

# ANNUAL REPORT

2019



# 2019 IN BRIEF

...continuous services



## BROAD SPECTRUM OF HEALTH SERVICES

STEP-IN is a small (but mighty) NGO currently based in Iraqi Kurdistan, providing medical humanitarian aid for internally displaced people, refugees, and members of the local community. We believe that primary healthcare should be accessible and affordable to everyone, especially those effected by crises beyond their control.



## PHYSIOTHERAPY SERVICES

Our physiotherapy center in Ozal city, Erbil, was originally opened as part of the main clinic. Although the clinic itself closed at the end of August 2019, the physiotherapy center stayed open and its services continued throughout the year. The center currently employs two full-time physiotherapists.



## MENTAL HEALTH SERVICES

- Psychiatric consultations.
- Psychotherapy (both for the individuals in need and also for their family members).
- Trauma recovery groups for children every week.

# 2019 IN BRIEF

...continuous services



## HYGIENE PACKS DISTRIBUTION

As part of our preventive health services we have distributed hygiene packs to both camp residents and non-camp populations living within reach of our clinics.



## PREVENTIVE HEALTH SERVICES AND EARLY SCREENING IN DAWOODIA

These services have been part of the Dawoodia clinic for over 2 years. Community health workers are recruited from the camp's resident population and trained in health education, promotion, and early screening techniques for certain diseases.services



## NUTRITION SCREENING AND SUPPORT

Nutrition screening and support has been provided in Dawoodia clinic throughout 2019. All children up to the age of 5 are routinely screened and, if needed, nutritional support has been provided.

# 2019 IN BRIEF

...newly implemented services



## MOBILE PHYSIOTHERAPY

In May 2019 we introduced a mobile physiotherapy unit to our operations in the Dohuk governorate. The mobile physiotherapy team consists of one physiotherapist, her trainee, and a receptionist/translator. They regularly visit the Dawoodia Camp clinic and Sharya (the busiest location visited by our mobile clinic).



## PREVENTIVE HEALTH SERVICES AND EARLY SCREENING IN NON-CAMP LOCATIONS

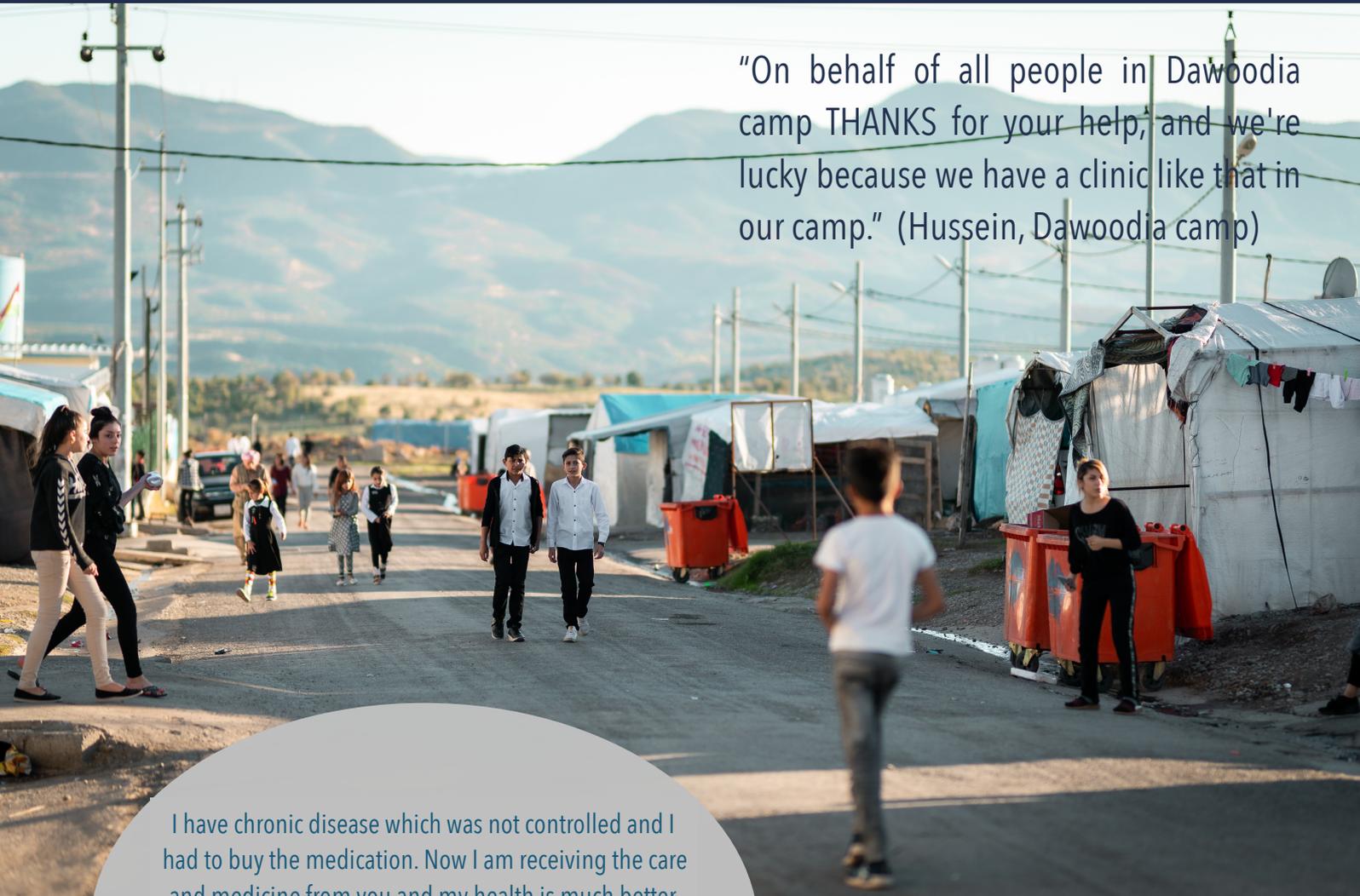
In the last quarter of 2019 we also introduced the services provided by our community health worker to non-camp locations.



## CHILD TRAUMA RECOVERY GROUPS

In August, select members of our team received extensive training in order to lead trauma recovery groups for children in Dawoodia and Sharya. A total of six group sessions were provided to each child and an additional two were held solely for parents. The sessions aimed to help children understand grief and trauma reactions, encourage open communication, and discuss potential coping mechanisms. The group aspect also helped reduce feelings of isolation in both parents and children.

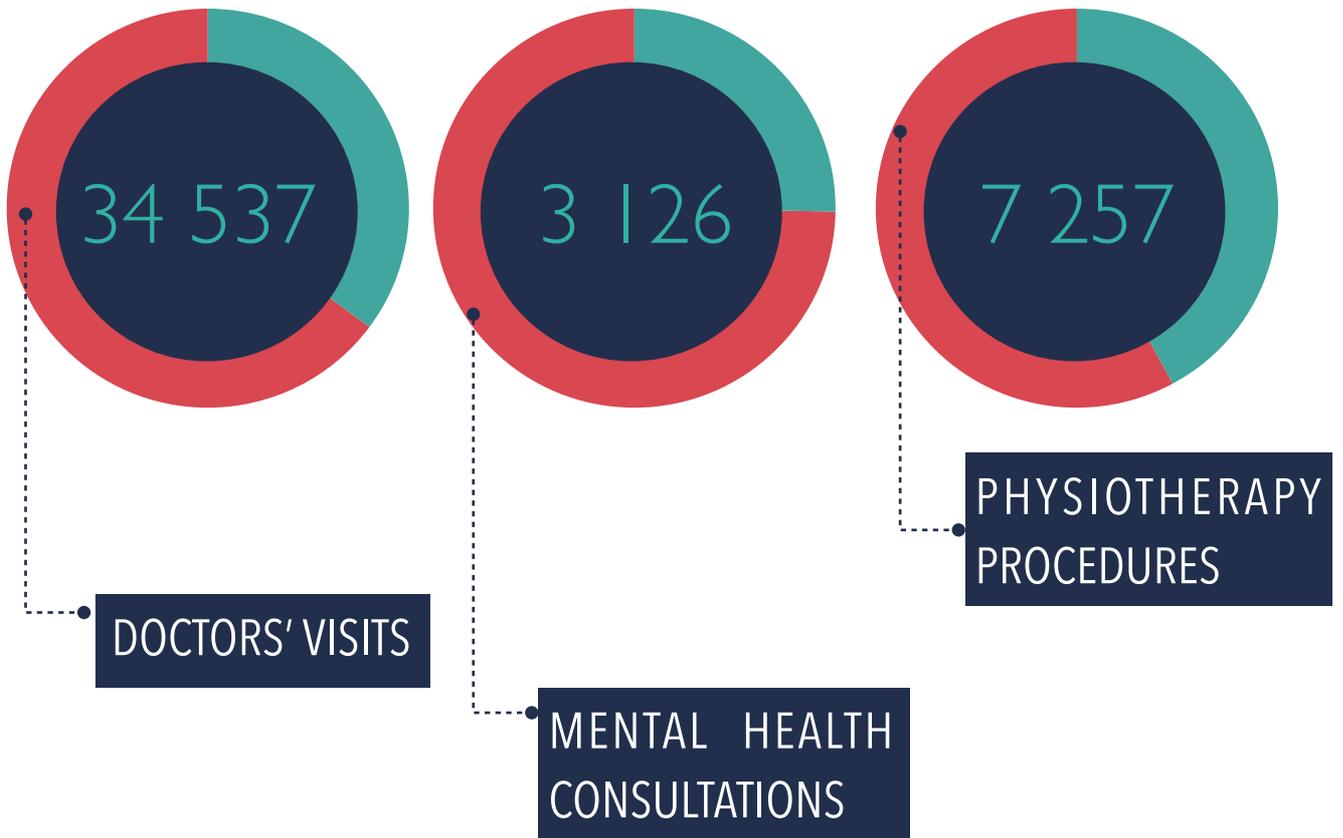
# PEOPLE SAY....



"On behalf of all people in Dawoodia camp THANKS for your help, and we're lucky because we have a clinic like that in our camp." (Hussein, Dawoodia camp)

I have chronic disease which was not controlled and I had to buy the medication. Now I am receiving the care and medicine from you and my health is much better. It's really helping us because I don't have anyone of my family members working, and my husband is still kidnapped. I hope STEP-IN will continue with these good services.

I am coming from Zakho because of these good services, medication, investigation, caring and control of health and disease. I want to thank STEP-IN for all this great work.



4 071

#### **HOUSEHOLDS VISITED BY COMMUNITY HEALTH WORKERS**

CHWs are tasked with the early screening of communicable diseases, spreading health awareness, and educating people on health related issues. In 2019 they introduced households to topics such as the cause and management of chronic disease, good dietary habits, mental healthcare, dental hygiene and the importance of breastfeeding. They screened households in the camp for lice and other parasitic diseases. In non-camp locations they conducted screenings for hypertension and diabetes.

37 225

#### **LABORATORY TESTS PERFORMED**

7901 patients were tested in our laboratories and 37 225 test results were obtained. Of those test results, 3 945 came from our microbiology laboratory where we test for antibiotic resistance.

1 486

#### **HYGIENE PACKS DISTRIBUTED**

Throughout the autumn of 2019, we distributed 1486 hygiene packs both in Dawoodia camp and the non-camp locations visited by our mobile clinic. The hygiene packs contained various items for personal hygiene use, cleaning products, and plastic bags for trash collection.



Distribution point in Dawoodia IDP camp.



Laboratory technician at work in the microbiological laboratory.



### Services provided in the clinic:

- doctor consultations
- mental health consultations
- physiotherapy
- laboratory investigations (including testing for ATB resistance)
- preventive health services (community health workers)
- provision of medicines
- nutrition screening and support
- emergency services 24/7
- transport of acute cases to the hospital

Dawoodia IDP camp hosts up to 4000 internally displaced people, majority of whom are Yazidi. The only clinic situated in the camp is named after bl. Jerzy Popieluszko and was opened by STEP-IN in April 2016. The clinic not only provides effective primary healthcare for those in desperate need but also houses an on-site pharmacy for the quick and effective distribution of medications to our beneficiaries. The clinic is also home to a clinical laboratory, offering essential diagnostics to the region and an additional microbiology laboratory allowing us to identify and tackle the growing problem of antibiotic resistance in Kurdistan (we also extend this service to surrounding health centres). The clinic also acts as a base for a number of our outreach programmes, including the training and ongoing employment of community health workers, child trauma therapy sessions, and both group and individual physiotherapy sessions targeting the ever-prevalent diagnosis of non-specific chronic pain.

## CLINIC IN DAWOODIA IDP CAMP

17 057

total number of patients received by doctors at the Dawoodia clinic.

4 405

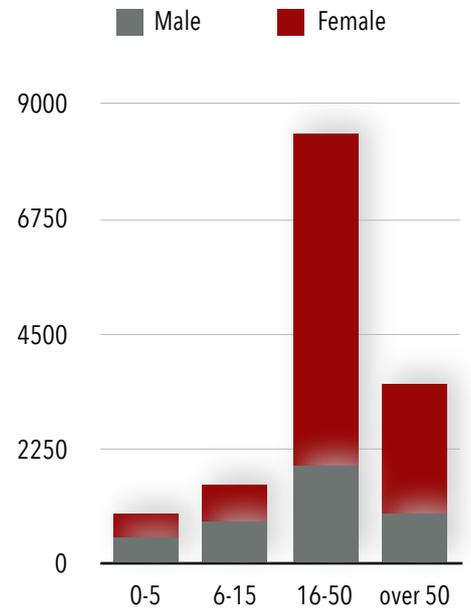
the number of patients tested by our Dawoodia laboratories resulting in a total of 19342 tests.

1 844

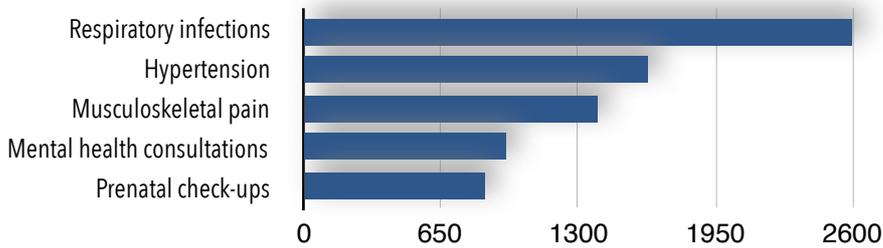
the number of emergency cases received by night shift nurses.



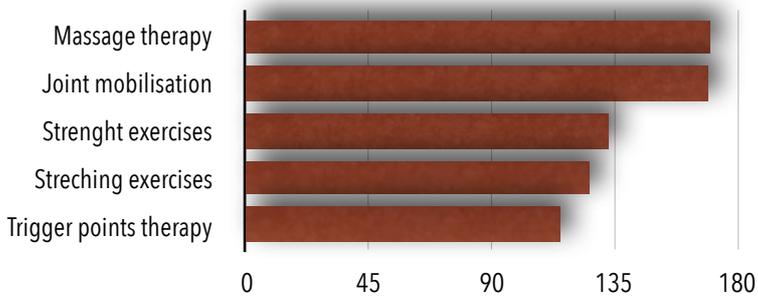
### Patient profiles by sex and age:



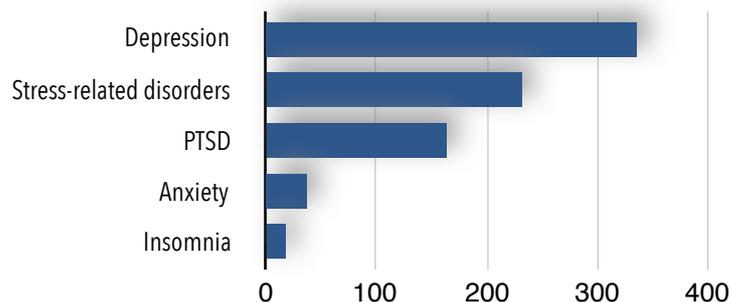
### THE MOST COMMON REASONS FOR VISIT



### THE MOST COMMON PHYSIOTHERAPY PROCEDURES



### MENTAL HEALTH CONSULTATIONS





## MOBILE CLINIC

The STEP-IN mobile clinic delivers primary healthcare, mental health consultations, preventive services, physiotherapy, and pharmaceutical supplies to various locations throughout the Duhok region. The mobile clinic currently visits four separate villages every fortnight, Sharya and Sina, both situated near the predominantly Yazidi occupied Sharya Camp, and Balqosh and Gersheen, rural Kurdish villages. These villages were chosen through thorough assessment, taking into consideration their access (or lack thereof) to healthcare facilities, their location and resultant costly transport services, and the health needs of the community.

Sharya is the busiest location, where the needs of the population frequently outweigh the services we are able to provide. The majority of the patients are those coming from the IDP camp nearby. At Sharya, we benefit greatly from our cooperation with Jesuit Refugee Service (JRS). JRS not only provide us with the site where we set up our clinic twice a week but are also a valuable partner in providing specific services such as mental health support and outreach services.

8 074

Total number of patients received by doctors in Mobile clinic.

563

Mental health consultations done in Sharya. It includes both, psychiatric consultations and also psychotherapy

1 463

Total number of physiotherapy procedures performed in Sharya.

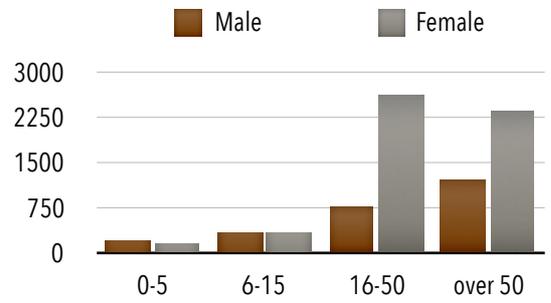
1 755

1755 patients were referred to laboratory where 8941 tests were done.

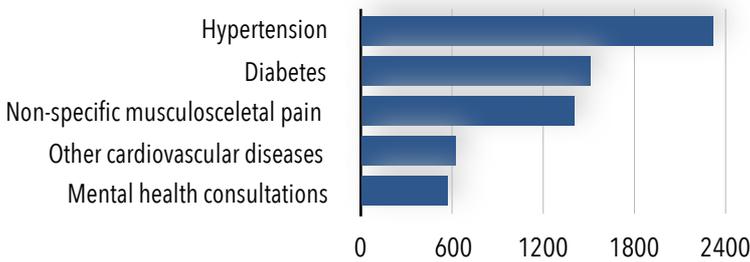


Patients in Sharya, one of the mobile clinic locations, waiting for registration.

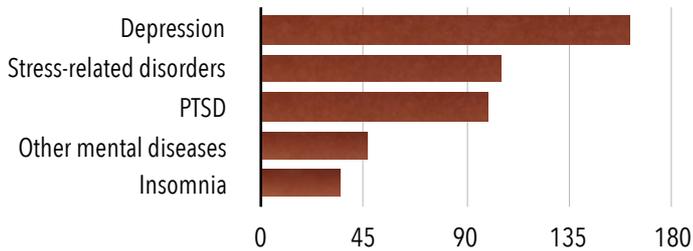
Patients profile by sex and age:



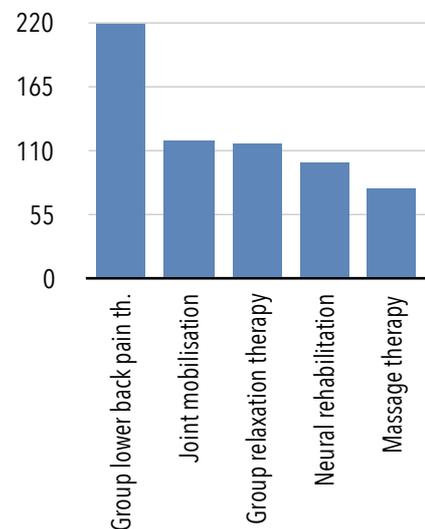
THE MOST COMMON REASONS FOR VISIT



MENTAL HEALTH CONSULTATIONS



THE MOST COMMON PHYSIOTH. PROCEDURES





## CLINIC IN OZAL CITY, ERBIL

The Clinic of bl. Zdenka Schelling, situated in Ozal city, was established in March 2015. The clinic has served many different displaced communities throughout the past 5 years. Initially, the majority of patients were Christians displaced from the Nineveh plains. After the liberation of the plains at the end of 2016, a greater part of the population returned home. Despite this, many returned to the Ozal city clinic for their medical check-ups and chronic medication due to the superior services. During this time, another displaced community from Anbar found refuge in Ozal city and many of their medical needs were met by our clinic.

The Clinic has also provided services to a significant number of Syrian refugees and underprivileged members of the host Kurdish community. The clinic offered a wide range of services - doctor consultations, mental health consultations, laboratory services, and the provision of medication. At the end of 2018, a full-time physiotherapy center was opened as part of the clinic.

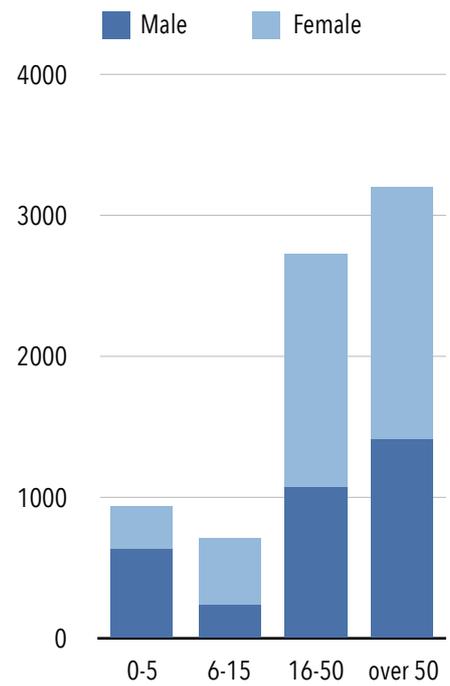
**At the end of August 2019 the main clinic in Ozal city closed** due to a lack of funds. The **Physiotherapy Centre has remained open** and we continue to provide doctor consultations for physiotherapy referrals and follow-ups to ongoing treatments. The centre provides specialist rehabilitation services and ongoing support for patients experiencing neurological problems (most commonly patients recovering from strokes), musculoskeletal disorders and, frequently, children diagnosed with cerebral palsy. We also continue to provide chronic medication to the long-term beneficiaries of the physiotherapy centre.



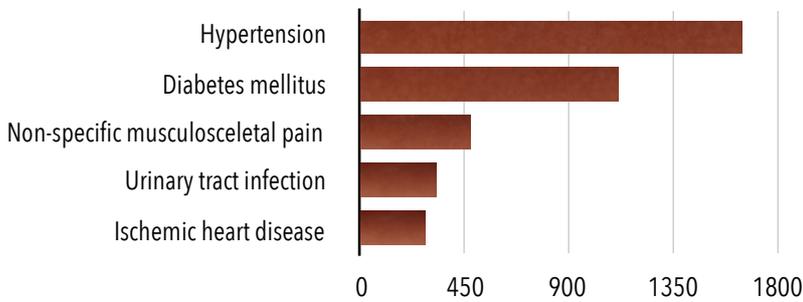
7 562

Total number of patients

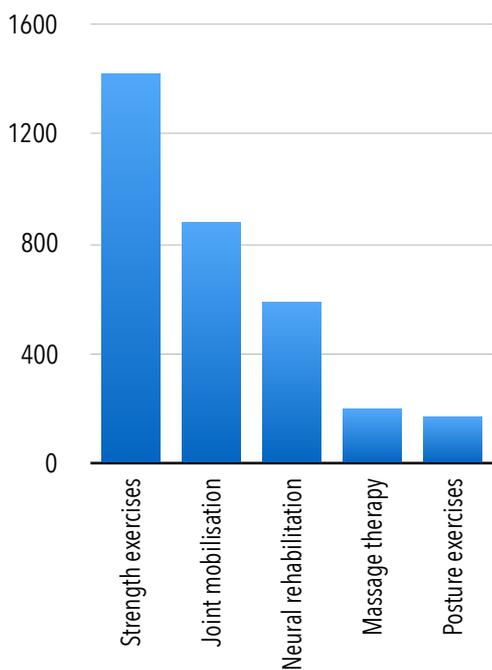
Patient profiles by sex and age:

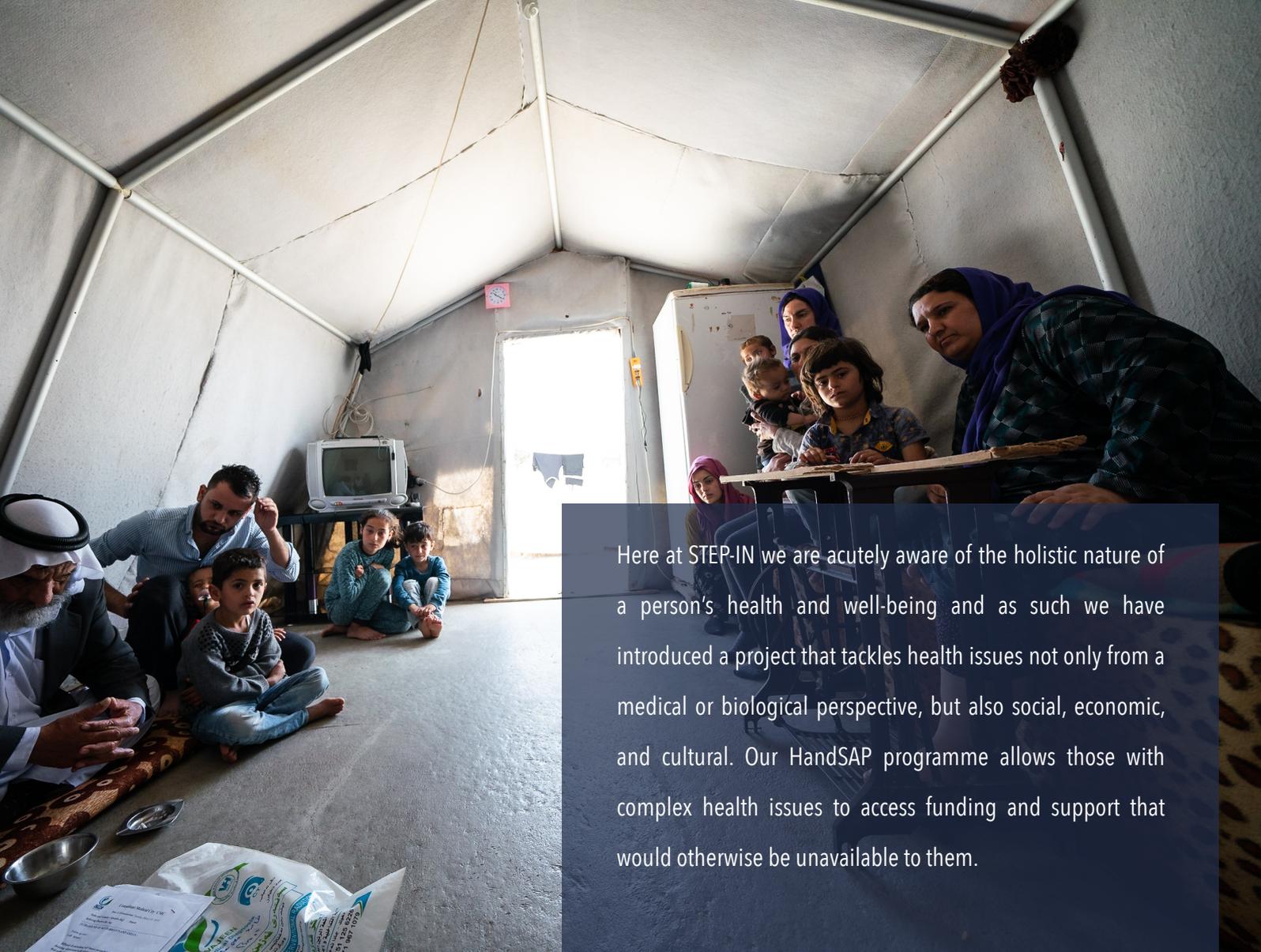


THE MOST COMMON DIAGNOSIS



THE MOST COMMON PHYSIOTH. PROCEDURES





Here at STEP-IN we are acutely aware of the holistic nature of a person's health and well-being and as such we have introduced a project that tackles health issues not only from a medical or biological perspective, but also social, economic, and cultural. Our HandSAP programme allows those with complex health issues to access funding and support that would otherwise be unavailable to them.

#### HOW HandSAP WORKS:

**STEP 1:** Cases with complex, chronic and/or life-threatening conditions are referred by our doctors to the HandSAP programme.

**STEP 2:** Our HandSAP team visits the patient in their home and carries out a social assessment, including: household income, family situation and background.

**STEP 3:** The HandSAP coordinator and a team of doctors decide how to best support the assessed patients.

**STEP 4:** The HandSAP team opens a case for support and carries out regular follow-ups over several months.

## HEALTH AND SOCIAL AID PROGRAMME

192

Total number of fully-assessed cases in 2019

62

Total number of patients who received one time support

130

Total number of patients enrolled in long-term support. Out of this number 64 were newly enrolled and 66 were already involved in the program.

# WHO WE ARE SUPPORTING & HOW ...



## SURGERIES

Through HandSAP we have supported a number of individuals with surgical procedures. Amongst them is a 5-year-old boy who underwent crucial cardiac surgery to correct a narrowing in his aorta.

We also supported the family of a 15-year-old who had developed a large, benign tumour in his lower lip and gum. The boy and his two siblings were taken in by their uncle when their parents and further 3 siblings were captured by ISIS. His uncle took them in as his own but, with little work available, he has struggled to care for both his children and those of his brother. We covered the majority of the surgery costs and the young man is now home and recovering well.

## TRANSPORT

Much of our support has also consisted of covering transport costs. Many patients have access to treatment in medical facilities in Erbil and Dohuk. However, they often cannot afford the recurring travel to these locations. We have continued to support a few families with blood-related conditions who must receive regular blood transfusions. We subsidised the travel costs for some children who regularly attend our physiotherapy centre in Erbil.

Other patients supported with transport include those undergoing chemotherapy, several patients with chronic conditions that require frequent specialist check-ups, and five children who were only this year returned from ISIS and are now (besides having regular meetings with our psychotherapist) visiting Dohuk's Mental Health Centre.

## MEDICINE

HandSAP continues to support a number of beneficiaries with life saving but expensive medication which governmental services often lack or do not stock altogether. We have coordinated with the beneficiaries themselves to fill the gaps in governmental stocks. Each month, patients attempt to receive the medication from their local hospital, if unavailable, we step in and support them. This system also helps avoid over-reliance on and overuse of our aid.

One such case is an 18-year-old living in an IDP camp South-West of Dohuk. He was diagnosed with Ankylosing Spondylitis, a rheumatic condition of the spinal cord that can cause crippling pain and severe degeneration of the spine. When we met him, he had gone two months without receiving his injections which were far too expensive for his family to procure. We supported them and procured his injections for the following two months and the next month governmental services were able to provide the treatment free-of-charge once again.



HandSAP team in the field.

## WHO WE ARE SUPPORTING & HOW ...

### SENSORY AND PROSTHETIC AID

Patients with disabilities, especially children, make up a significant proportion of the people we work with. For example, in April we provided a new set of orthotic leg-braces for a sweet, 8-year-old girl who had outgrown her previous pair. We also continue to support several children with cerebral palsy, brain atrophy, speech delay, learning disabilities, and congenital disorders. In May, we arranged the fitting of hearing aids for a 19-year-old patient with bilateral hearing loss.

This year a large fundraiser was carried out by former STEP-IN employee, Bernadetta Jarocinska, in Poland. Bernadetta garnered the support of the generous **Malak Foundation** and of the parish of Father Mirek Tykfer. Together they pooled over 20,000 USD to cover the cost of a cochlear implant for the long-standing STEP-IN case, Khalid Tahsin.

Khalid, a 16-year-old boy living in Kabarto IDP camp, was struck deaf 4 years ago by an explosion. At this point, STEP-IN's HandSAP programme had been attempting to fundraise for Khalid's surgery for two years. Khalid and his father have, over the past 4 years, developed a system of unofficial sign language by which they would communicate. Khalid relied almost completely on his dad to accompany him out of the tent and to act as a mediator in social situations.

When we visited Khalid and his family in their tent in Kabarto IDP camp to tell the family that the money for his operation had finally been raised Khalid's parents thought we were there for a regular catch-up, to see how they were getting on.

When we revealed the news that the money for Khalid's surgery had been raised, it took them a moment to process the information. After a long unbearable silence, a beaming smile appeared on Khaled's father's face. Gesturing to his ear, he signed to his son that he would have the operation, and quickly. Khalid's eyes lit up. The operation went well and Khalid is now reintegrating back to normal life.

We are deeply grateful to the Malak Foundation for their fundraising campaign and to the individuals who contributed to it. The funding provided not only paid for a long-awaited, life-changing operation - it also gave Khalid and his family hope for the future, something invaluable to those living in the most difficult and unchanging of circumstances.



Khalid with his parents just after they have received the good news.

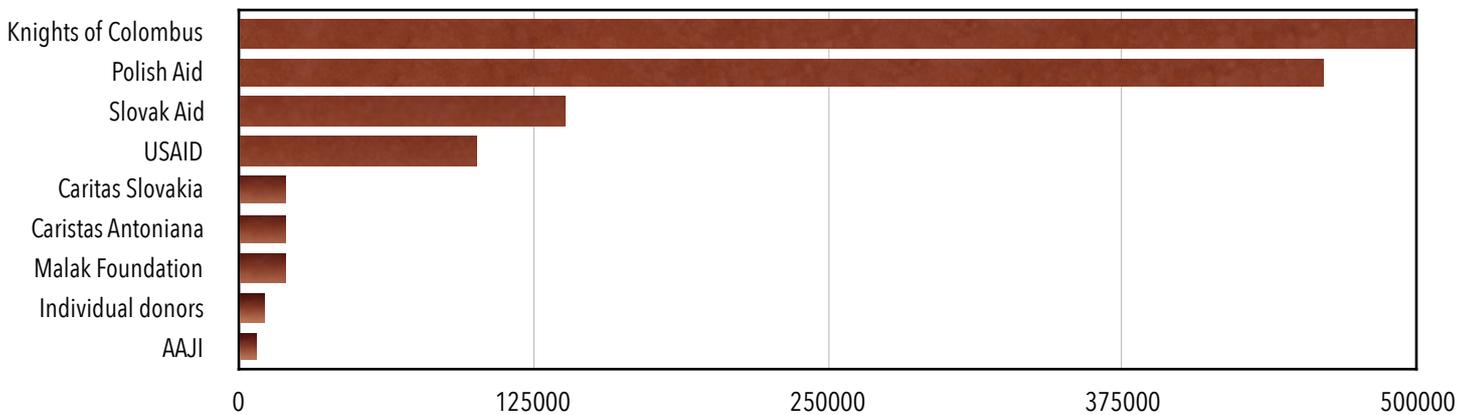


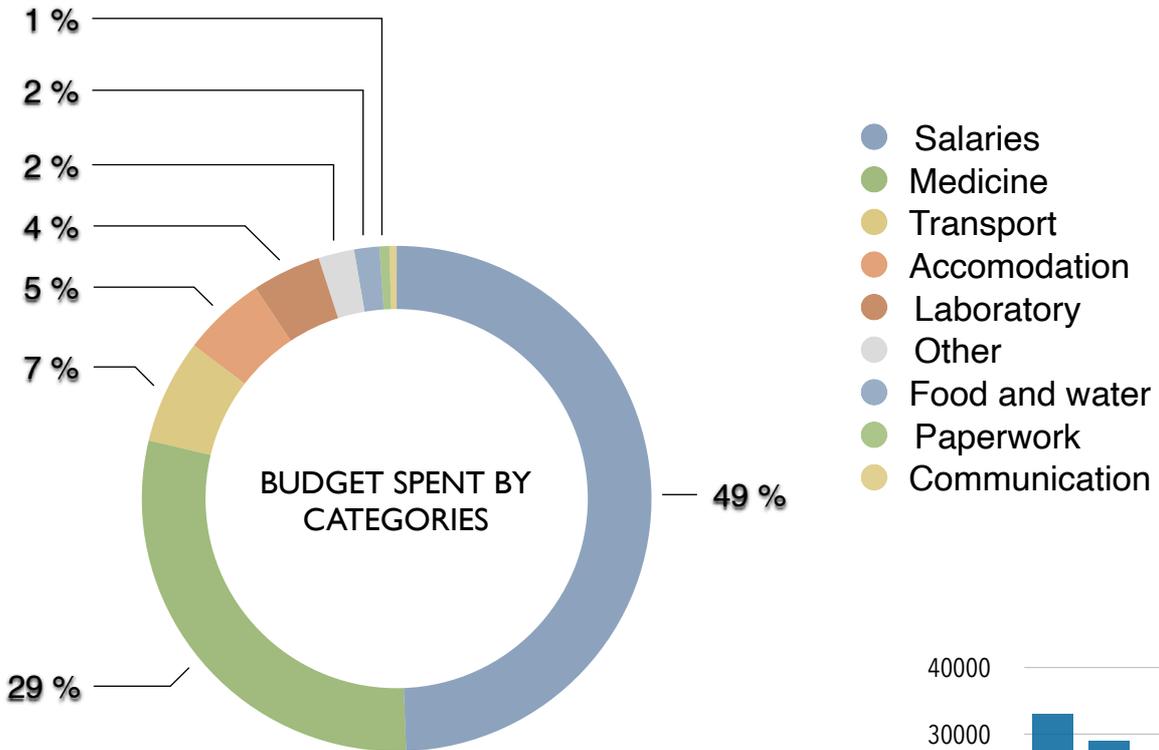
We are very grateful to all our partners and donors - individual and institutional - without whom we wouldn't be able to provide all of the above mentioned services. We are doing our best to make sure that all financial resources entrusted to us are being used responsibly, transparently, and for the utmost benefit of the vulnerable people we work for and alongside.

**TOTAL BUDGET SPENT: 1 162 043 \$**

## FINANCIAL REPORT

### DONORS

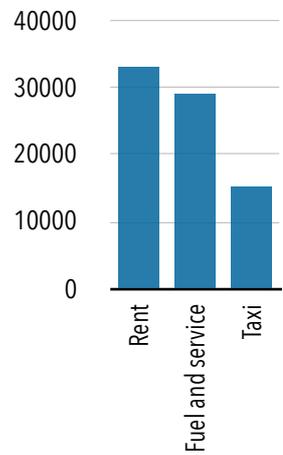




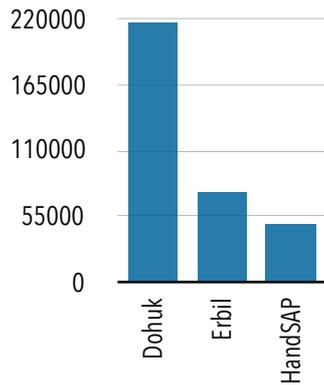
### SALARIES

- 61 employees
- 10 doctors, 38 paramedics, 13 non-medical personnel
- 58 working directly in the field, 3 in the office

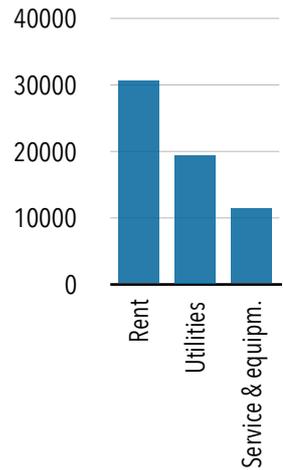
### TRANSPORT



### MEDICINE



### ACCOMOD.



# OUR DONORS



Polish aid



**USAID**  
FROM THE AMERICAN PEOPLE

DONORS OF HandSAP:



ANTONIANA



# OUR PARTNERS





We at STEP-IN believe, that everyone has a duty of solidarity towards fellow men. As people across the world suffer because of war, disease, poverty, famine, injustice - things they cannot overcome on their own - they often are or feel forgotten by the rest of the world. We strive not only to help them by relieving their suffering or helping create opportunities for a brighter future, but also to give them our time and attention, to understand their needs and challenges better, show them they are not alone, help them rebuild their dignity and build lasting bridges between the suffering communities and the rest of the world.

# ANNUAL REPORT

"WE RISE BY LIFTING OTHERS"

2019

