# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Page</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>04</td>
<td>MSF at a glance</td>
</tr>
<tr>
<td>04</td>
<td>MSF principles</td>
</tr>
<tr>
<td>05</td>
<td>MSF charter</td>
</tr>
<tr>
<td>06</td>
<td>MSF presence in Iraq in 2021</td>
</tr>
<tr>
<td>07</td>
<td>An overview of MSF activities in the country</td>
</tr>
<tr>
<td>08</td>
<td>MSF Iraq in numbers 2021</td>
</tr>
<tr>
<td>09</td>
<td>MSF projects in Iraq</td>
</tr>
</tbody>
</table>

Cover Photo Nablus hospital, West Mosul, 2021 © Peter Bräunig
MSF AT A GLANCE

Médecins Sans Frontières (MSF) translates as Doctors Without Borders. It is an independent medical humanitarian movement that aims to deliver emergency medical care where it is needed most. MSF works in 72 countries around the world.

MSF offers neutral and impartial medical assistance regardless of race, religion, gender or political affiliation. To ensure its independence, MSF does not accept funding from any government or international agency for its programmes in Iraq, relying solely on private donations from the general public worldwide to carry out its work.

MSF PRINCIPLES

MSF was founded in 1971 in Paris by a group of journalists and doctors. Today, we are a worldwide movement of more than 42,000 people.

We provide medical assistance to people affected by conflict, epidemics, disasters or exclusion from healthcare. Our teams include tens of thousands of health professionals, logistic and administrative staff, bound together by our charter. Our actions are guided by medical ethics, impartiality, independence and neutrality. We are a non-profit, self-governed, member-based organisation.

PATIENTS FIRST

MSF’s actions are, first and foremost, medical. The notion of quality care for the individual patient is central to our humanitarian objective. We seek to provide high-quality care and to act always in the best interest of our patients; to respect their confidentiality and their right to make their own decisions; and above all, to do them no harm. When medical assistance alone is not enough, we may provide shelter, water and sanitation, food or other services.

IMPARTIALITY

We help people based on need. It doesn’t matter which country they are from, which religion they belong to or what their political affiliations are. We give priority to those with the most severe and immediate medical needs.

INDEPENDENCE

We decide to help based on our evaluation of medical needs, independent of political, economic or religious interests. Our independence is rooted in our funding; over 90 per cent comes from individual private donors giving small amounts. We strive to evaluate needs freely, access populations without restriction and deliver our aid directly to the people we serve.

NEUTRALITY

We do not take sides in armed conflicts nor support the agendas of warring parties. Sometimes we are not present on all sides of a conflict; this may be because access is denied to us, or due to insecurity, or because the primary needs of the population are already covered.

BEARING WITNESS

Neutrality is not synonymous with silence. Our proximity to people in distress implies a duty to raise awareness about their plight, ultimately to help improve their situation. We may seek to bring attention to extreme need and suffering when access to lifesaving medical care is hindered, when our teams witness extreme acts of violence, when crises are neglected or when the provision of aid is abused.

TRANSPARENCY

We take responsibility for accounting for our actions to our patients and donors and being transparent about our choices. Evaluations, critical reviews and debates on our field practices, our public positioning and broader humanitarian issues are necessary to improve what we do.

THE MSF CHARTER

MSF assists populations in distress, victims of natural or manmade disasters and victims of armed conflict. We do so irrespective of race, religion, creed or political convictions.

MSF observes neutrality and impartiality in the name of universal medical ethics and the right to humanitarian assistance and claims full and unhindered freedom in its functions.

Members must respect their professional code of ethics and maintain complete independence from all political, economic or religious powers.
The effects of years of conflict and instability are still felt in Iraq, more evidently in regions that witnessed fighting between the Islamic State (IS) group and the Iraqi-led coalition. In 2021, Iraq continued to be severely affected by COVID-19, with the country experiencing its second and third COVID-19 waves, each recording a higher number of infections and deaths than the one before it.

The pandemic significantly impacted the ongoing recovery of the health system and people’s ability to access healthcare services. Many healthcare facilities across the country suspended their regular programmes to focus on treating COVID-19 patients.

MSF teams continued to provide a wide range of essential medical services and supported the response to health emergencies and health needs caused by the recent war against IS, the consequent displacement and return of millions of people, people’s under-served healthcare needs and the COVID-19 pandemic.

In areas affected by the recent war, many health facilities are yet to return to their full capacity. Compounded by a shortage of specialist healthcare staff and drugs, the local health system struggled to cope with the increased needs and challenges generated by the pandemic. MSF maintained its lifesaving medical operations while enhancing infection prevention and control measures and putting in place triage and referral procedures to protect patients and staff in our facilities. Throughout the year, MSF also donated supplies, including essential personal protective equipment, to various healthcare facilities across Iraq.

Throughout 2021, we maintained our primary and secondary health services in the fields of maternity and neonatal care, emergency rooms, specialist surgery, comprehensive post-operative rehabilitation, non-communicable diseases and mental healthcare for displaced people, returnees and vulnerable communities. In addition, we continued supporting the National Tuberculosis Institute by introducing a new, more effective oral treatment for drug-resistant tuberculosis and extended our support to local health authorities to prepare and respond to emergencies.

Lastly, in Qushtapa subdistrict in Erbil governorate, we responded to a small-scale crisis and rehabilitated a health centre damaged by floods. In Amman, Jordan, MSF opened a project in 2006 with the aim of supporting Iraqi patients who needed reconstructive orthopaedic, plastic and maxillofacial surgery. Since then, this project has offered comprehensive care for victims of violence in Iraq, including physiotherapy and psychosocial support. Today, this reconstructive surgical programme is a national and international referral and reference centre as well as a training and research hub that contributes to the development of knowledge and innovation in reconstructive surgery.
2021: MSF IRAQ IN NUMBERS

3,270 surgical procedures carried out
9,565 patients admitted to inpatient wards
  1,323 COVID-19 patients treated
  2,238 neonatal and paediatric patients treated
  1,308 surgical and post-surgical patients treated
  167 patients referred to MSF surgical hospital in Jordan
95,089 outpatient consultations
  25,923 individual mental health consultations
  24,856 non-communicable diseases consultations
9,132 group mental health sessions
18,832 births assisted
  2,159 caesareans
57,901 emergency room consultations
10,696 physiotherapy sessions
96,301 health promotion sessions

Human Resources
1,457 Iraqi staff
111 International staff

12 projects
  3 hospitals
  4 specialist care centres
  11 mental health activities
  4 COVID-19 activities
  1 emergency project

$31,610,100
Budget allocated for MSF's humanitarian work in Iraq

MSF PROJECTS IN IRAQ

NINEWA GOVERNORATE

More than four years have passed since the end of the war against the IS group, but its devastating impact is still felt in Ninawa. Throughout 2021, more than 250,000 people from Ninawa were still displaced from their homes. The population’s psychological trauma remains largely unaddressed. And despite ongoing reconstruction efforts, many of the health facilities destroyed during the conflict have yet to be rebuilt and to resume their activities. In 2021, the COVID-19 pandemic continued to complicate the situation further, causing health facilities to suspend their activities and overwhelming those facilities that remained open. In response, MSF helped local health authorities with direct COVID-19 patient management, conducted health education campaigns, enhanced infection prevention and control measures and implemented patient management, triage and referral procedures for patients with respiratory symptoms in all its medical facilities. Our teams continuously monitored people’s health needs and adapted the level of care we provided in our projects to the changing needs and the pace of recovery of the healthcare system.

In the maternity ward of Nablus hospital, West Mosul, a woman holds her grandson, 2021. © Nan-na Heitmann/Magnum Photos
WEST MOSUL
Nablus Field Hospital

MSF runs a comprehensive maternity unit in Nablus field hospital with the capacity for carrying out caesareans and emergency obstetric surgeries in two fully equipped operating theatres. Our team provided emergency obstetric and neonatal care, emergency care, inpatient paediatric services, mental healthcare and health education services.

Our teams continued to enhance infection prevention and control measures and conducted triage, stabilisation and referral procedures for patients with respiratory symptoms to ensure the safety of our staff and patients during the COVID-19 pandemic.

In August 2021, following the recovery of some healthcare facilities in Nablus, we changed the admission criteria for the emergency room to paediatric patients only. Our team in Nablus field hospital conducted 2,159 deliveries by caesarean, assisted in a further 8,653 normal deliveries, performed 36,570 emergency room consultations, treated 2,238 children in the inpatient ward, and provided 2,871 individual mental health consultations. We also ran 10 training sessions on triage, on infection and prevention control, and on critical case management for the Directorate of Health staff in Mosul general hospital in 2021, reaching a total of 196 participants.

In Nablus hospital, West Mosul, an MSF Jordanian paediatrician examines a newborn, 2021. © Peter Bräunig

<table>
<thead>
<tr>
<th>NINEWA GOVERNORATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NABLUS FIELD HOSPITAL, WEST MOSUL</td>
</tr>
<tr>
<td>8,653 assisted deliveries</td>
</tr>
<tr>
<td>2,159 C-sections</td>
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<td>36,570 emergency room consultations</td>
</tr>
<tr>
<td>2,238 neonates and paediatrics admissions</td>
</tr>
<tr>
<td>2,871 mental healthcare consultations</td>
</tr>
</tbody>
</table>
In Al-Rafidain primary healthcare centre in West Mosul, MSF runs Al-Amal maternity clinic. Our teams there provide sexual and reproductive healthcare services, such as non-surgical obstetric and maternity care, antenatal and postnatal consultations and family planning services. In 2021, our teams assisted in 4,418 deliveries and provided 9,112 antenatal and 1,235 postnatal consultations and 6,199 family planning consultations. They also provided 7,368 mental health consultations and 903 health education sessions.

**WEST MOSUL**
**AL-AMAL MATERNITY CLINIC**

4,418 assisted deliveries
9,112 antenatal and 1,235 postnatal consultations
7,368 mental healthcare consultations

"**Patient Story**"

Mariam, 20 years old pregnant mother photographed during her visit to the MSF-run Al-Amal maternity clinic in West Mosul, 2022 © Elisa Fourt/MSF

Mariam, 20 years old, lives in Mosul. She came to MSF’s Al Amal maternity to attend an antenatal care consultation. She’s pregnant with her third child. “It’s my first time coming to this maternity”, she says. “My first child was delivered in a public hospital, the second was delivered in MSF’s maternity in Nablus neighbourhood. This time around, I came here because my relatives told me about the maternity. My sister-in-law had come here, and she recommended it. I think this maternity is important because there is no other place offering such services in the area. Also, if we go to the hospital or to the doctor’s office, usually we need to wait for hours to be seen. Here, that’s not the case.”
**EAST MOSUL**

**COVID-19 INTENSIVE CARE UNIT IN AL-SALAM HOSPITAL**

MSF opened and ran a 16-bed COVID-19 intensive care unit in collaboration with Ninawa Directorate of Health at Al-Salam hospital, East Mosul. The facility offered advanced comprehensive care for critical and severe cases of COVID-19 as well as mental healthcare for both recovering patients and their caregivers. MSF ran the facility until March 2021 and then handed over its activities to the Directorate of Health as patient numbers dropped. The facility was equipped with ventilation and oxygen machines to ensure oxygen provision for patients with acute respiratory symptoms. Our teams cared for 33 severely and critically ill COVID-19 patients and provided 106 individual mental health counselling sessions.

![The entrance of the MSF-supported COVID-19 intensive care unit at Al-Salam General Hospital, East Mosul, 2020. © Ahmed Kaka/MSF](image)

**EAST MOSUL**

**AL-WAHDA ORTHOPAEDIC SURGICAL HOSPITAL**

To address the shortage of skilled surgery and post-surgical care, since 2018 MSF has run a comprehensive facility for patients with violent or accidental trauma injuries in East Mosul. Starting from one mobile operating theatre and a 33-bed inpatient ward in 2018, the hospital expanded to two permanent and fully equipped operating theatres and 40 individual isolation rooms, recovery rooms and rehabilitation units in 2021. Following the hospital’s expansion, we also expanded the admission criteria to include patients needing treatment for complex fractures, corrective surgeries and bone infection surgeries. In 2021, our teams conducted 1,111 surgical interventions, 7,888 outpatient consultations and 891 inpatient consultations and 52,116 people benefited from health education sessions.

![A patient being prepared for operation at Al-Wahda hospital, East Mosul, 2021. © Ahmed Kaka/MSF](image)

**EAST MOSUL**

**COVID-19 INTENSIVE CARE UNIT IN AL-SALAM HOSPITAL**

- 33 severely and critically ill COVID-19 patients admitted
- 106 mental healthcare consultations

**EAST MOSUL**

**AL-WAHDA ORTHOPAEDIC SURGICAL HOSPITAL**

- 1,111 surgical procedures
- 7,888 outpatient consultations
- 52,116 beneficiaries of healthcare education sessions
ANNUAL REPORT 2021

SINJAR DISTRICT
SINUNI GENERAL HOSPITAL

Since August 2018, when our team first rehabilitated and reopened Sinuni general hospital, we have provided emergency care and referral services, maternity care, inpatient paediatric and neonatal care, and comprehensive mental healthcare services and health education to the population of Sinuni and its surroundings. In September 2021, MSF handed back the maternity and paediatric healthcare services to Sinuni general hospital’s management after training Directorate of Health staff in these specialties over the past three years. In response to the COVID-19 pandemic, our team continued implementing triage and referral procedures for patients with respiratory symptoms. We also established a seven-bed stabilisation and observation unit for mild and moderate COVID-19 patients with a referral system for severe and critical patients to other hospitals for more advanced care. In 2021, MSF conducted 21,331 emergency room consultations, provided 8,719 sexual and reproductive health consultations (including antenatal, postnatal and family planning consultations), admitted 354 children for inpatient treatment, assisted in 451 births and provided 4,659 individual mental health consultations.

MOSUL
MENTAL HEALTH SUPPORT TO PRIMARY HEALTHCARE CENTRES

Throughout Iraq, the need for mental health support services remains very high. In addition to the integrated mental health component in most of our medical facilities, MSF continued to run dedicated mental health support activities in Mosul’s Al-Karama primary healthcare centre and, in parallel, in 17th of July primary health centre. In 2021, MSF teams provided 408 individual mental health consultations in these two health centres.

TEL AFER DISTRICT
TEL AFER GENERAL HOSPITAL

Tel Afer general hospital is the primary referral hospital for more than one million people living in northwest Ninawa governorate. The hospital receives patients from Sinjar and Baaj districts as well as from Tel Afer itself. In October 2021, MSF started supporting the hospital’s COVID-19 treatment centre by strengthening infection prevention and control protocols to protect healthcare staff and patient caretakers. We also supported the hospital’s medical and nursing staff with training sessions to better equip them to reduce mortality rates among severely ill COVID-19 patients. Between October and December 2021, our teams provided 54 training sessions to the hospital’s medical and nursing staff, hygiene staff and infection prevention and control committee.

54 training sessions provided

A little girl and her mother at the emergency ward of the Sinuni hospital, Sinjar district, 2020. Her parents brought her to the hospital to receive care for her broken arm

SINJAR DISTRICT
SINUNI GENERAL HOSPITAL

©Hassan Kamal Al-Deen/ MSF

A little girl and her mother at the emergency ward of the Sinuni hospital, Sinjar district, 2020. Her parents brought her to the hospital to receive care for her broken arm

©Hassan Kamal Al-Deen/ MSF

A patient at the MSF attending the MSF-run mental healthcare program in Al-Karama primary healthcare centre in Mosul, 2021. © Ghada Saafan/MSF

MOSUL
MENTAL HEALTH SUPPORT TO PRIMARY HEALTHCARE CENTRES

408 mental healthcare consultations

In front of the Sinuni general hospital supported by MSF Sinjar district, 2020

©Hassan Kamal Al-Deen/ MSF
MSF started supporting the population in Hawija and Al-Abbasi in 2018, initially running mobile clinics for displaced people in Maktab Khalid and Dibis, then supporting the emergency department at Hawija hospital and rehabilitating the primary healthcare facilities in both Hawija and Al-Abbasi. MSF went on to provide other services including much-needed care for people with non-communicable diseases such as hypertension and diabetes; maternity care (including antenatal and postnatal services and family planning); mental healthcare; and health education services. In 2021, MSF provided 24,856 non-communicable disease consultations, 3,152 sexual and reproductive health consultations, 6,214 individual mental health consultations and 1,357 group mental health sessions in Hawija and Al-Abbasi.
MSF continued to provide post-operative rehabilitation care and to support the National Tuberculosis Institute (NTI) in Baghdad to offer a new regimen for treating patients with drug-resistant tuberculosis, with the aim of helping the Iraqi Ministry of Health provide new models of care that can be replicated in other governorates. With the Iraqi capital particularly hard hit by COVID-19, MSF also helped the health authorities strengthen their response to the pandemic.

BAGHDAD GOVERNORATE

MSF opened the Baghdad Medical Rehabilitation Centre in August 2017 to provide comprehensive post-operative rehabilitation care for people with trauma injuries caused by violence or accidents. The facility is equipped with a 20-bed isolation ward and provides medical care, nursing care, pain management, physiotherapy, antimicrobial-resistant infection care and mental health support to post-surgical patients referred from other hospitals. After their recovery, patients return to the facility’s outpatient department for follow-up care, including physical and psychological rehabilitation sessions. In 2021, we treated 245 patients as inpatients and provided 11,992 outpatient consultations (medical, nursing, physiotherapy) including 3,040 mental health consultations (including 187 psychiatric sessions).

BAGHDAD MEDICAL REHABILITATION CENTRE (BMRC)

- 11,992 outpatient consultations
- 3,040 mental healthcare consultations
Adnan Kadhim Makki, 52, from Baghdad, works as an accountancy manager. Adnan was involved in a traffic accident. As a result, he remained unconscious for 12 days. He underwent surgeries and eventually was referred to MSF’s Baghdad Medical Rehabilitation Center to receive early physical and psychological rehabilitation care. Adnan says, "I had an accident in July 2020. As a result, I underwent several surgeries in a hospital in Baghdad. Doctors tried to treat me, but because my right leg was severely injured, it was impossible to save it, so they decided to amputate it. As for my second leg, they performed several surgeries to stabilize the fractures. Now it’s improving after it was also in a difficult situation. My doctor referred me to the MSF center, and here the team cared for my injury in terms of dressing and treating the infections. They also provided me with physical therapy to facilitate my ability to walk again using an artificial leg. I was not expecting to be able to stand up again this soon. But thanks to the physical rehabilitation exercises and the medical care, I can now stand and walk with crutches. The team here covers many of my medical, psychological, and physical rehabilitation needs. I hope to finish my treatment successfully and return to my everyday life. Life must go on, and we must adapt to different circumstances.”

Since 2018, MSF has supported the National Tuberculosis Institute (NTI) in improving the detection and treatment of patients with drug-resistant tuberculosis (DR-TB) countrywide. Our teams worked closely with the NTI to introduce a new oral treatment option for patients with DR-TB, which involved fewer side effects and higher success rates when compared to the previously available injectable treatment plan. In 2021 our teams continued providing direct medical and mental healthcare to patients suffering from TB and DR-TB. We also supported the NTI to decentralise the delivery of the new treatment method to other governorates to facilitate patients’ access to care close to their homes. Our support for the NTI also included the creation of a new treatment guideline for TB and DR-TB patients and organising training sessions for all TB doctors working with the NTI across the country. Throughout 2021, MSF continued supplying the NTI with the orally administered medications to ensure an uninterrupted supply of medications to the patients. The medications include bedaquiline, linezolid, clofazimine and delamanid. Our teams also provided food baskets and refunded transport costs to patients attending the NTI to collect their TB/DR-TB medications, in order to facilitate patients’ adherence to their follow-up appointments and reduce the economic costs of their treatment journey. In 2021, our teams cared for 110 patients with DR-TB and fully transferred 80 of them to the all-oral regimen. We also provided 596 individual mental health consultations.
“Patent Story”

“Patient Story”

My name is Ihsan Ali and I’m 44 years old. I’m married and I have three boys and one girl. I live in the Hamidiya area, in Baghdad (Iraq). I don’t have a steady job: sometimes I work as a construction worker and sometimes I borrow my friend’s taxi to work as a driver.

The first time I got tuberculosis (TB) was in 2014. I went to the hospital and they told me I had caught it. Back then, I took the treatment for almost three months, but as soon as I got better, I stopped it. A year later, the disease came back, even stronger than before. I was put again on medication—both pills and injections. This time, I continued my treatment for the whole period it was prescribed, eight months in total. I was feeling much better.

But one day at the beginning of 2020, I was coming back from work and I suddenly felt lightheaded and tired. I didn’t expect it to be TB again, but my family suggested that I do a test just to be sure. The test came back positive: I had had a relapse. This time it was multidrug-resistant tuberculosis (MDR-TB). I isolated myself in my house and didn’t let anyone come near me. It wasn’t easy but it had to be done. I was then informed that there was a new treatment regimen, of 18 months duration and that wouldn’t involve injections. I agreed immediately as I didn’t want to go back to taking injections every day. It’s been almost 10 months that I’m on this new drug regimen and I’m doing very well. It’s still a long way to recovery but hopefully I will overcome this. The pills that I am taking are a blessing compared to the injections. The injections were painful, and I had to go to a local private clinic every day for them to be administered.

A month ago I got sick again: I had a fever, body ache and cough. I did a test and this time it was COVID-19. I had to isolate again and became a bit depressed. But I never lost hope, my belief was strong. I trusted in God, the treatment, and the precaution measures I was taking. I was very sick for 20 days. Although not fully recovered, I’m much better now thanks to God. I’m the breadwinner in my family, and for most of the period when I was sick I couldn’t work. Thankfully friends and relatives stood by my side, supported me and helped my family. I’m thankful to God and to them. Now, my only hope is for my health to get better so that I can work again, provide for my family and make up for all the time I was sick.”

In 2021, MSF teams continued supporting the Rusafa Directorate of Health by treating COVID-19 patients at the 33-bed Al-Shifaa Intensive Respiratory Care Centre at Al-Kindi hospital. In response to increasing numbers of COVID-19 admissions during the second wave of the pandemic, MSF and the hospital management team worked together to expand capacity to 55 beds. Our teams delivered comprehensive intensive care to severely and critically ill COVID-19 patients, including ventilation therapy, medical care, nursing care, physiotherapy and mental healthcare. Our teams also provided training sessions and essential medical supplies to health workers at Al-Kindi hospital. They also introduced an antibiotic stewardship programme at the hospital to better manage antibiotic use with COVID-19 patients. In October 2021, MSF handed over its activities at Al-Kindi to the hospital’s management, following a decision by the Directorate of Health of Rusafa to return the hospital to surgical activities after focusing on COVID-19 care for more than a year. In 2021, we provided advanced COVID-19 care for 936 patients, provided 2,730 physiotherapy sessions and trained 225 Directorate of Health staff. MSF also donated essential personal protective equipment to healthcare facilities across Baghdad.

936 patients admitted
730 physiotherapy sessions
225 Ministry of Health staff trained
To continue supporting the health system in Baghdad in its response to the COVID-19 pandemic, MSF teams moved from Al-Kindi hospital to Baghdad Medical City in October 2021. At Baghdad Medical City, our teams worked with hospital staff at Al-Shifa Intensive Respiratory Care Centre to provide a comprehensive intensive care package, including ventilation therapy, medical care, nursing care, physiotherapy and mental healthcare. MSF also supported the health authorities by running health promotion activities to help counter misinformation about COVID-19, including vaccinations, and to guide people towards evidence-based information. From October to December 2021, MSF treated 39 patients at Baghdad Medical City and provided 82 training sessions to healthcare providers at the facility.

Following flash floods that severely damaged infrastructure and thousands of homes and other buildings in southern Erbil governorate on 17 December 2021, MSF responded by rehabilitating Qushtapa primary healthcare centre and providing emergency support, including donating medical supplies, training staff and improving the healthcare centre’s waste management system.
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