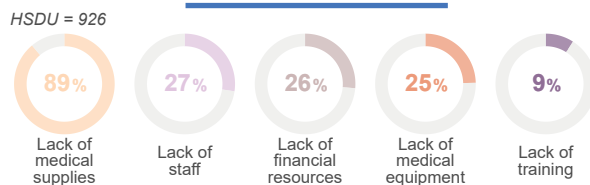
Service availability by HSDU type



Service availability by directorate of health

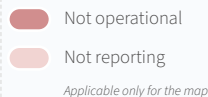


Main barriers impeding service delivery

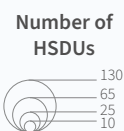


¹⁵ Antiretroviral treatment (ART)

Availability status

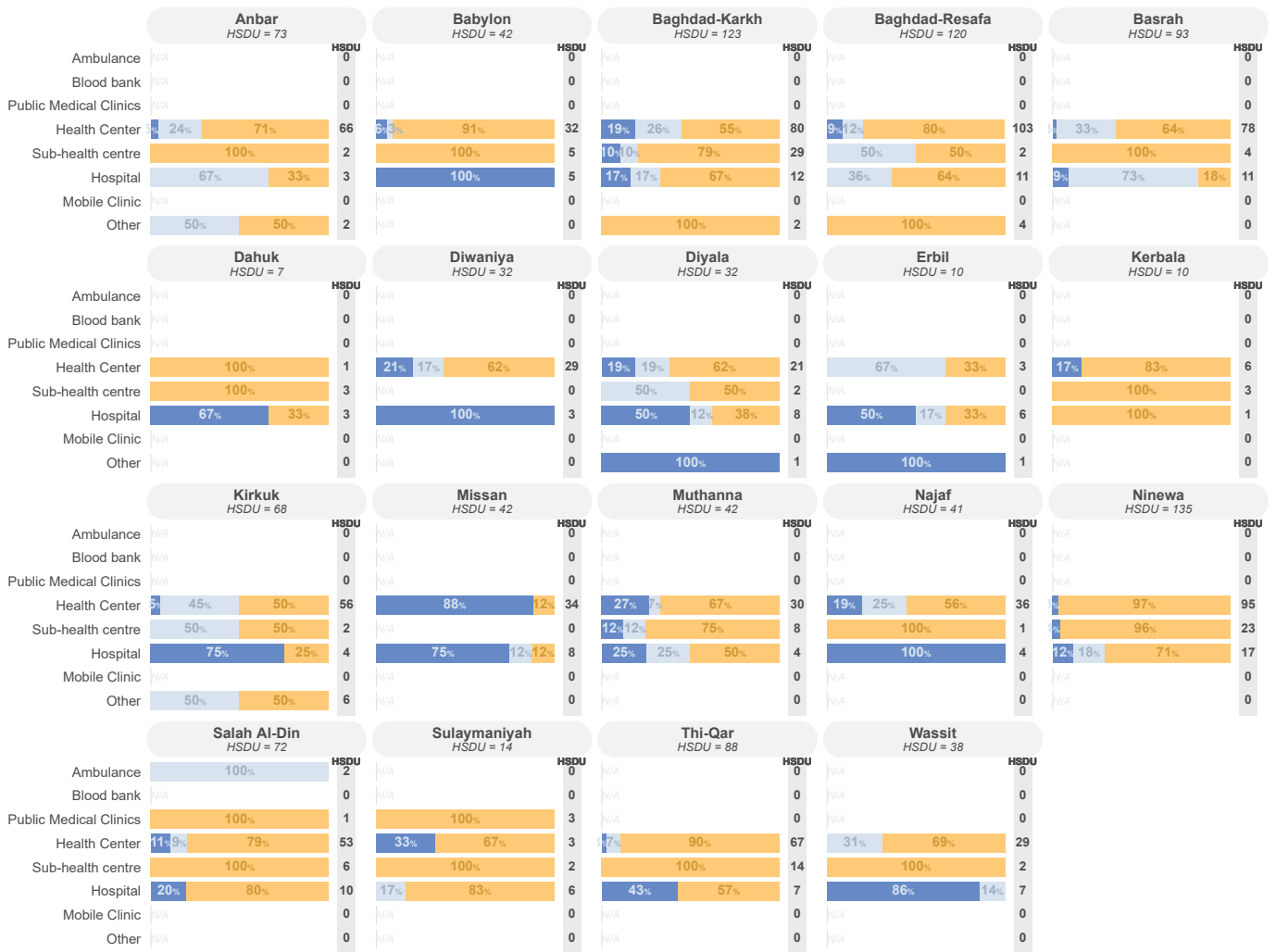


Maps

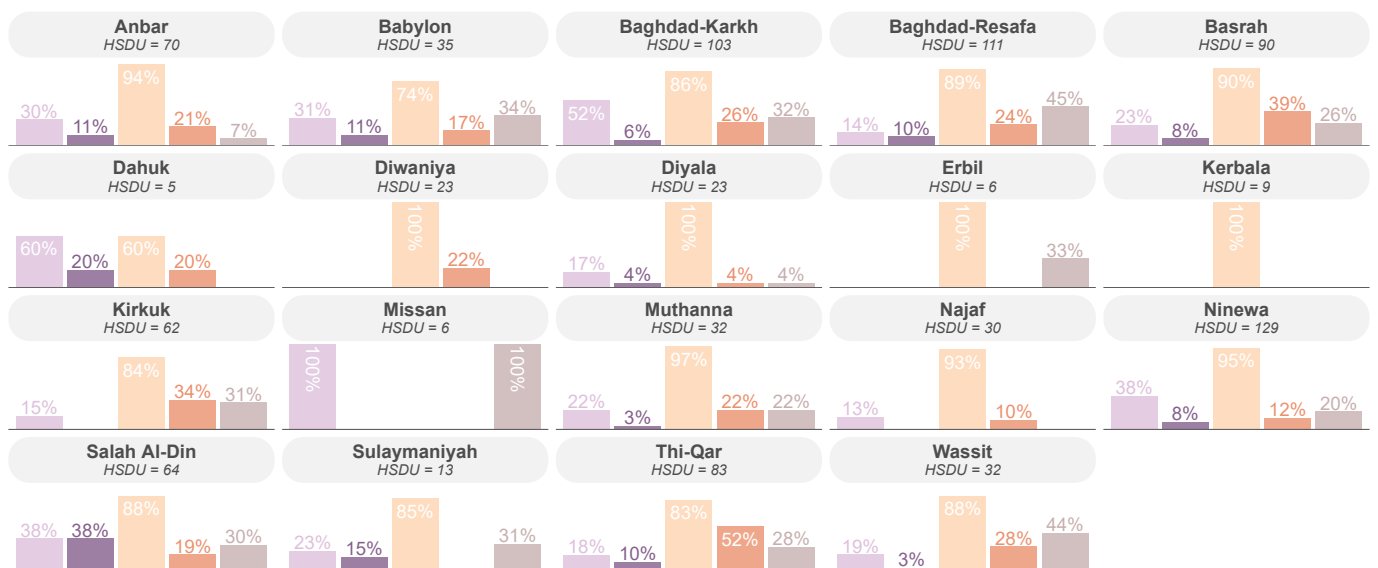




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

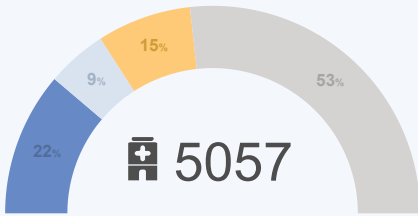
- Lack of staff
- Lack of training
- Lack of supplies
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

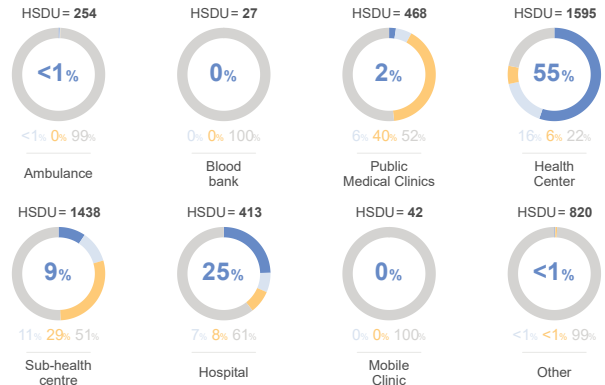


FAMILY PLANNING

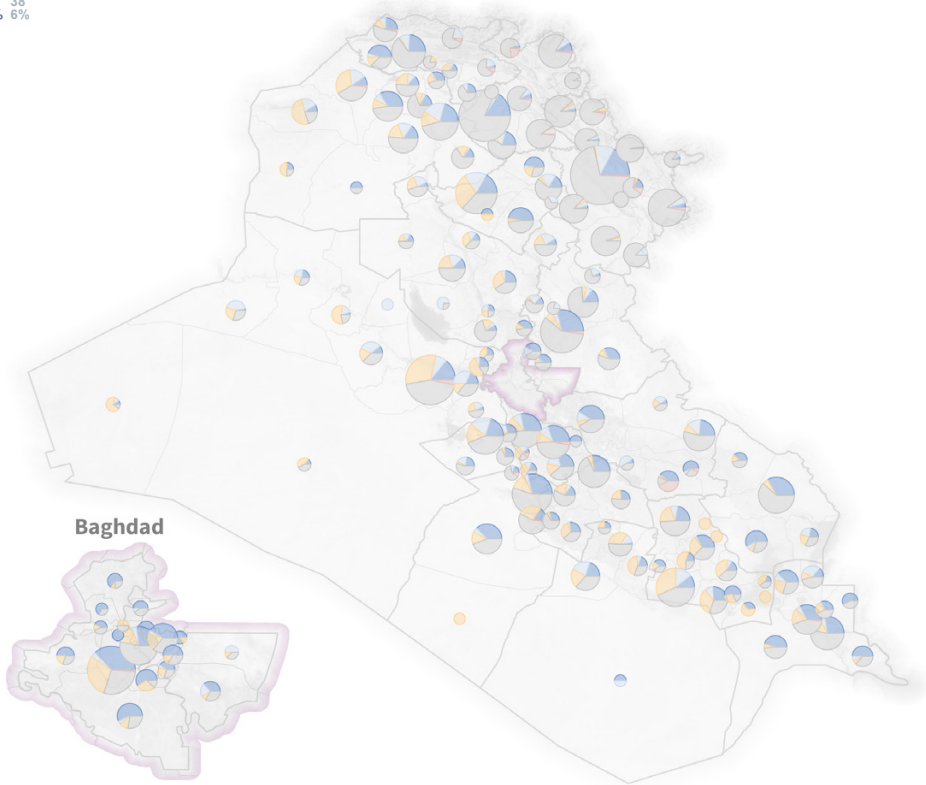
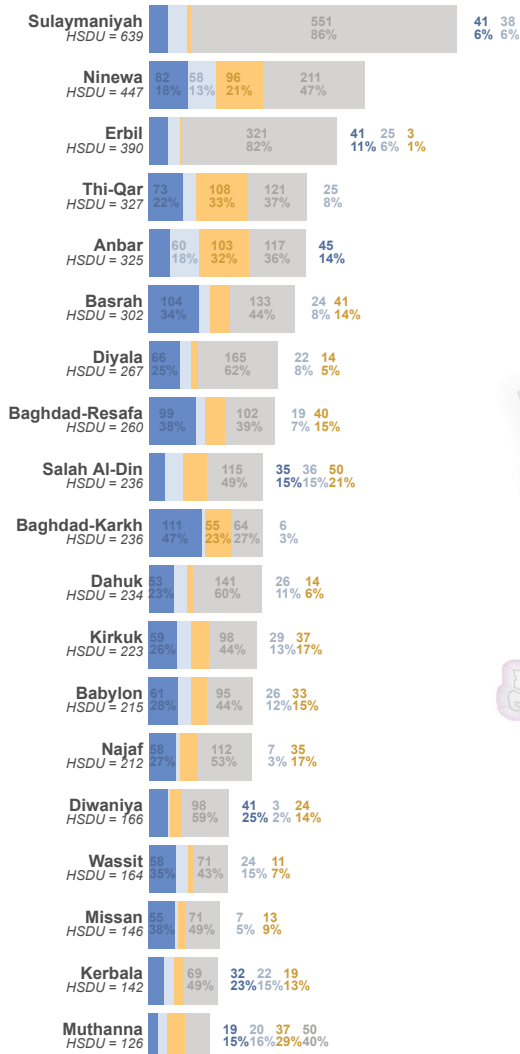
Service availability¹⁶



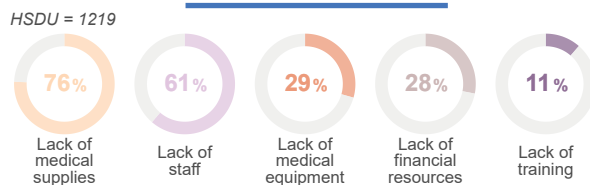
Service availability by HSDU type



Service availability by directorate of health

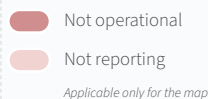
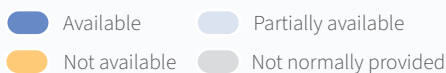


Main barriers impeding service delivery

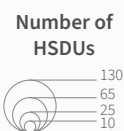


¹⁶ Refers to the availability of pregnancy test and contraceptive methods as per national guidelines

Availability status



Maps

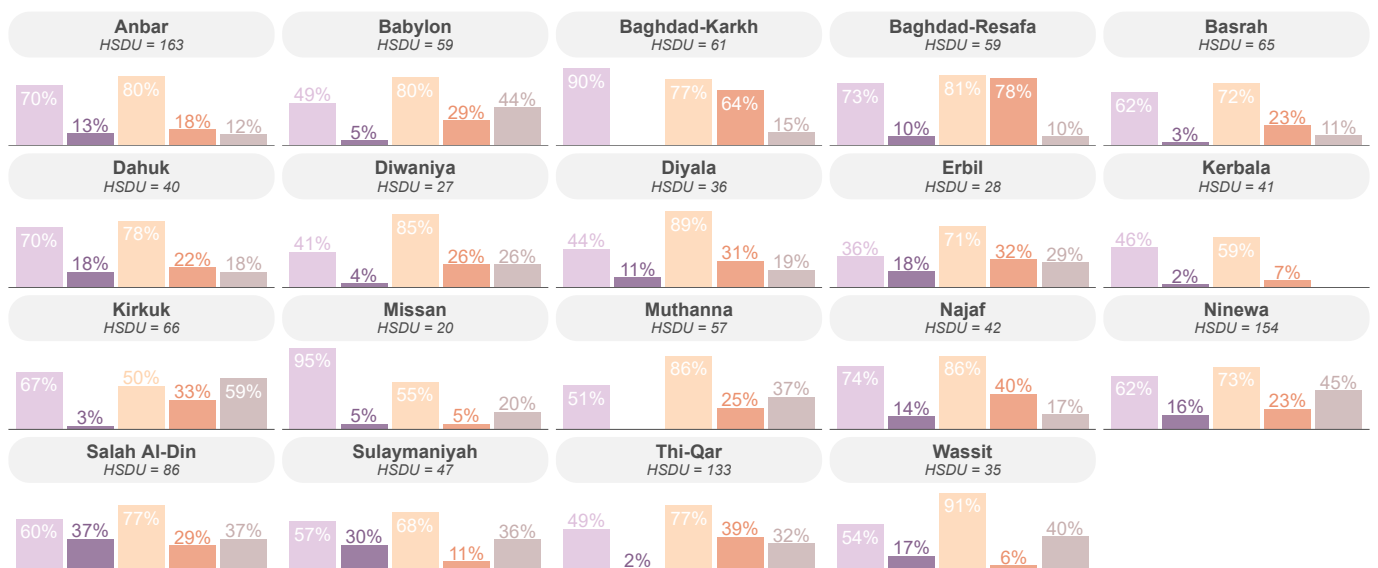




Service availability by HSDU type and by directorate of health*



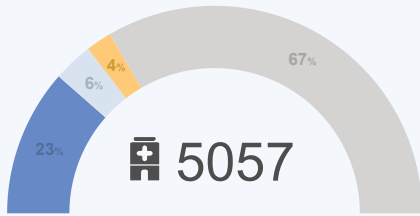
Main barriers impeding service delivery by directorate of health



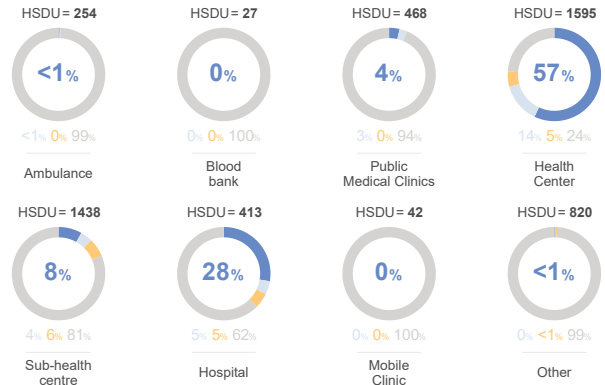


ANTENATAL CARE

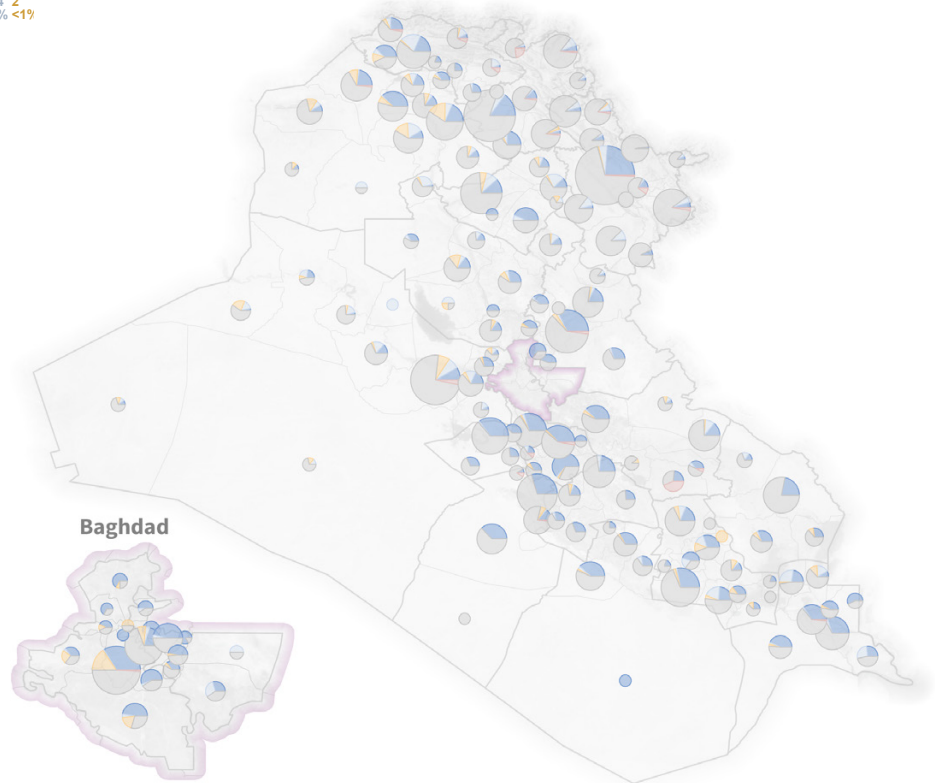
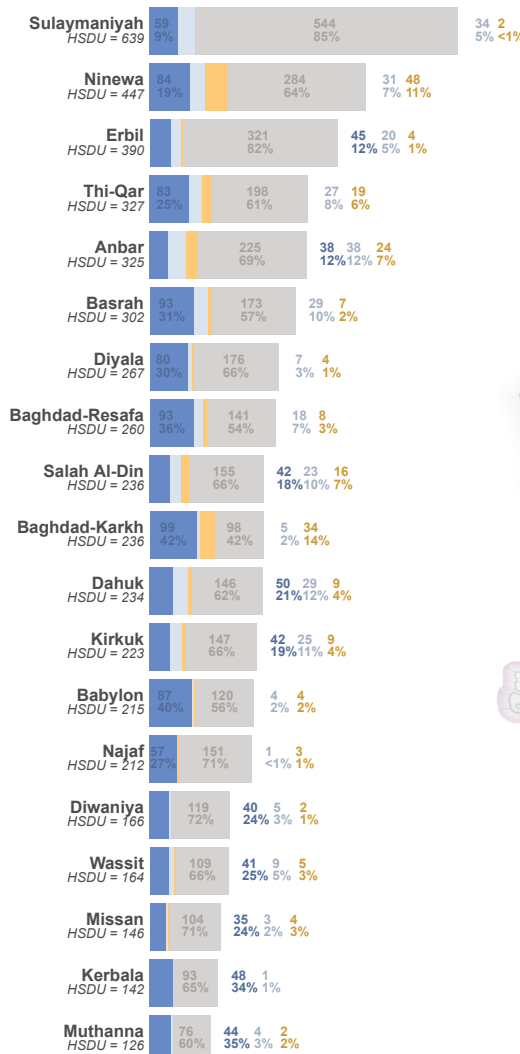
Service availability¹⁷



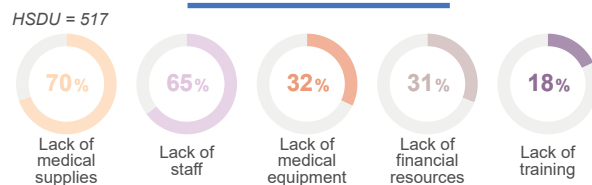
Service availability by HSDU type



Service availability by directorate of health

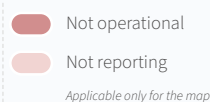
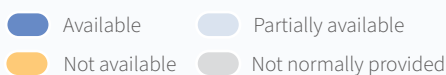


Main barriers impeding service delivery

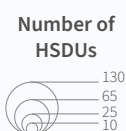


¹⁷ Antenatal care assess pregnancy, birth and emergency plan, respond to problems observed (urine protein test strips, Syphilis RDT) and/or reported STI, advise/counsel on nutrition and breastfeeding, self-care and family planning, intermittent iron and folate supplementation in non-anaemic pregnancy

Availability status

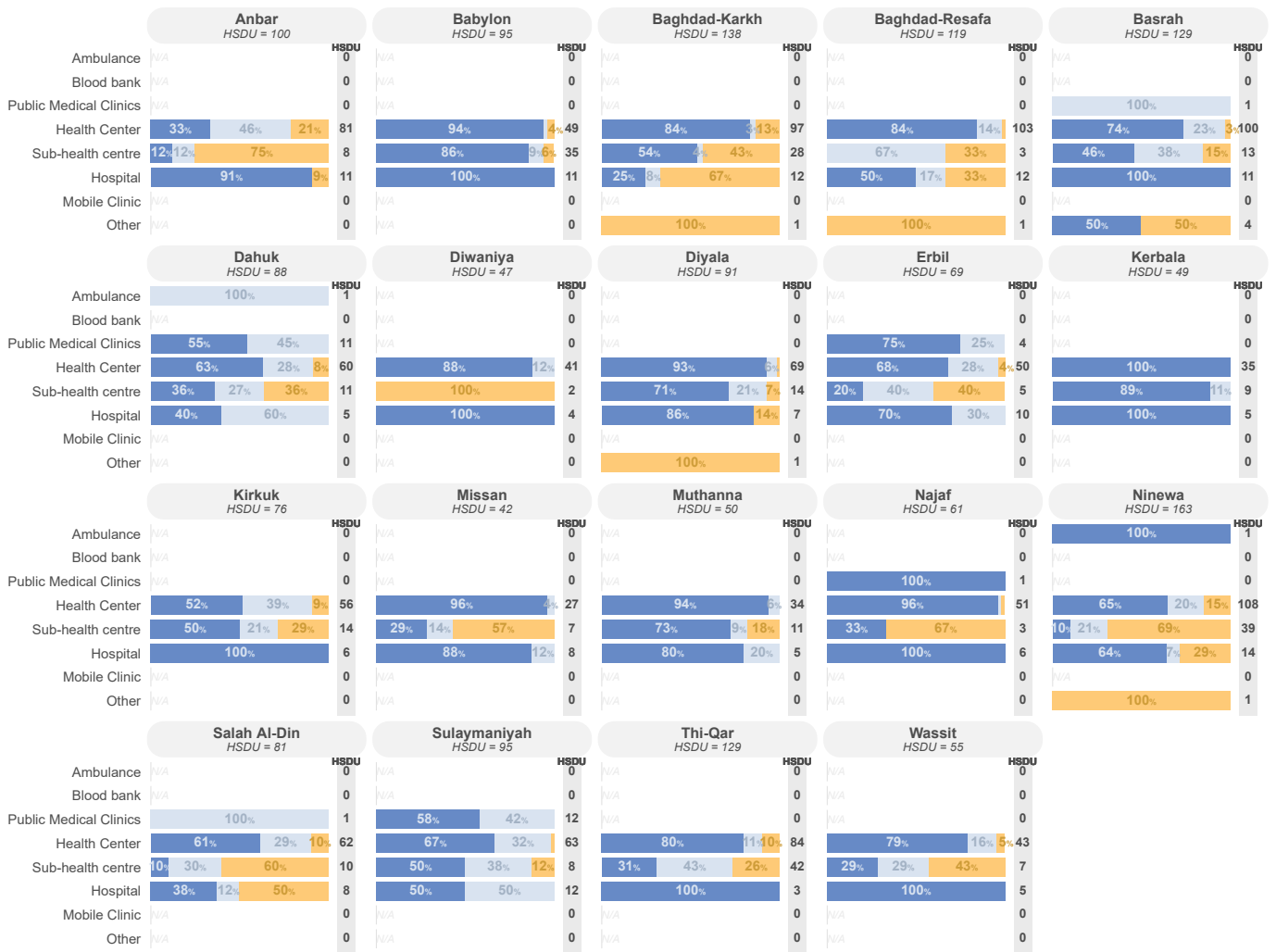


Maps

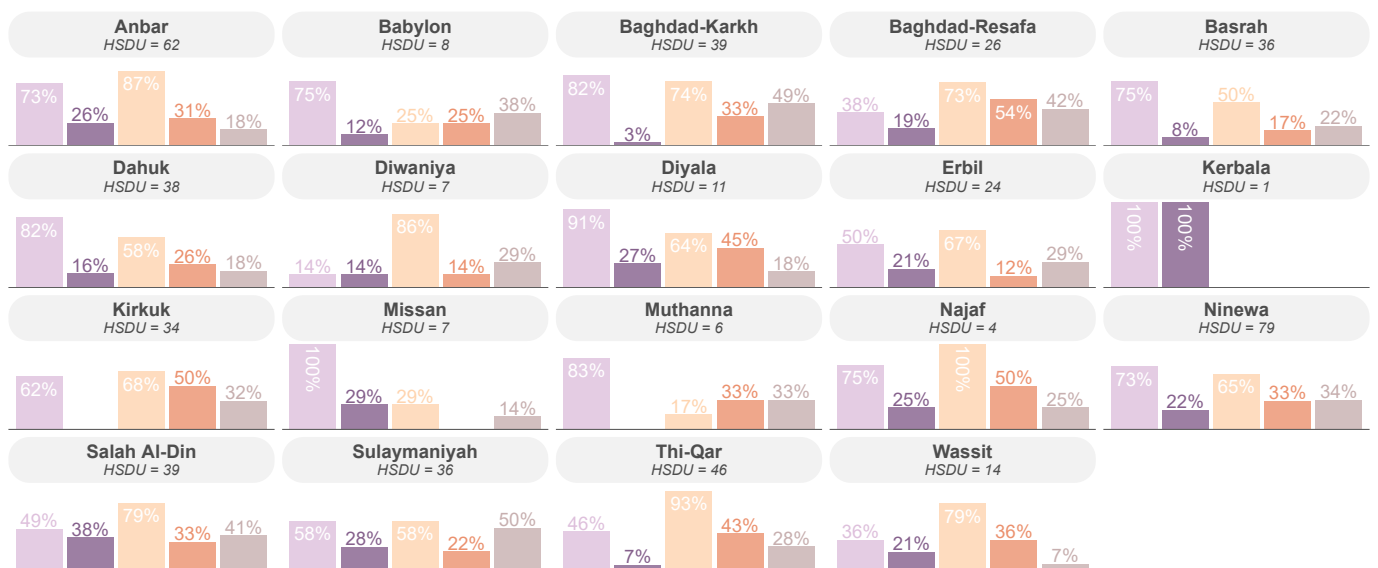




Service availability by HSDU type and by directorate of health*



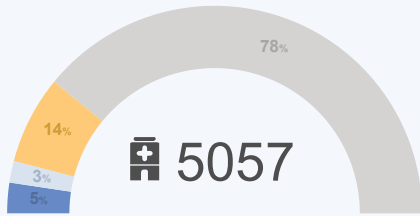
Main barriers impeding service delivery by directorate of health



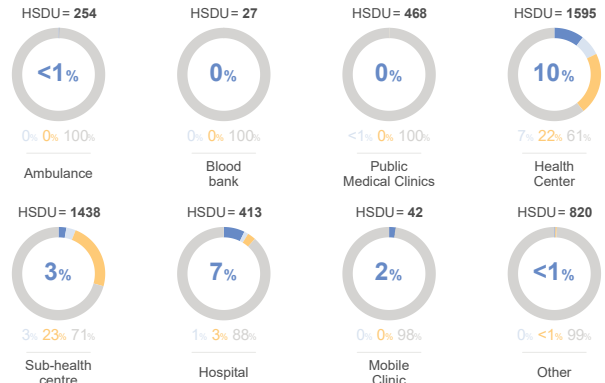


BIRTHS BY LICENSED MIDWIVES

Service availability¹⁸

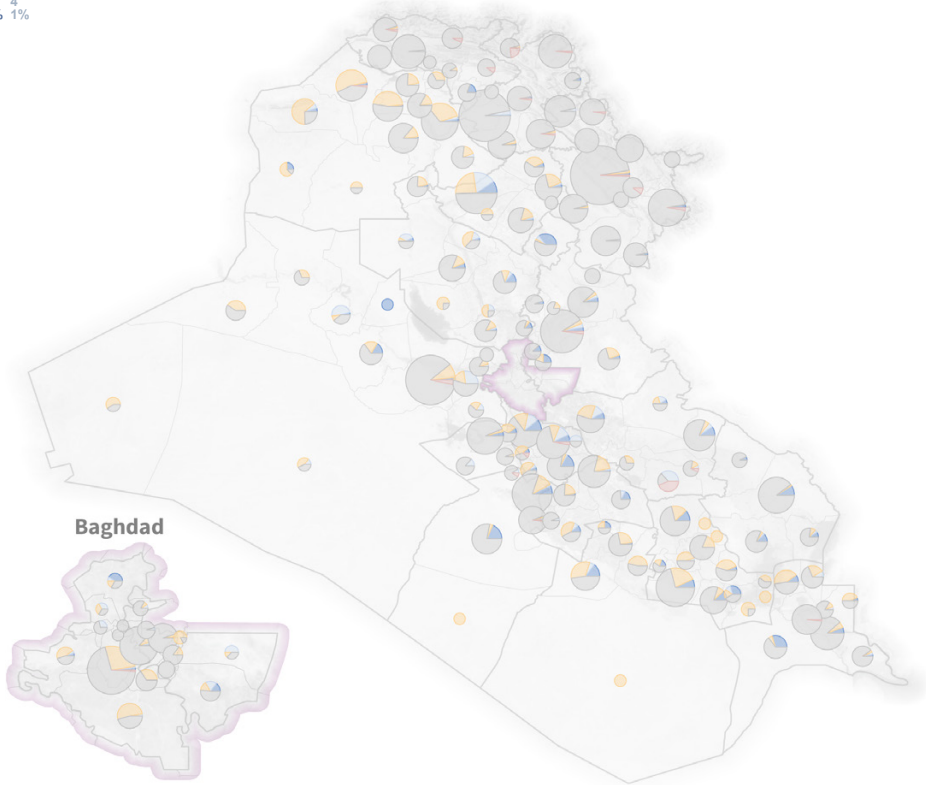


Service availability by HSDU type

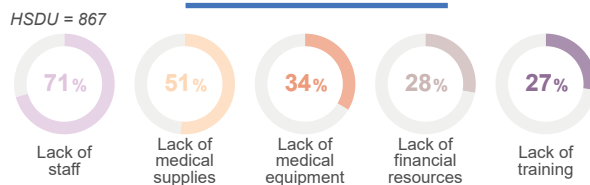


Service availability by directorate of health

Directorate	Total HSDUs	Available	Partially Available	Not Available	Not Normally Provided	Not Reporting
Sulaymaniyah	639	627 (98%)	5 (1%)	4 (1%)	0	0
Ninewa	447	154 (34%)	274 (61%)	10 (2%)	9 (2%)	0
Erbil	390	378 (97%)	4 (1%)	4 (1%)	4 (1%)	0
Thi-Qar	327	77 (24%)	220 (67%)	27 (8%)	3 (1%)	0
Anbar	325	58 (18%)	230 (71%)	10 (3%)	27 (8%)	0
Basrah	302	236 (78%)	21 (7%)	5 (2%)	40 (13%)	0
Diyala	267	230 (86%)	15 (6%)	5 (2%)	17 (6%)	0
Baghdad-Resafa	260	216 (83%)	6 (2%)	14 (5%)	24 (9%)	0
Salah Al-Din	236	161 (68%)	26 (11%)	13 (6%)	36 (15%)	0
Baghdad-Karkh	236	77 (33%)	144 (61%)	8 (3%)	7 (3%)	0
Dahuk	234	226 (97%)	4 (2%)	2 (1%)	2 (1%)	0
Kirkuk	223	140 (63%)	14 (6%)	19 (9%)	50 (22%)	0
Babylon	215	143 (67%)	23 (11%)	19 (9%)	30 (14%)	0
Najaf	212	176 (83%)	18 (8%)	3 (1%)	15 (7%)	0
Diwaniya	166	122 (73%)	9 (5%)	6 (4%)	29 (17%)	0
Wassit	164	107 (65%)	11 (7%)	23 (14%)	23 (14%)	0
Missan	146	126 (86%)	14 (10%)	2 (1%)	4 (3%)	0
Kerbala	142	124 (87%)	5 (4%)	3 (2%)	10 (7%)	0
Muthanna	126	70 (56%)	10 (8%)	3 (2%)	43 (34%)	0



Main barriers impeding service delivery



¹⁸ Clean home deliveries includes distribution of clean delivery kits to visibly pregnant women, IEC and behavioral change communications, knowledge of danger signs and where/when to go for help, promotion of exclusive breastfeeding, and IYCF practices

Availability status

- Available
- Partially available
- Not available
- Not normally provided

- Not operational
- Not reporting

Applicable only for the map

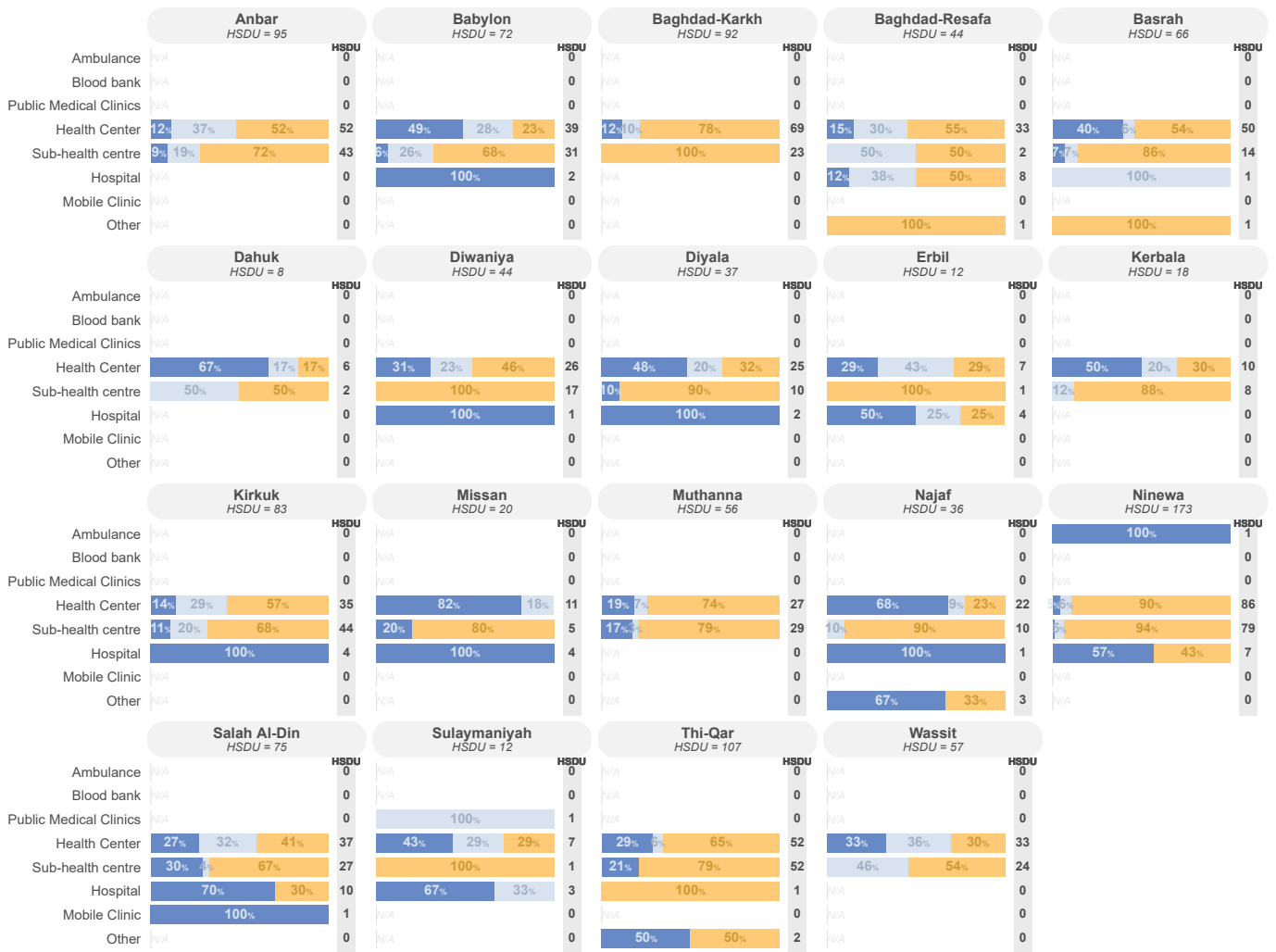
Maps

Number of HSDUs

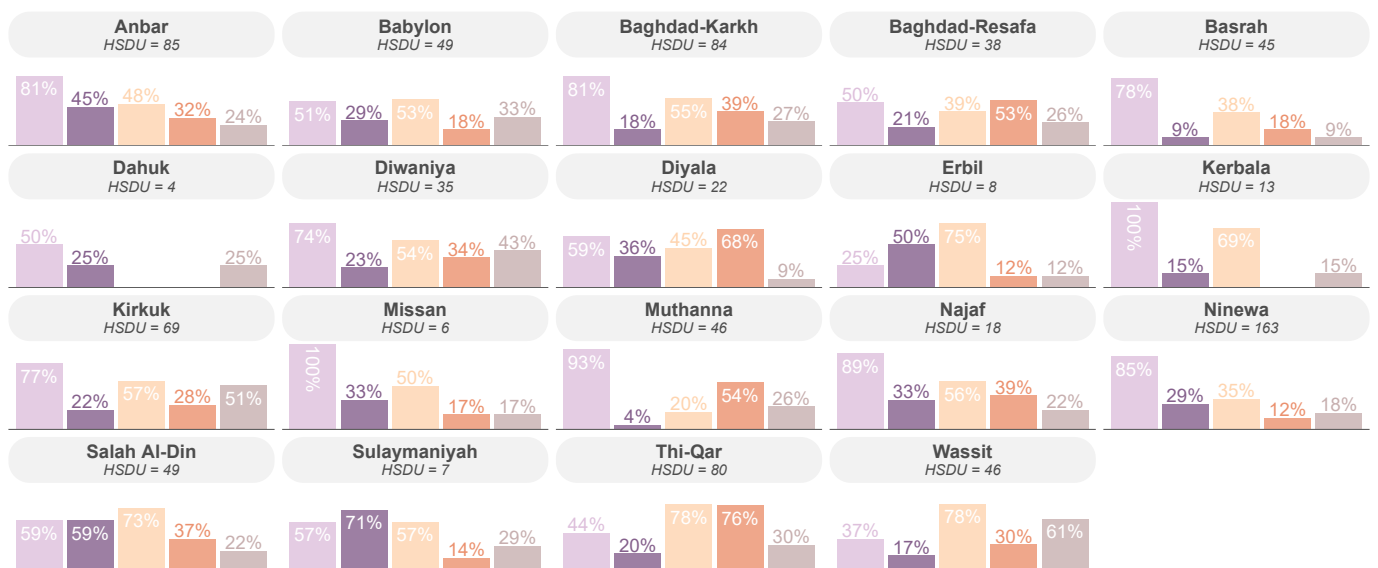




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

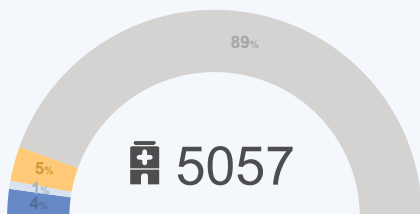
- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

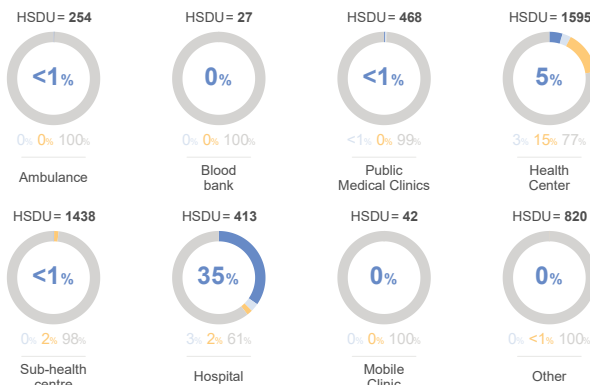


SKILLED CARE DURING CHILDBIRTH

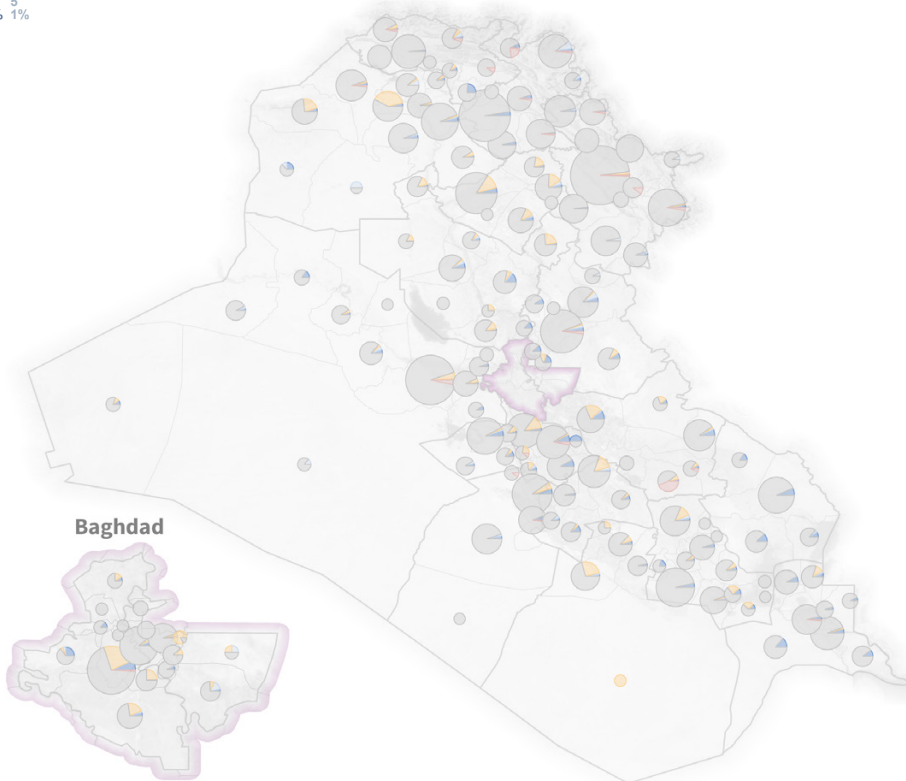
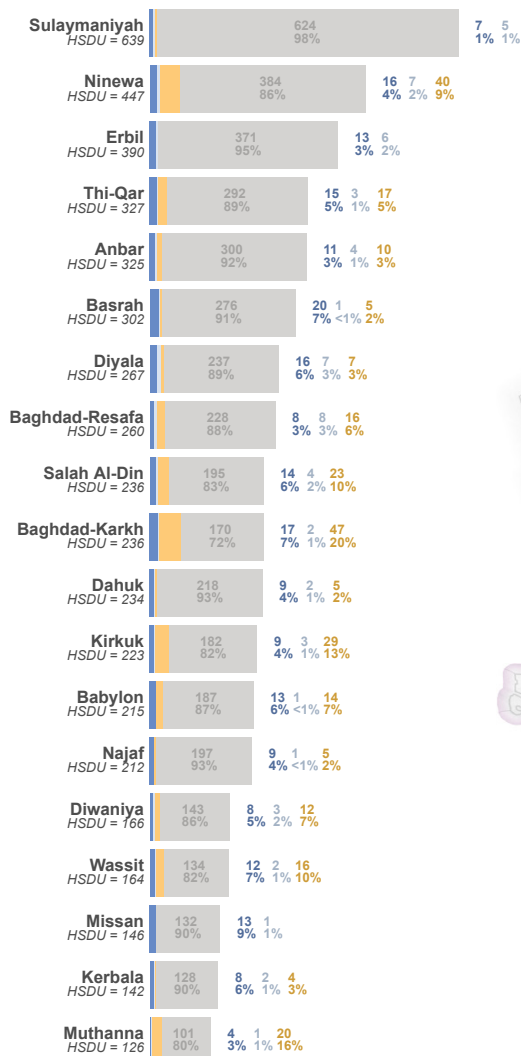
Service availability¹⁹



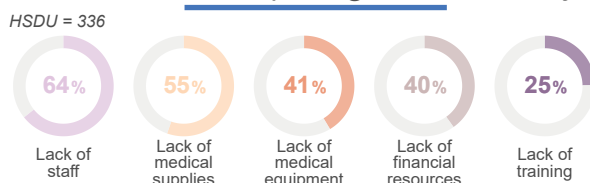
Service availability by HSDU type



Service availability by directorate of health

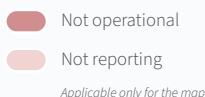
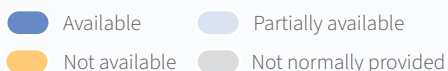


Main barriers impeding service delivery

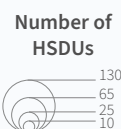


¹⁹ Skilled care during childbirth includes early essential newborn care: preparing for birth, assess the presence of labor, stage, fill WHO partograph and monitor, manage conditions accordingly, dry baby, clean cord care, basic newborn resuscitation, skin-to-skin contact, oxytocin, early and exclusive breastfeeding, eye prophylaxis (available magnesium sulphate and antenatal steroid)

Availability status

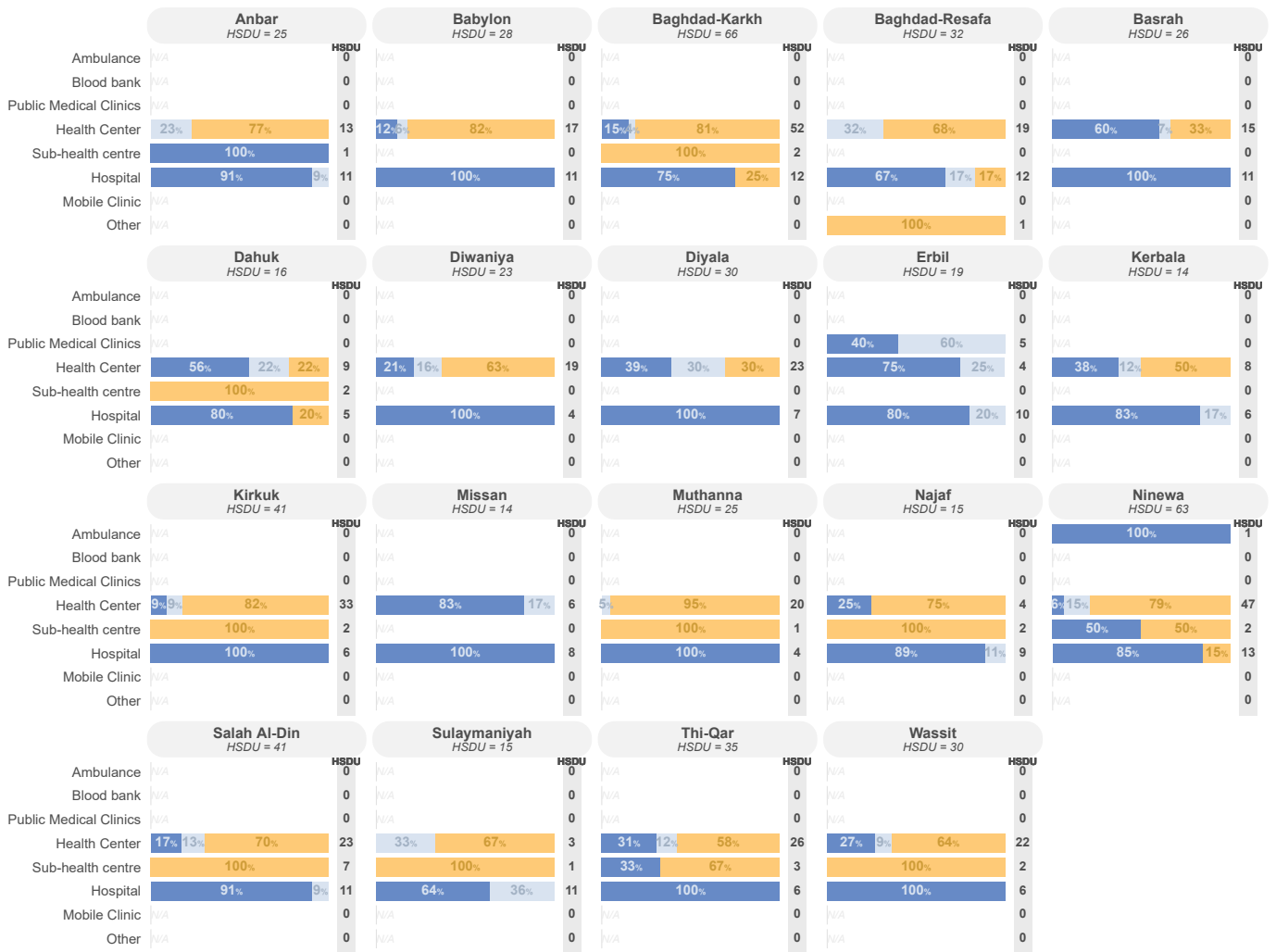


Maps

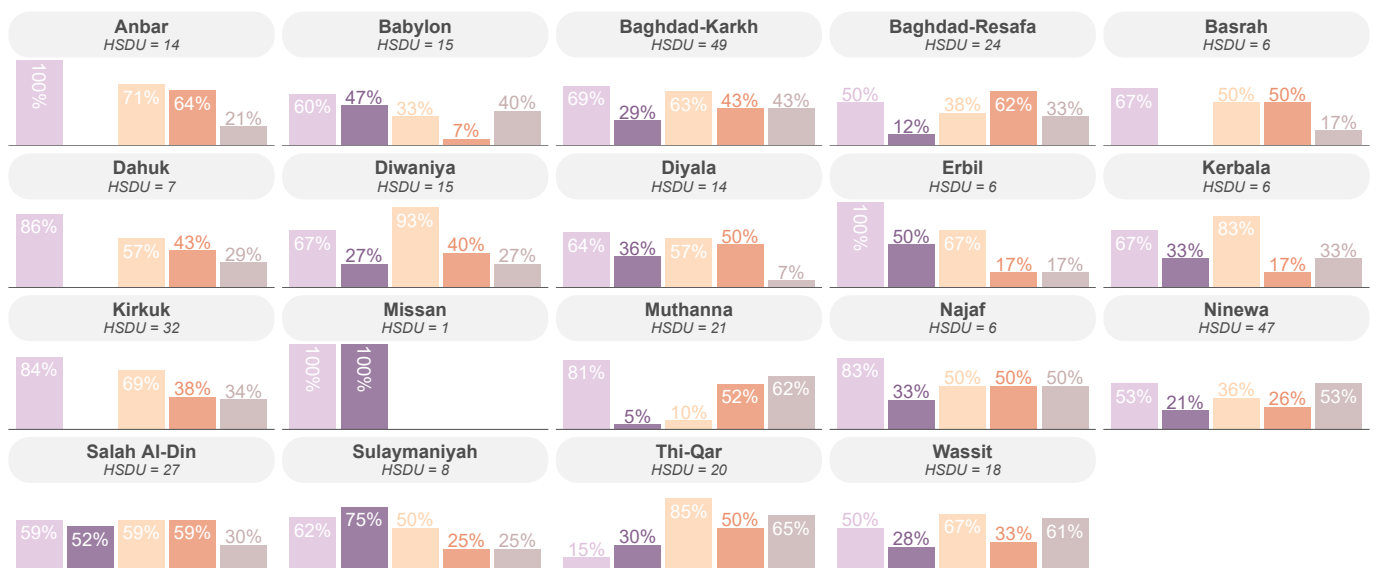




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

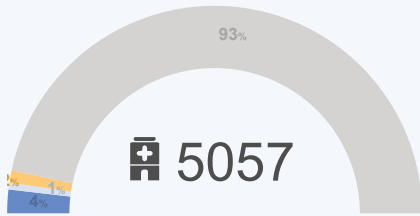
- Lack of staff
- Lack of training
- Lack of supplies
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

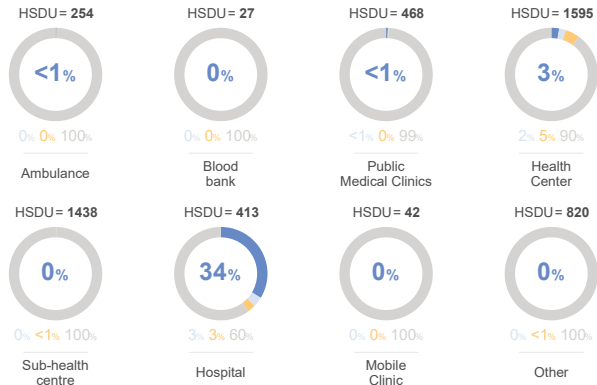


BASIC EMERGENCY OBSTETRIC CARE

Service availability²⁰

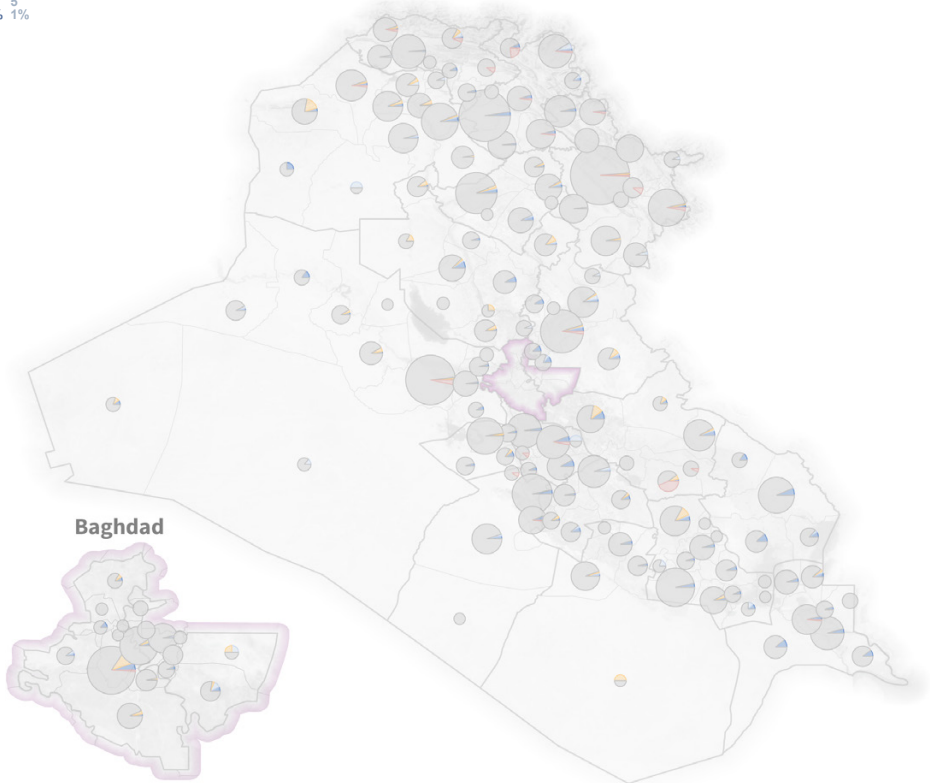


Service availability by HSDU type

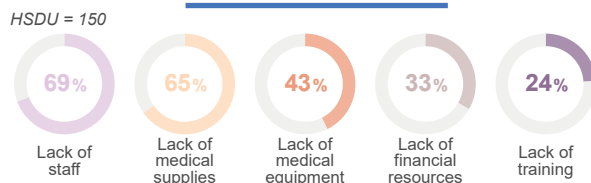


Service availability by directorate of health

Directorate	Total HSDUs	Availability	Not available	Partially available	Not normally provided	Not reporting
Sulaymaniyah	639	98%	6	5	1	1%
Ninewa	447	92%	13	6	17	3% 1% 4%
Erbil	390	95%	13	5	3	1%
Thi-Qar	327	92%	15	3	8	5% 1% 2%
Anbar	325	95%	10	2	5	3% 1% 2%
Basrah	302	94%	17	1	1	6% <1% <1%
Diyala	267	91%	13	7	5	5% 3% 2%
Baghdad-Resafa	260	92%	7	7	7	3% 3% 3%
Salah Al-Din	236	89%	11	3	11	5% 1% 5%
Baghdad-Karkh	236	89%	10	1	16	4% <1% 7%
Dahuk	234	95%	5	3	3	2% 1% 1%
Kirkuk	223	93%	8	3	4	4% 1% 2%
Babylon	215	94%	11	1	<1	5% <1%
Najaf	212	96%	8	1	<1	4% <1%
Diwaniya	166	93%	7	3	2	4% 2% 1%
Wassit	164	87%	10	1	10	6% 1% 6%
Missan	146	90%	13	1	<1	9% 1%
Kerbala	142	95%	5	2	1	4% 2% 1%
Muthanna	126	94%	4	1	2	3% 1% 2%

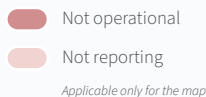
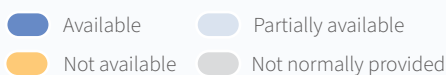


Main barriers impeding service delivery

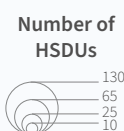


²⁰ Basic emergency obstetric care (BEmOC) means parenteral antibiotics, oxytocic/anticonvulsant drugs, antenatal steroid, manual removal of placenta, removal of retained products with manual vacuum aspiration (MVA), assisted vaginal delivery, health facility functioning 24/7

Availability status

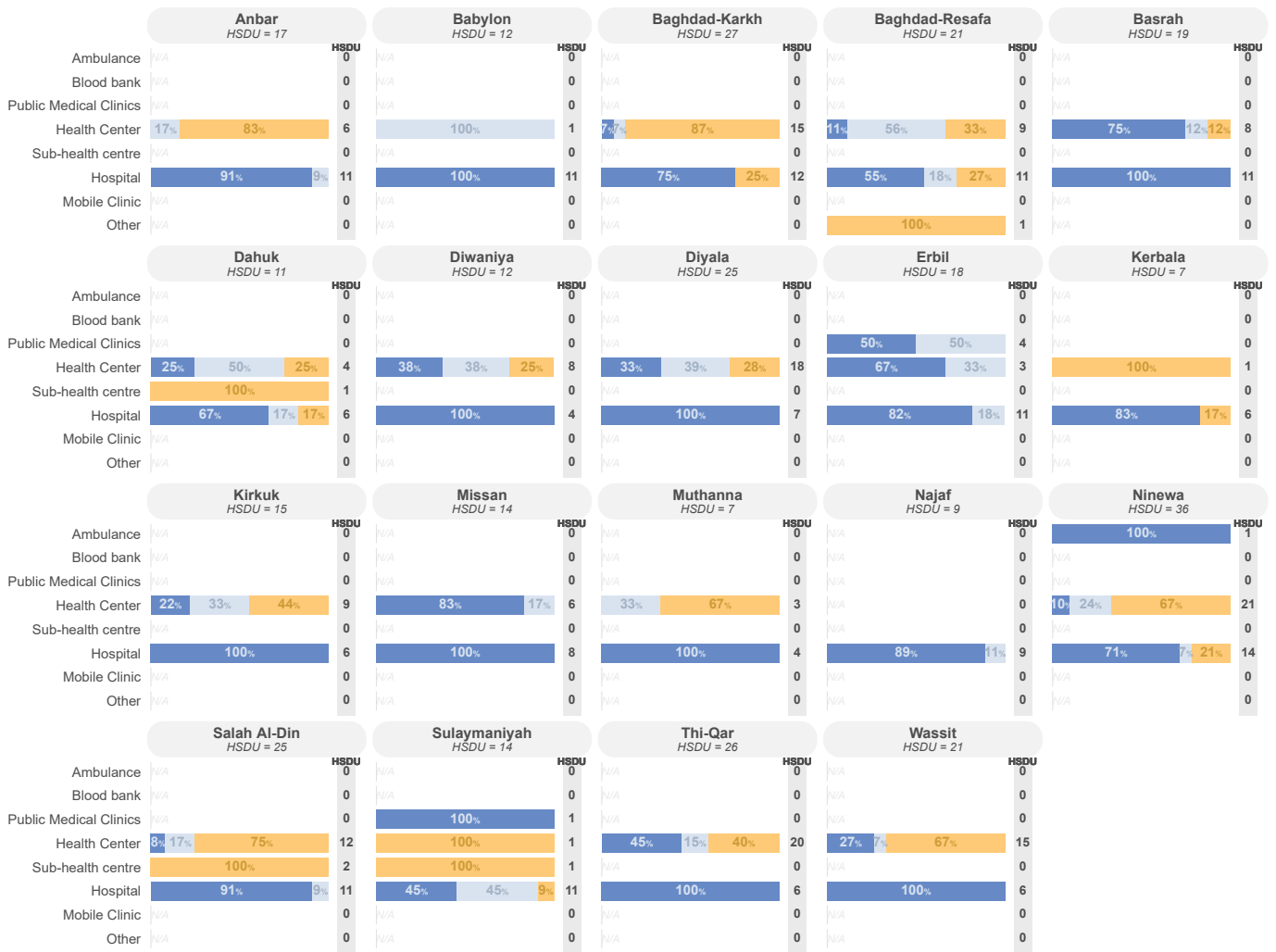


Maps

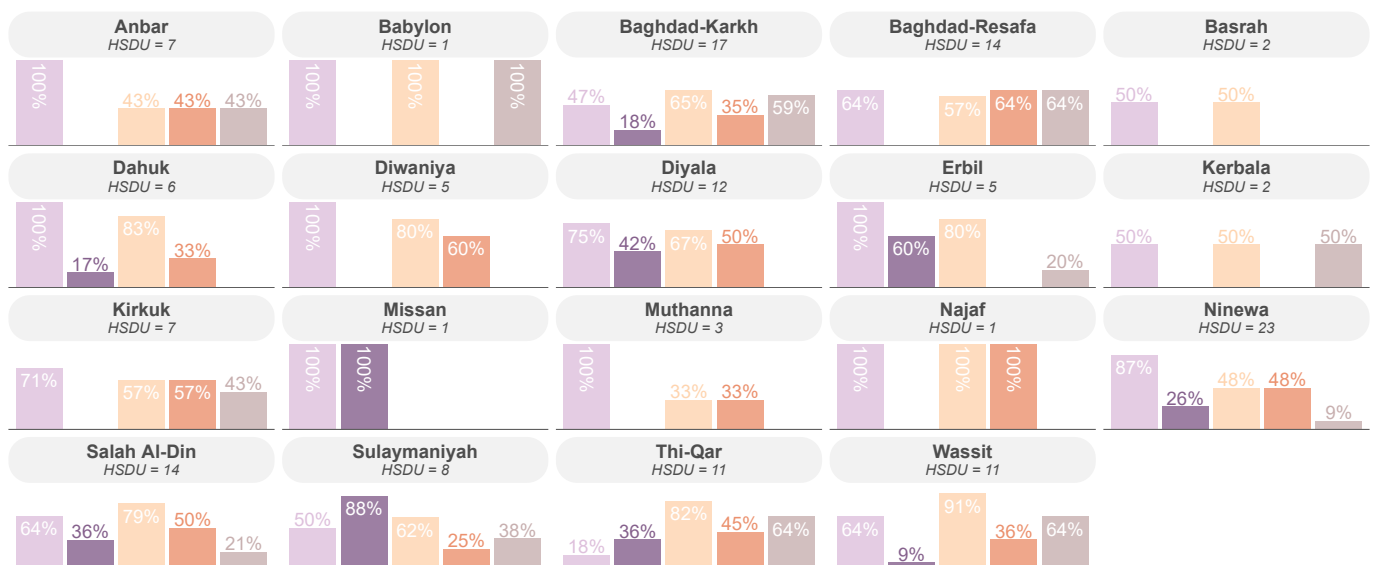




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

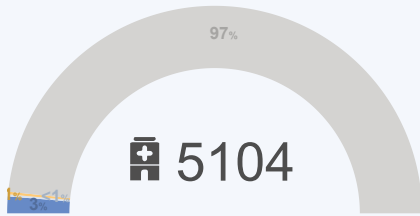
- Lack of staff
- Lack of training
- Lack of supplies
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

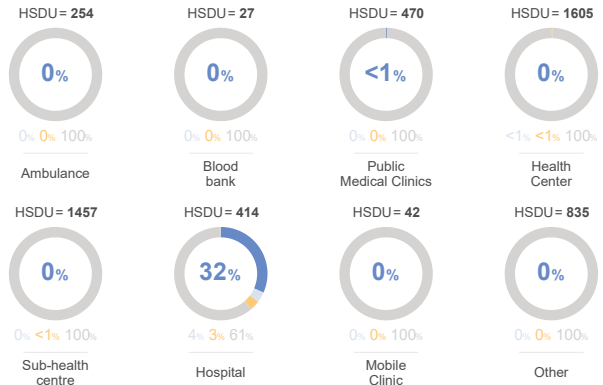


COMPREHENSIVE EMERGENCY OBSTETRIC CARE

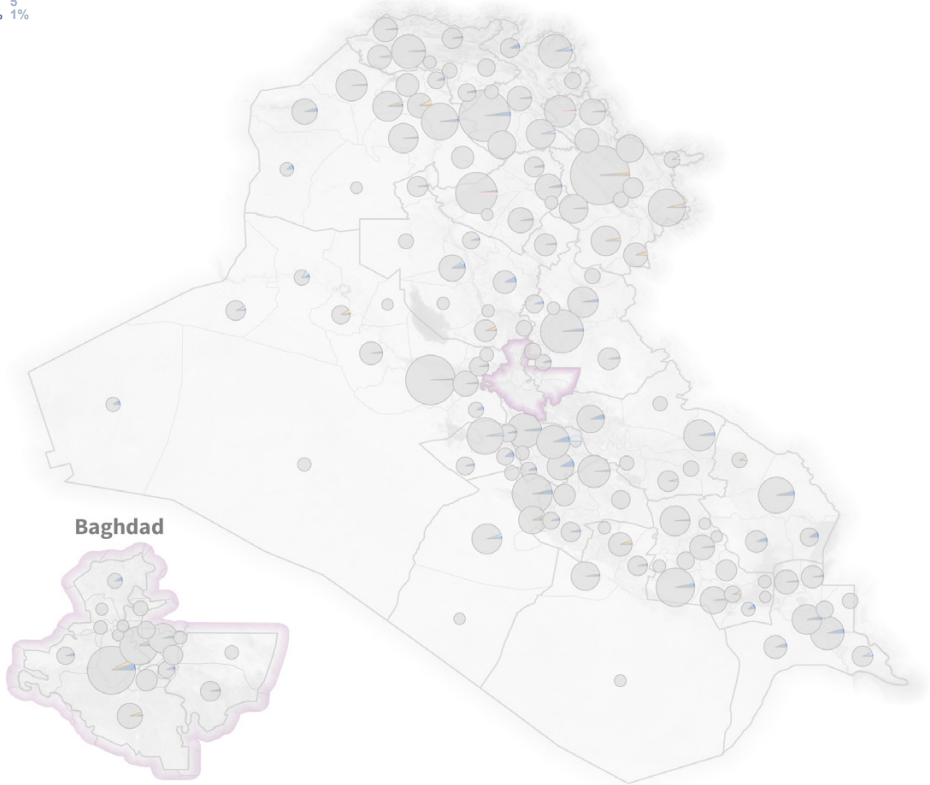
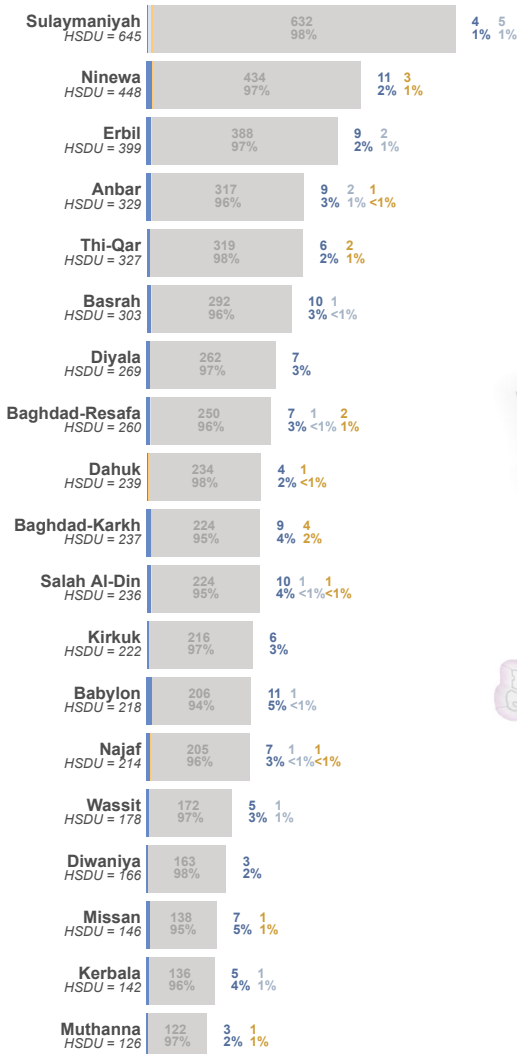
Service availability²¹



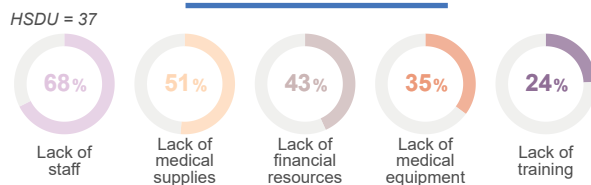
Service availability by HSDU type



Service availability by directorate of health

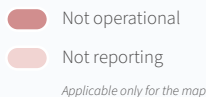
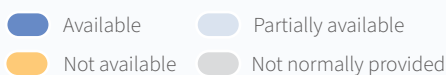


Main barriers impeding service delivery

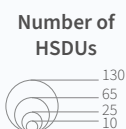


²¹ Comprehensive Emergency Obstetric Care (CEmOC) includes BEmOC, caesarean section, safe blood transfusion

Availability status

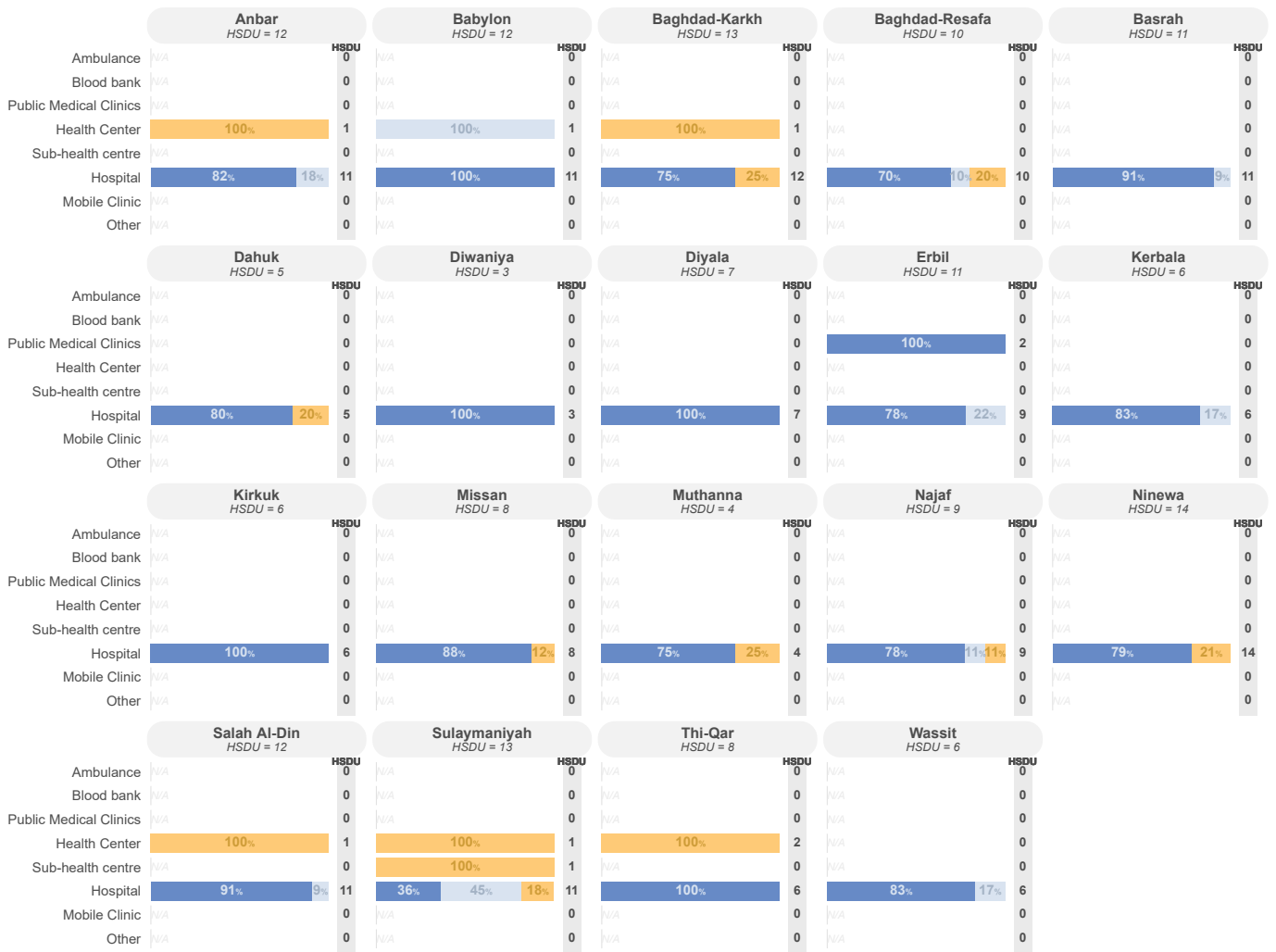


Maps

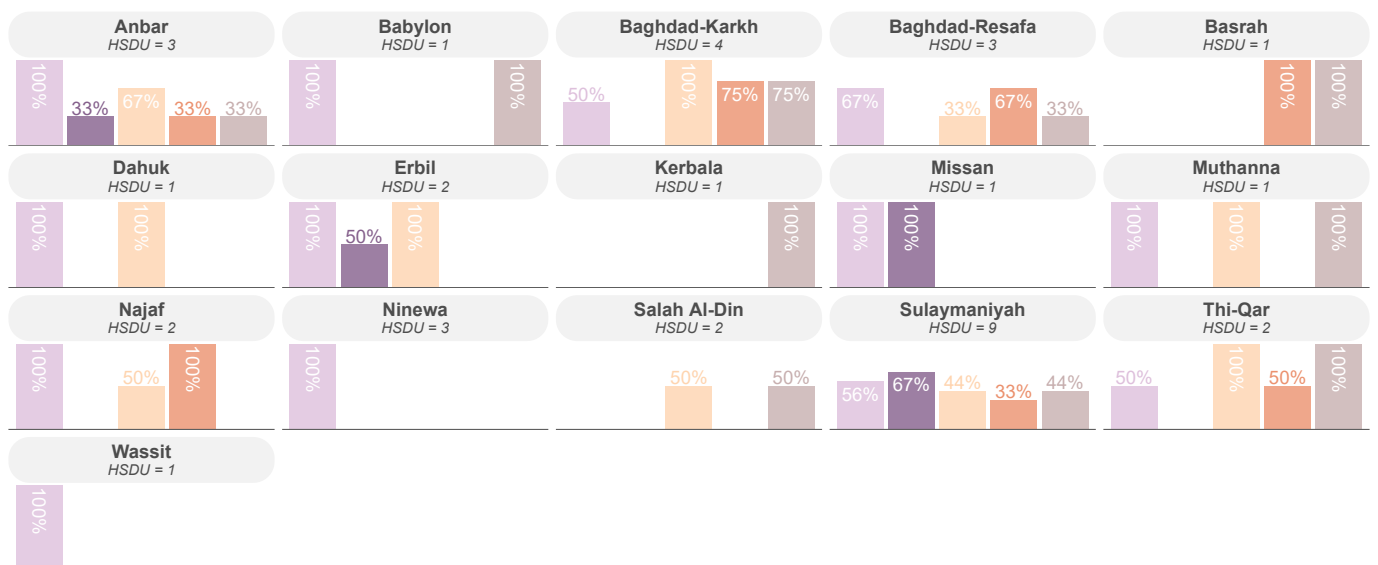




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

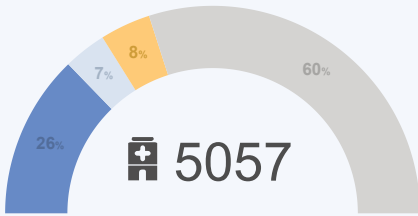
- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

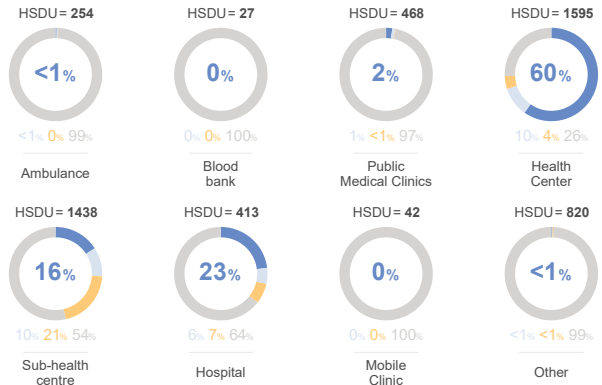


POST-PARTUM CARE

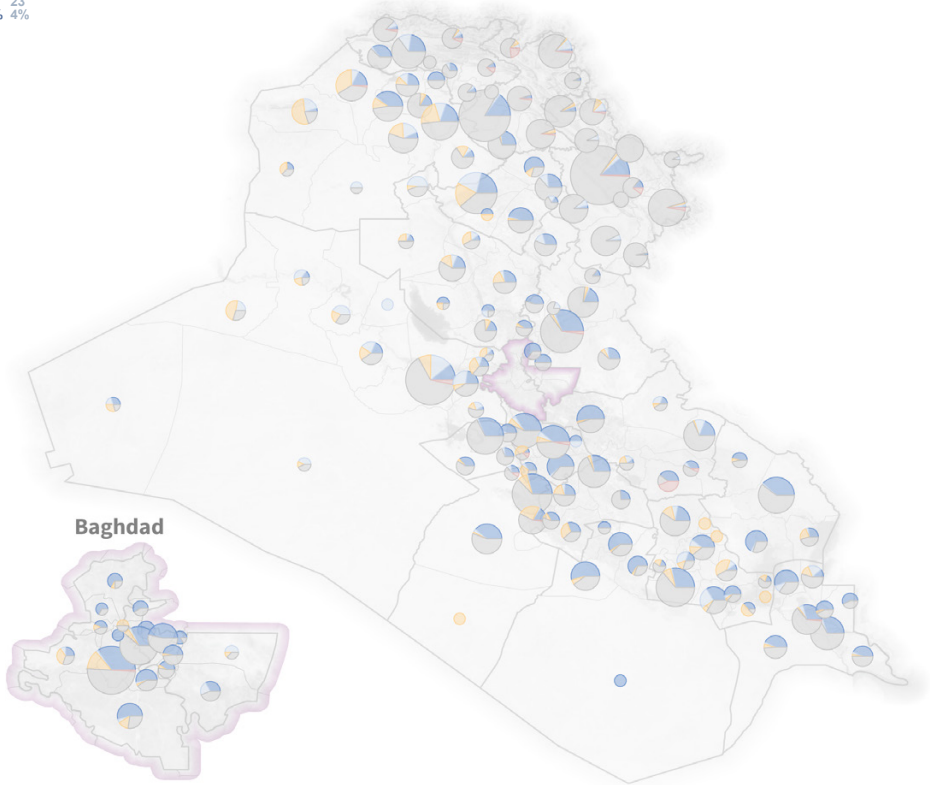
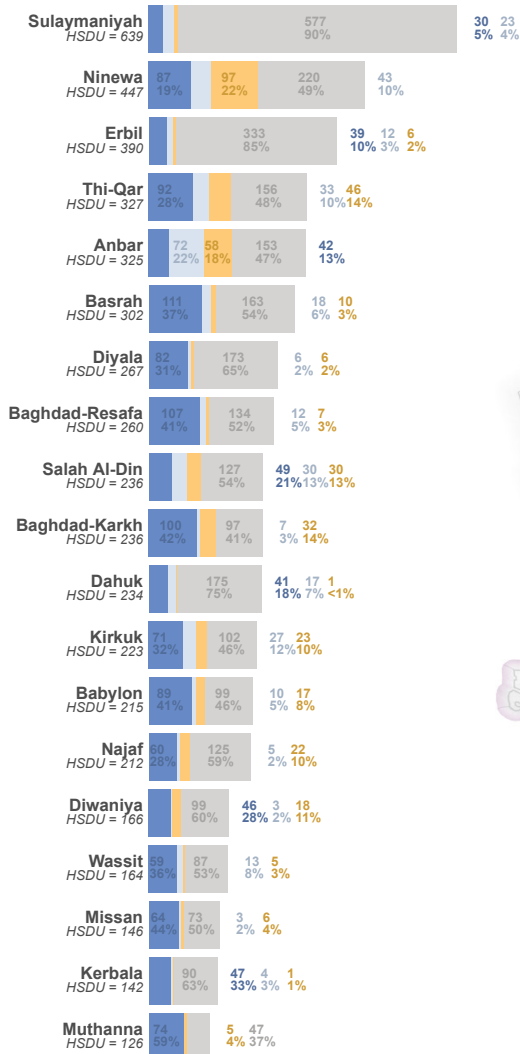
Service availability²²



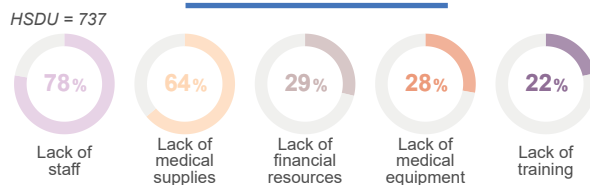
Service availability by HSDU type



Service availability by directorate of health

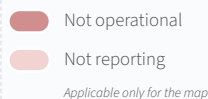
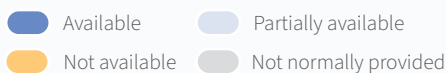


Main barriers impeding service delivery

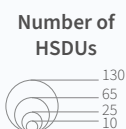


²² Post-partum care includes examination of mother and newborn (up to 6 weeks), respond to observed signs, support breastfeeding, counsel on complementary feeding, and promote family planning

Availability status

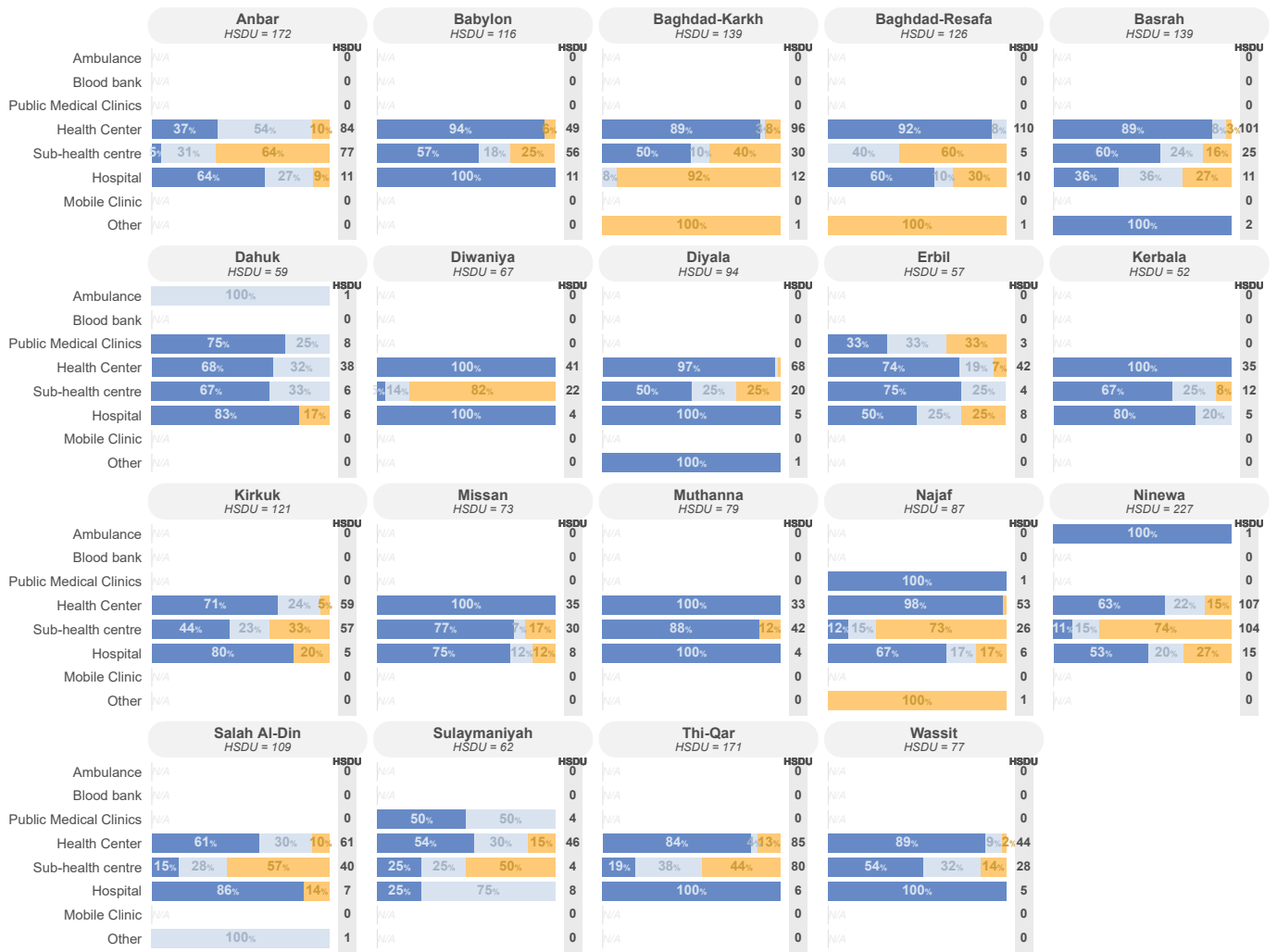


Maps

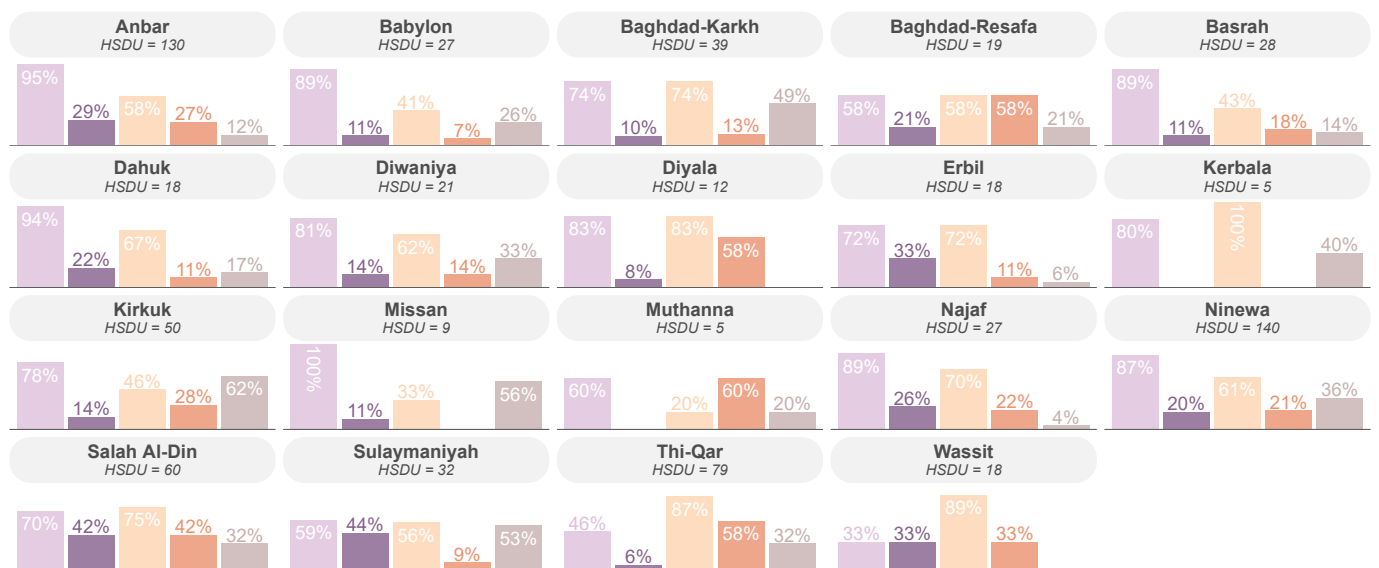




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

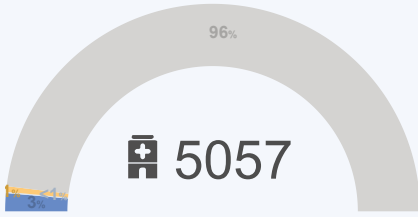
- Lack of staff
- Lack of training
- Lack of supplies
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

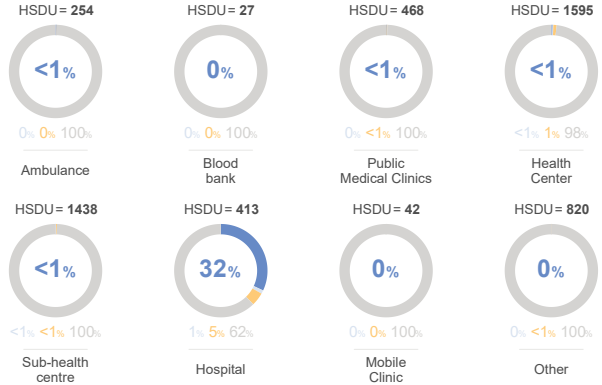


COMPREHENSIVE ABORTION CARE

Service availability²³

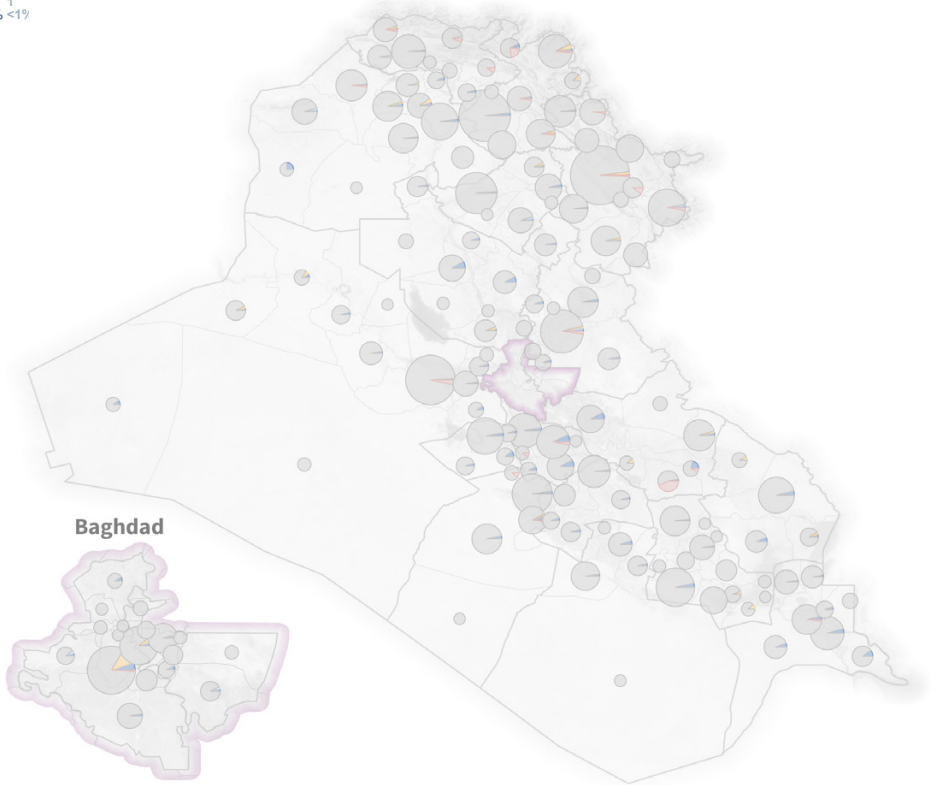


Service availability by HSDU type

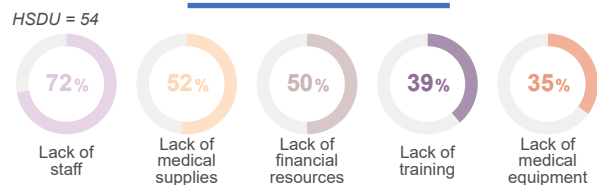


Service availability by directorate of health

Directorate of Health	Total HSDUs	Available (%)	Partially available	Not available	Not normally provided
Sulaymaniyah	630	99%	5	1	<1%
Ninewa	430	96%	12	1	4
Erbil	376	96%	8	1	5
Thi-Qar	320	98%	5	2	1
Anbar	314	97%	9	2	1
Basrah	289	96%	13	4	
Diyala	258	97%	7	1	1
Baghdad-Resafa	246	95%	6	3	5
Salah Al-Din	224	95%	11	1	<1%
Baghdad-Karkh	213	90%	9	1	13
Dahuk	228	97%	3	1	2
Kirkuk	216	97%	5	1	1
Babylon	203	94%	12	6	
Najaf	204	96%	7	1	<1%
Diwaniya	162	98%	4	2	
Wassit	152	93%	10	2	1
Missan	138	95%	6	2	1
Kerbala	136	96%	6	4	
Muthanna	122	97%	4	3	



Main barriers impeding service delivery



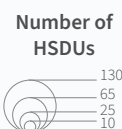
²³ Comprehensive abortion care includes safely induced abortion for all legal indications, uterine evacuation using manual vacuum aspiration (MVA) or medical methods where applicable, antibiotic prophylaxis, treatment of abortion complications, counselling for abortion and post-abortion contraception

Availability status

- Available
- Partially available
- Not available
- Not normally provided

- Not operational
 - Not reporting
- Applicable only for the map*

Maps

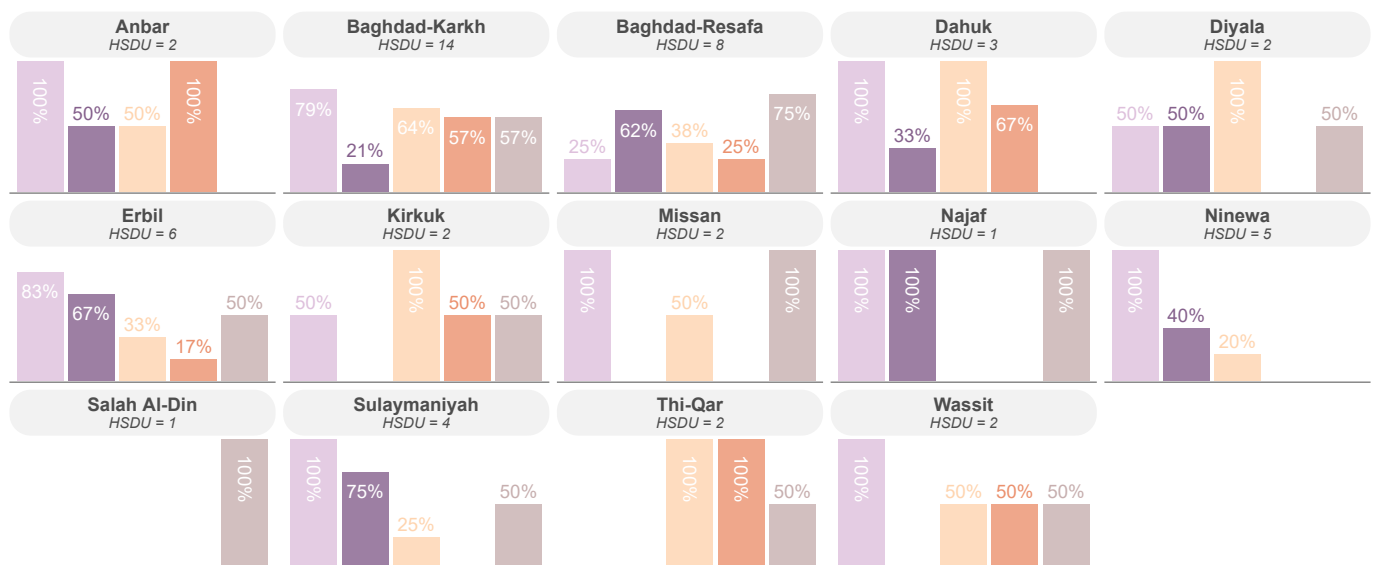




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

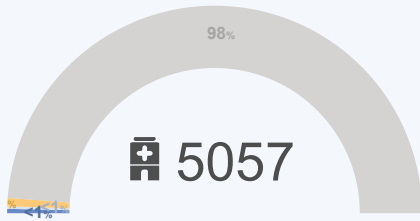
- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

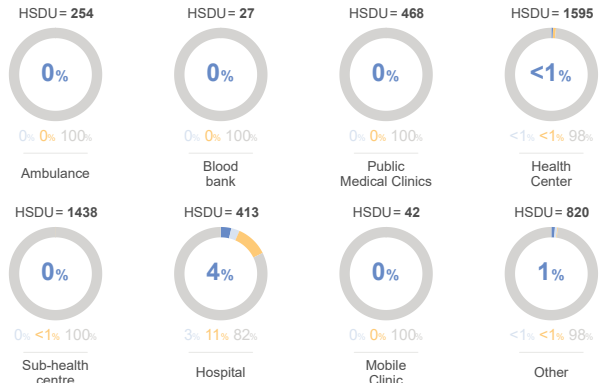


CLINICAL MANAGEMENT OF RAPE SURVIVORS

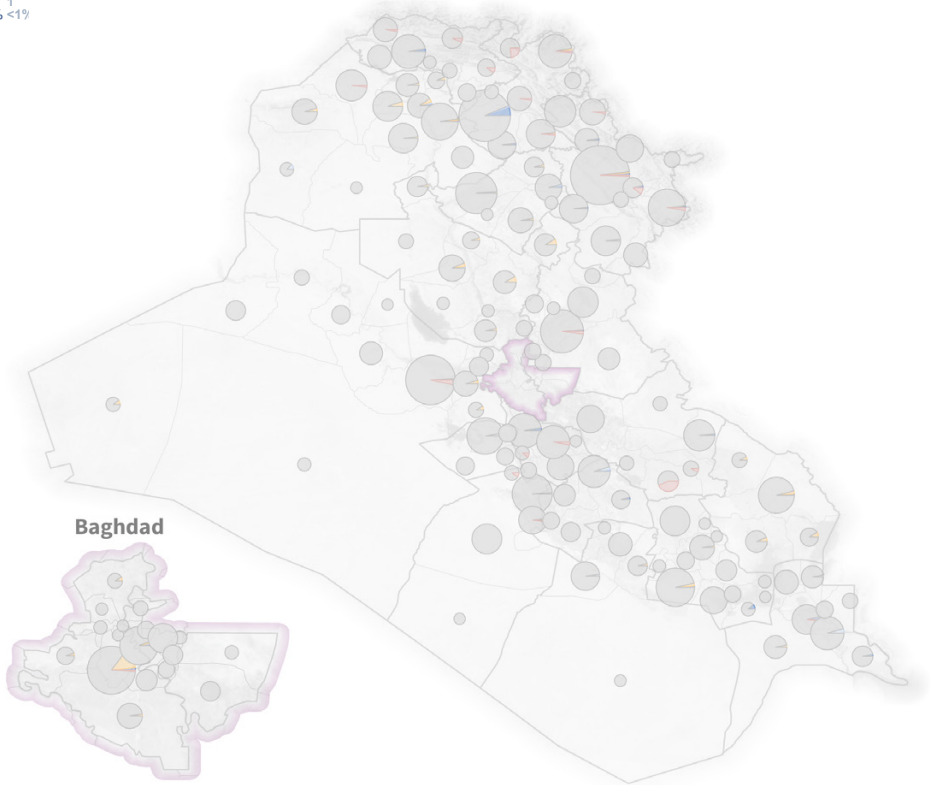
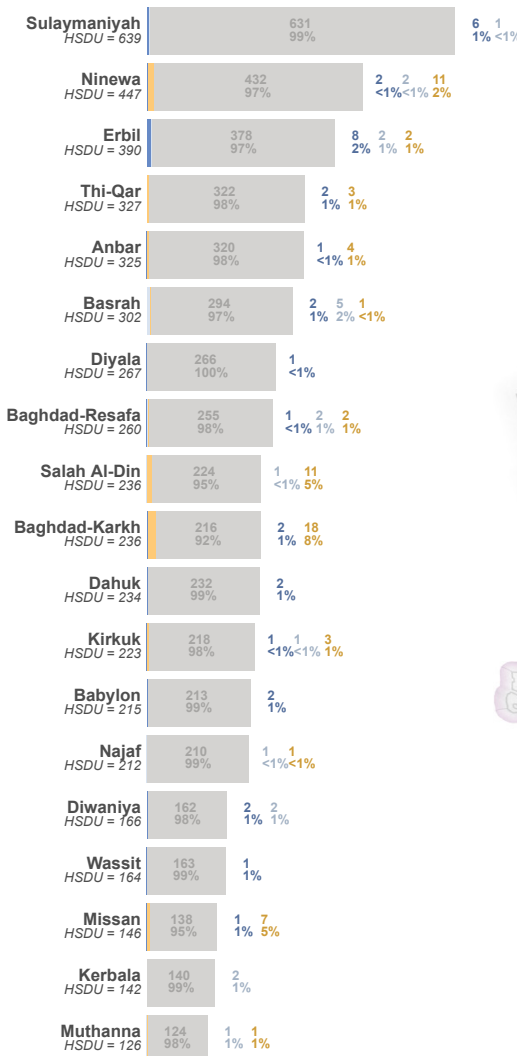
Service availability²⁴



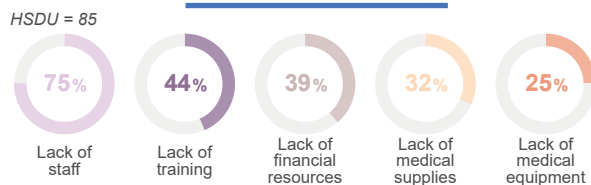
Service availability by HSDU type



Service availability by directorate of health

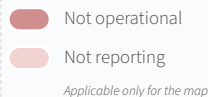
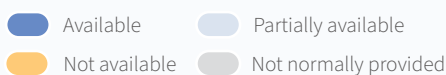


Main barriers impeding service delivery

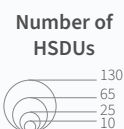


²⁴ Clinical management of rape survivors (including psychological support)

Availability status

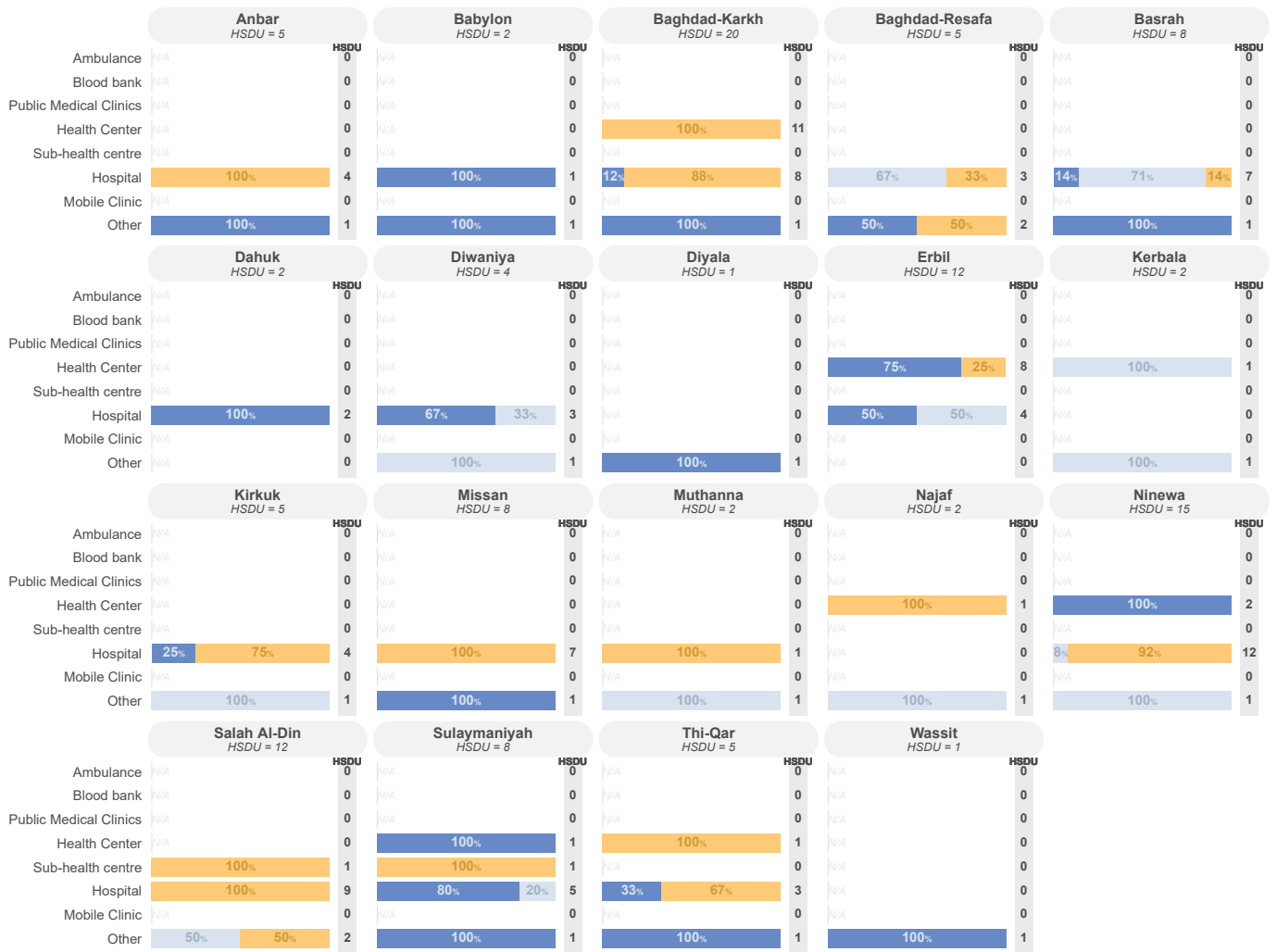


Maps

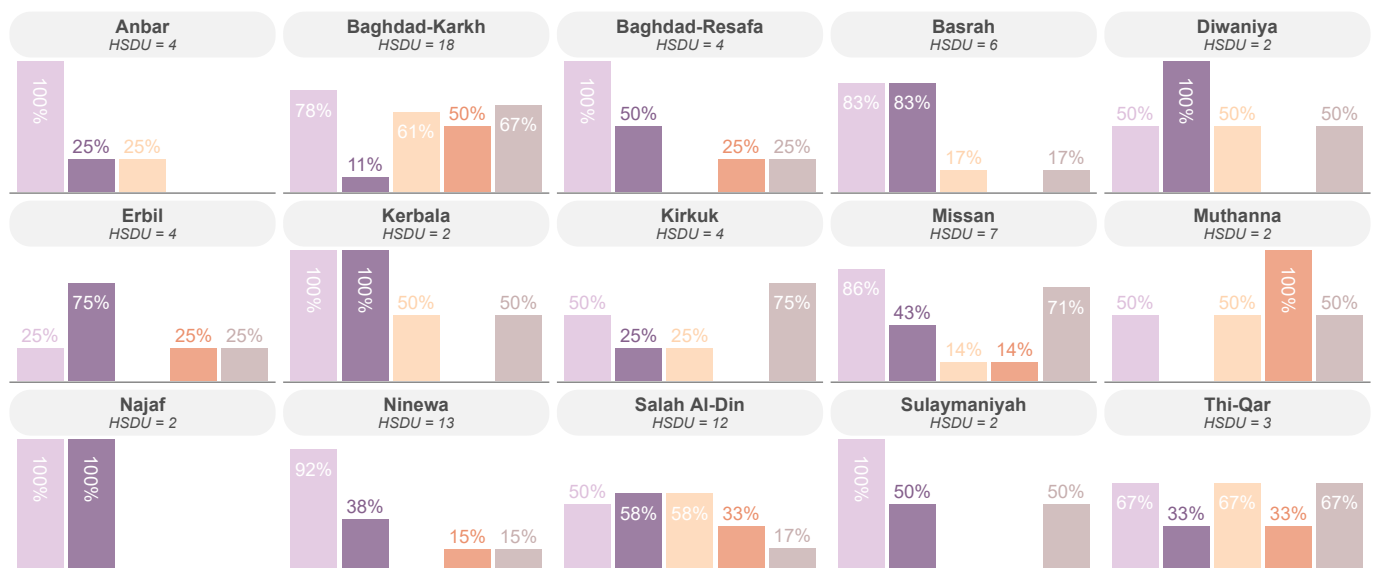




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

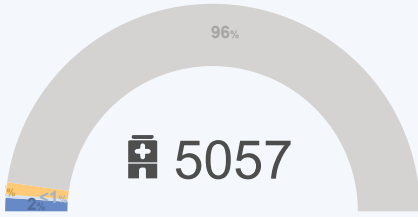
- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.

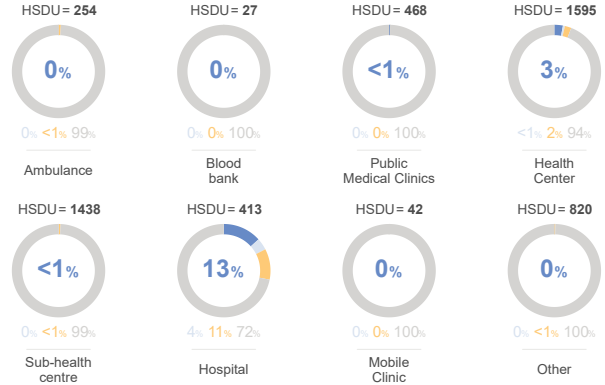


EMERGENCY CONTRACEPTION

Service availability²⁵

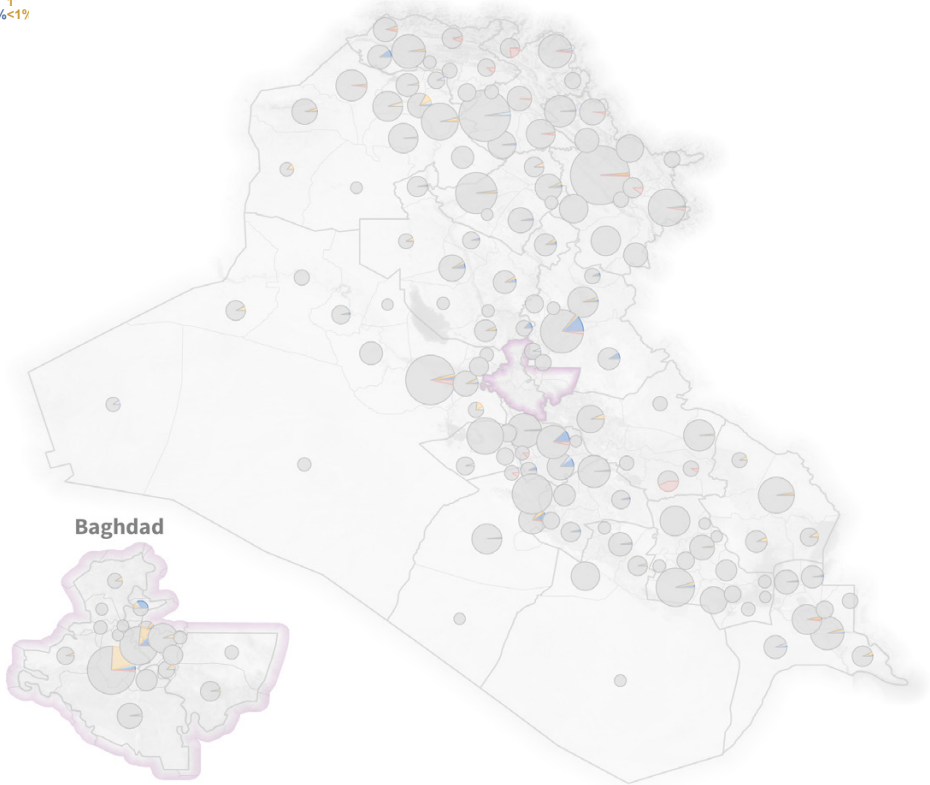


Service availability by HSDU type

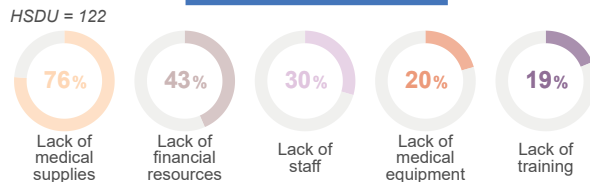


Service availability by directorate of health

Directorate of Health	Total HSDUs	Availability	Not available	Partially available	Not normally provided	Not operational	Not reporting
Sulaymaniyah	635	99%	3	1	<1%	<1%	
Ninewa	427	96%	2	6	12	<1%	3%
Erbil	383	98%	3	3	1	1%	<1%
Thi-Qar	322	98%	2	1	2	1%	<1%
Anbar	310	95%	5	3	7	2%	1%
Basrah	291	96%	6	2	3	2%	1%
Diyala	245	92%	18	2	2	7%	1%
Baghdad-Resafa	225	87%	16	4	15	6%	2%
Salah Al-Din	219	93%	12	5		5%	2%
Baghdad-Karkh	205	87%	3	3	25	1%	1%
Dahuk	225	96%	5	1	3	2%	<1%
Kirkuk	215	96%	4	4		2%	2%
Babylon	198	92%	15	2		7%	1%
Najaf	203	96%	6	3	1	3%	1%
Diwaniya	163	98%	3	2			
Wassit	160	98%	4			2%	
Missan	139	95%	1	6		1%	4%
Kerbala	141	99%	1			1%	
Muthanna	124	98%	1	1		1%	1%



Main barriers impeding service delivery



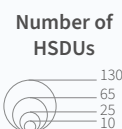
²⁵ Emergency contraception

Availability status

- Available
- Partially available
- Not available
- Not normally provided

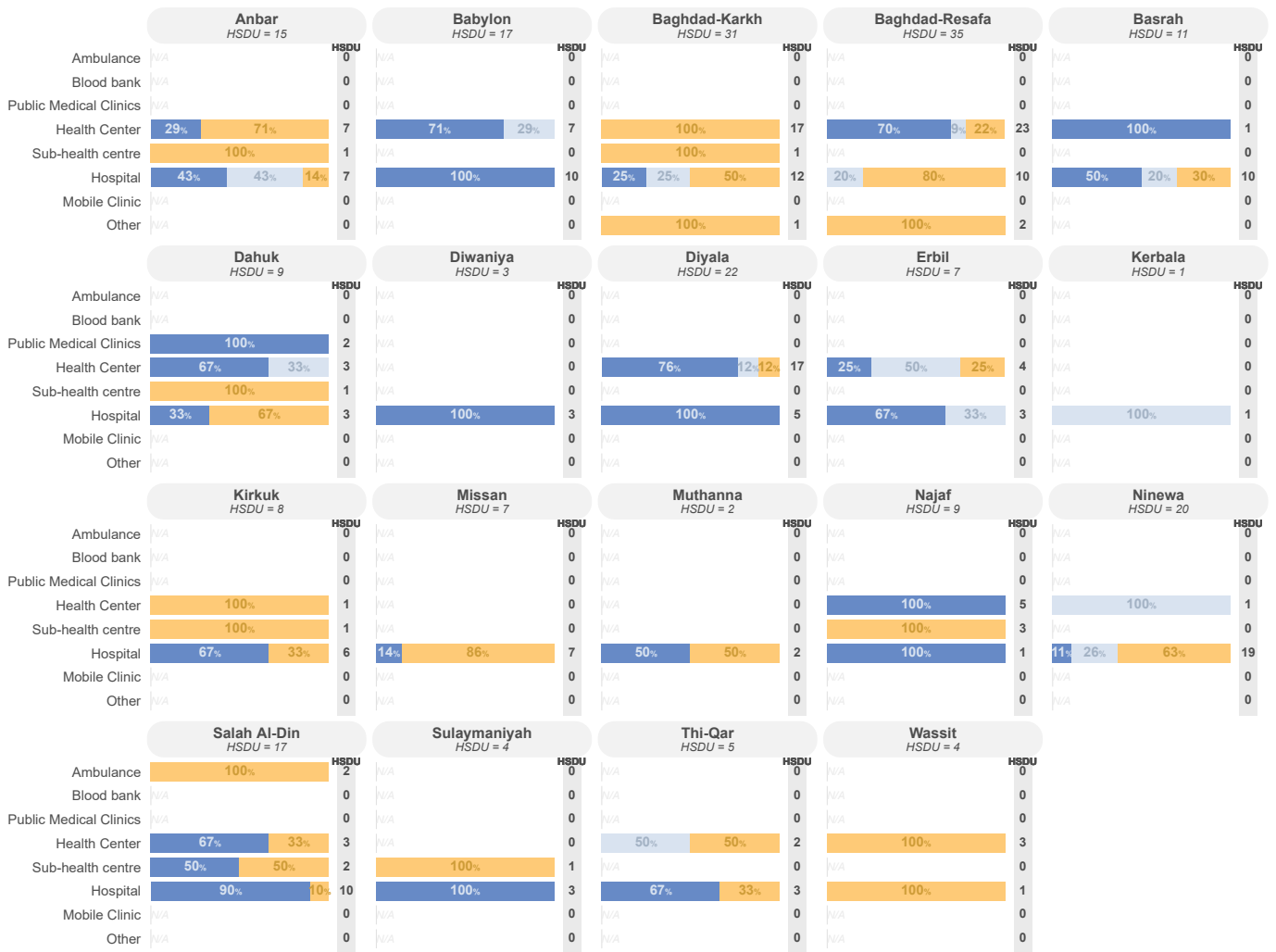
- Not operational
 - Not reporting
- Applicable only for the map*

Maps

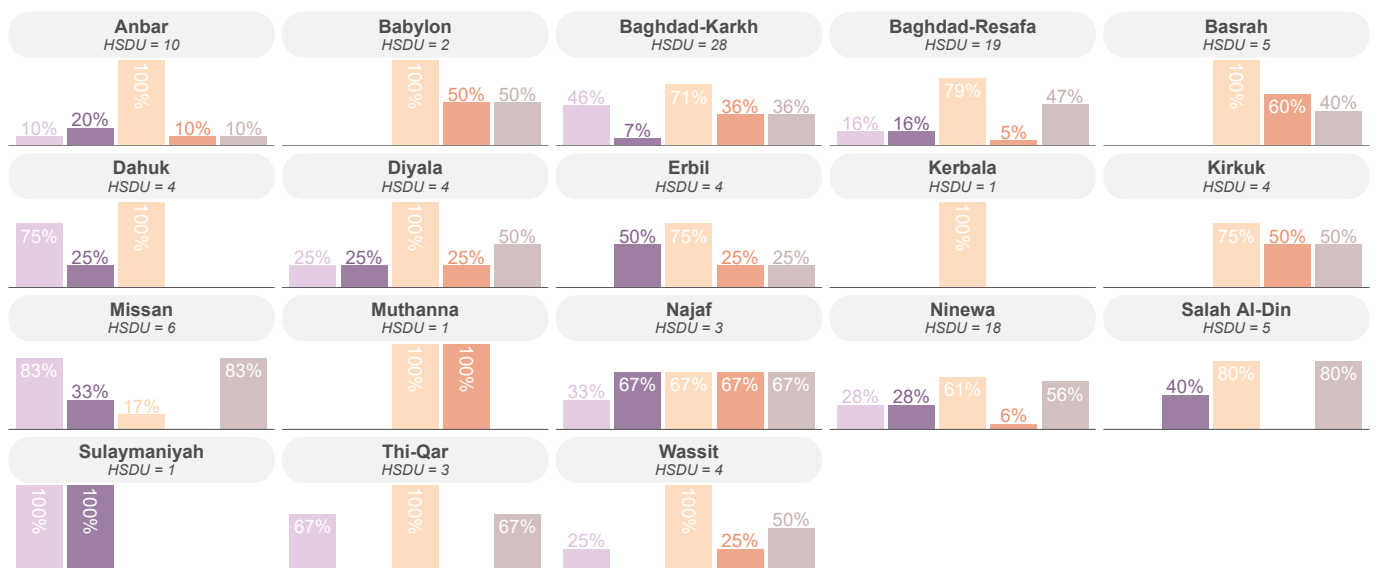




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available (Blue bar)
- Partially available (Light blue bar)
- Not available (Orange bar)

Barriers for partial availability or non-availability.

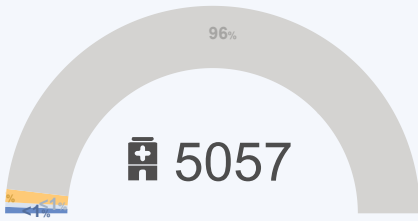
- Lack of staff (Purple icon)
- Lack of training (Dark purple icon)
- Lack of supplies (Orange icon)
- Lack of equipment (Brown icon)
- Lack of financial resources (Grey icon)

* HSDUs that do not normally provide the service are excluded from this chart.

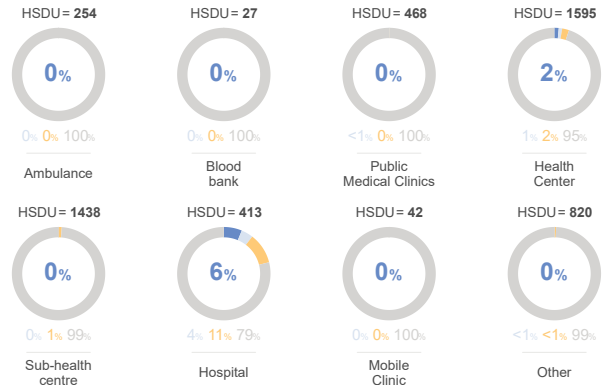


POST-EXPOSURE PROPHYLAXIS

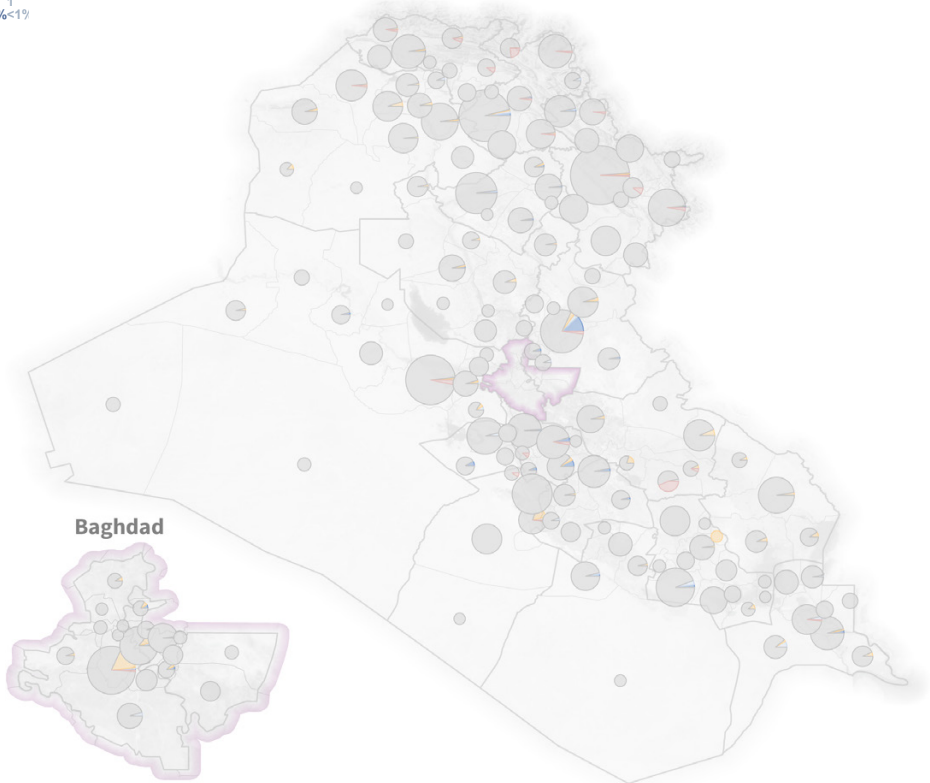
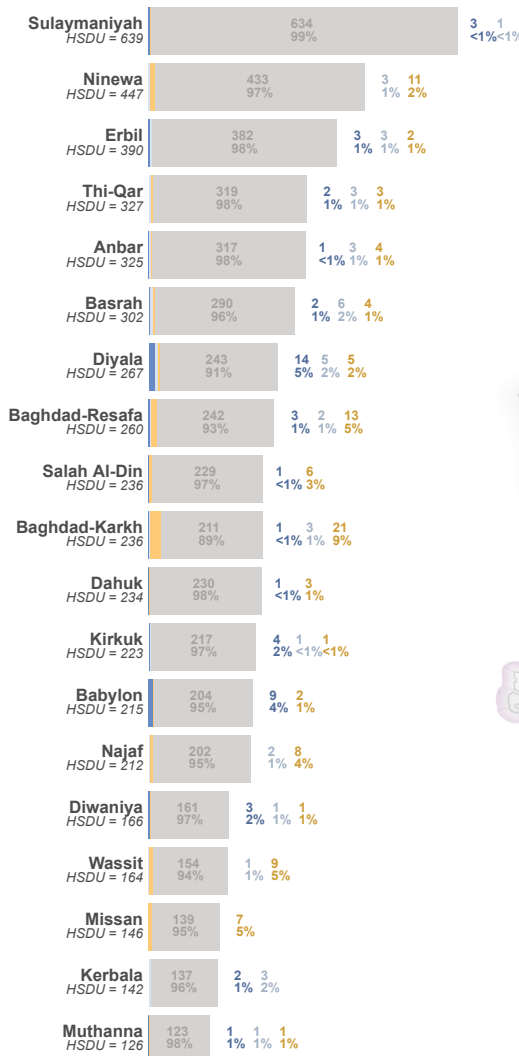
Service availability²⁶



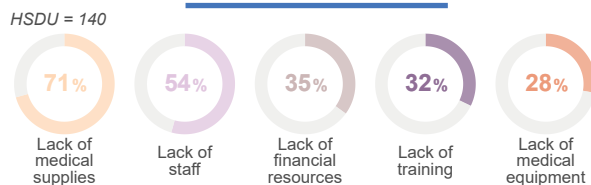
Service availability by HSDU type



Service availability by directorate of health

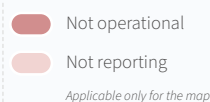
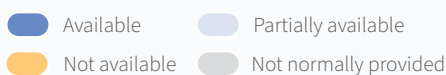


Main barriers impeding service delivery

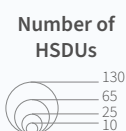


²⁶ (PEP) for STIs and HIV infections

Availability status



Maps

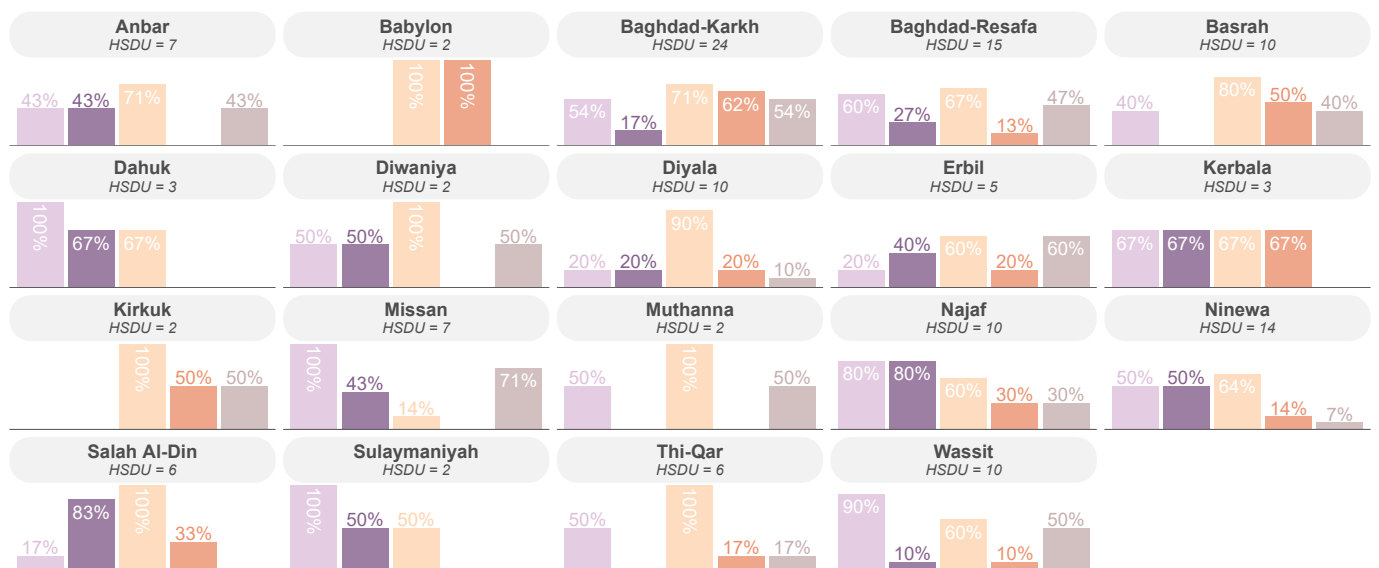




Service availability by HSDU type and by directorate of health*



Main barriers impeding service delivery by directorate of health



Availability status

- Available
- Partially available
- Not available

Barriers for partial availability or non-availability.

- Lack of staff
- Lack of supplies
- Lack of training
- Lack of equipment
- Lack of financial resources

* HSDUs that do not normally provide the service are excluded from this chart.



ANNEXES





ANNEX I: PREVIOUSLY PUBLISHED REPORTS

Baseline report Part 1

The results presented in this report series are based on the assessment of 3478 health facilities across 16 governorates, namely Anbar, Babylon, Baghdad-Karkh, Baghdad-Resafa, Basrah, Diwaniya, Diyala, Kerbala, Kirkuk, Missan, Muthanna, Najaf, Ninewa, Salah-Al-Din, Thi-Qar, and Wassit and was collected up until November 8th, 2022.

HeRAMS Iraq baseline report 2023 part 1, A comprehensive mapping of availability of essential services and barriers to their provision; 2023, <https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-part1-operational-status-of-the-health-system>

Baseline report Part 2

The results presented in this report series are based on the assessment of 1286 health facilities across Dahuk, Erbil, and Sulaymaniyah governorates and was collected up until April 25th, 2023.

HeRAMS Iraq baseline report 2023 part 2, A comprehensive mapping of availability of essential services and barriers to their provision; 2023, <https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-part2-operational-status-of-the-health-system>

HeRAMS Iraq Baseline Summary Report 2023

This report presents a high-level overview of the operational status of the health system, the availability, and barriers to essential health services.

HeRAMS Iraq Baseline Summary Report 2023, A comprehensive mapping of availability of essential services and barriers to their provision, 2023, <https://www.who.int/publications/m/item/herams-iraq-baseline-summary-report-2023>



ANNEX II: POPULATION ESTIMATES

DIRECTORATE OF HEALTH	POPULATION ESTIMATES
ANBAR	1 963 346
BABYLON	2 288 456
BAGHDAD-KARKH	3 815 810
BAGHDAD-RESAFA	5 190 191
BASRAH	3 223 158
DAHUK	1 432 369
DIWANIYA	1 430 714
DIYALA	1 814 368
ERBIL	2 055 448
KERBALA	1 350 577
KIRKUK	1 770 765
MISSAN	1 233 053
MUTHANNA	902 480
NAJAF	1 630 807
NINEWA	4 133 536
SALAH AL-DIN	1 767 837
SULAYMANIYAH	2 396 206
THI-QAR	2 321 851
WASSIT	1 527 911
Total	42 248 833



ANNEX III: SERVICE DEFINITIONS

SERVICE	DEFINITION
Availability of free condoms	Refers to the availability of free condoms
IEC on STI/HIV	IEC on prevention of STI/HIV infections and behavioral change communications
STI/HIV Advocacy	Advocacy for community leaders on STI/HIV risks
Syndromic management of STIs	Syndromic management of Sexually Transmitted Infections (STIs) means first-line antibiotics available nationally
HIV counselling and testing	HIV counselling and testing
PMTCT	Prophylaxis and treatment of opportunistic infections, prevention of mother-to-child HIV transmission (PMTCT)
Antiretroviral treatment	Antiretroviral treatment (ART)
Family planning	Refers to the availability of pregnancy test and contraceptive methods as per national guidelines
Antenatal care	Antenatal care assess pregnancy, birth and emergency plan, respond to problems observed (urine protein test strips, Syphilis RDT) and/or reported STI, advise/counsel on nutrition and breastfeeding, self-care and family planning, intermittent iron and folate supplementation in non-anaemic pregnancy
Births by licensed midwives	Clean home deliveries includes distribution of clean delivery kits to visibly pregnant women, IEC and behavioral change communications, knowledge of danger signs and where/when to go for help, promotion of exclusive breastfeeding, and IYCF practices
Skilled care during childbirth	Skilled care during childbirth includes early essential newborn care: preparing for birth, assess the presence of labor, stage, fill WHO partograph and monitor, manage conditions accordingly, dry baby, clean cord care, basic newborn resuscitation, skin-to-skin contact, oxytocin, early and exclusive breastfeeding, eye prophylaxis (available magnesium sulphate and antenatal steroid)
Basic emergency obstetric care	Basic emergency obstetric care (BEmOC) means parenteral antibiotics, oxytocic/anticonvulsant drugs, antenatal steroid, manual removal of placenta, removal of retained products with manual vacuum aspiration (MVA), assisted vaginal delivery, health facility functioning 24/7
Comprehensive emergency obstetric care	Comprehensive Emergency Obstetric Care (CEmOC) includes BEmOC, caesarean section, safe blood transfusion
Post-partum care	Post-partum care includes examination of mother and newborn (up to 6 weeks), respond to observed signs, support breastfeeding, counsel on complementary feeding, and promote family planning



SERVICE	DEFINITION
Comprehensive abortion care	Comprehensive abortion care includes safely induced abortion for all legal indications, uterine evacuation using manual vacuum aspiration (MVA) or medical methods where applicable, antibiotic prophylaxis, treatment of abortion complications, counselling for abortion and post-abortion contraception
Clinical management of rape survivors	Clinical management of rape survivors (including psychological support)
Emergency contraception	Emergency contraception
Post-exposure prophylaxis	Post-exposure prophylaxis (PEP) for STIs and HIV infections

