

Monthly COVID-19 Bulletin

April 2022

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Epidemiological Overview

Data as of 23 April 2022

Total cases 197 244	Total deaths 7 182	Total recovered 153 991
Case Fatality Ratio 3.6%	Total Tests 634 068	Total Vaccine Doses 3 677 141

Descriptive analysis of epidemiological data for Whole of Syria (23 April 2022)

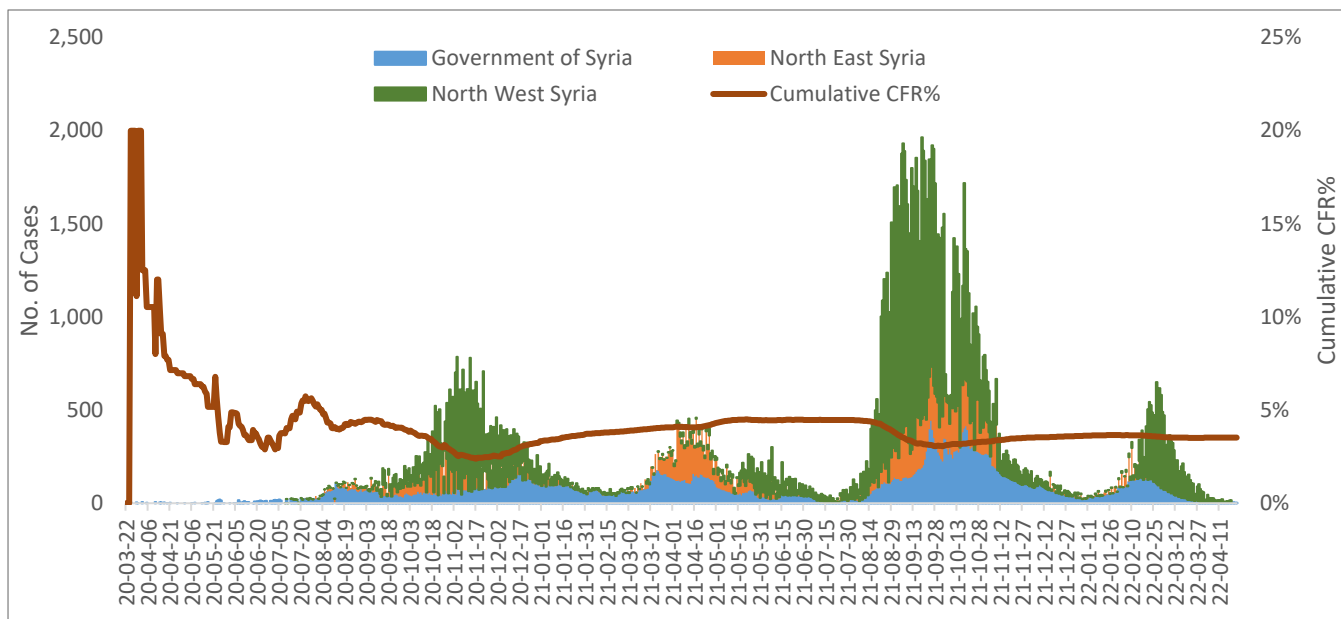
A total of 197 244 confirmed cases of COVID-19 were reported in Syria between 22 March 2020 and 23 April 2022; of which, 102 878 (52.16%) were reported from north-west Syria (NWS), 55 795 (28.29%) from areas controlled by the government (GoS), and the remaining 38 571 (19.55%) from north-east Syria (NES). During the same period a total of 7 182 related deaths were reported: of which 3 150 (43.86%) from GoS, 2 459 (34.24%) from NWS, and 1 573 (21.90%) from NES. The overall Case Fatality Rate (CFR) is 3.6%. The CFR was the highest in GoS (5.6%); in NES it was 4.1% and NWS - 2.4%. The high CFR rates in GoS is attributed to the testing strategy for only severe and critical cases admitted to the hospital for treatment.

The number of confirmed COVID-19 cases reported in April across the Whole of Syria decreased by 94% (n=371) compared with previous month (n=6,677). A decrease was noticed in NWS by 70% (n=260) compared to March (n=5,397). Cases reported in GoS decreased by 99.1% (n=100) compared to March (n=1,120). Moreover, NES reported a decrease of new cases by 93% with 11 new cases compared with 160 cases in previous month.

The decline of COVID-19 new cases was observed in all governorates of Syria. The number of COVID-19 reported cases and its percentage at the national total across all 14 governorates of Syria during the month of April is as follows: Aleppo 38.81% (n= 144), Idleb 35.04% (n= 130), Hama 6.47% (n= 24), Tartous 4.58% (n= 17), Damascus 4.04% (n= 15), Homs 2.7% (n= 10), Al-Hasakeh 2.16% (n= 8), As-Sweida 1.89% (n= 7), Dar'a 1.62% (n= 6), Lattakia 1.62% (n= 6), Ar-Raqqa 0.54% (n= 2), Rural Damascus 0.54% (n= 2).

Since the start of COVID-19 outbreak in Whole of Syria, four waves of COVID-19 were identified; the first wave peaked in November 2020; the second wave peaked in April 2021 and was mostly linked to Alfa and Beta variants. The third wave peaked in September 2021 with the Delta variant confirmed. The fourth wave, in February 2022 coincides with the Omicron variant confirmed in Northwest of Syria.

Figure 1. Whole of Syria weekly reported COVID-19 cases up to 23 April 2022

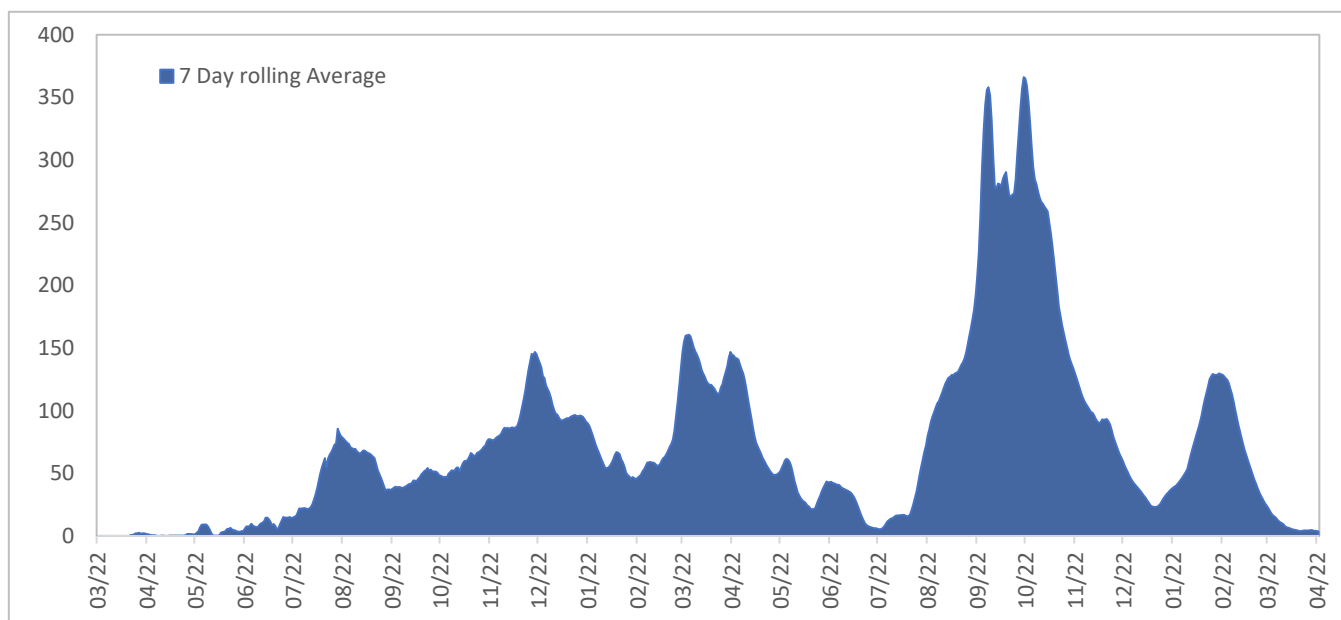


Descriptive analysis per region

Government of Syria

COVID-19 cases in GoS areas showed decrease during April 2022, the 7-day moving average of new cases was 4 compared with 16 average cases in March 2022.

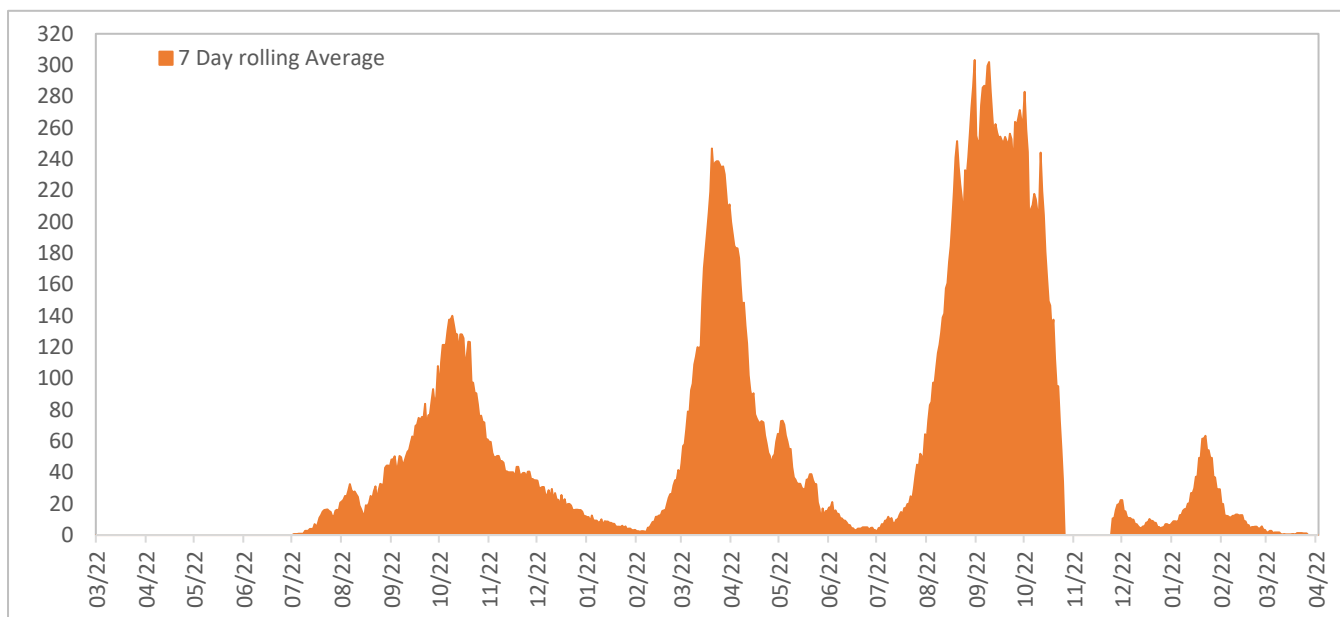
Figure. 2 The 7-days rolling average of COVID-19 cases in GoS



North-east Syria

There has been decrease of COVID-19 in NES since February 2022; the cases peaked on 12 February with 7-days moving average of 63 cases. The current 7-days moving average dropped to 1 case by the end of April 2022.

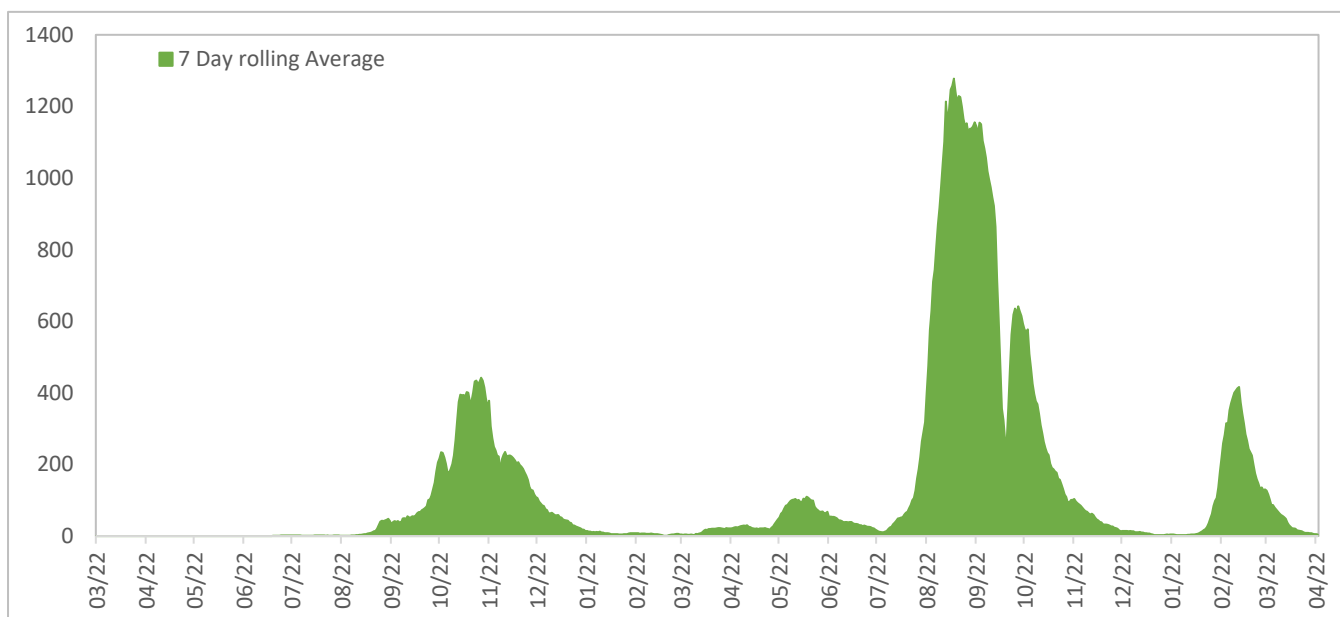
Figure 3. The 7-days rolling average of COVID-19 cases in NES



North-west Syria

The number of confirmed cases in NWS decreased in April 2022, the 7-day moving average of new cases by the 23 of April is 11 cases.

Figure 4. The 7-day rolling average of COVID-19 cases in NWS



Deaths

In April, the number of newly reported deaths associated with COVID-19 (n=32) is down by 73.1% compared to March 2022 (n= 119). The cumulative mortality rate has increased to 33.2 deaths per 100 000 cases. The highest number of COVID-19 associated deaths reported in April was in NWS (n=20) where deaths accounted for 62.5% of the total deaths in WoS. A total of 9 deaths (28.1%) was reported in GoS, and 3 deaths (9.4%) in NES. The cumulative case fatality rate is 3.6%. CFR remained highest in Deir-Ez-Zor 8.8%, Damascus 8.5%, and As-Swieda 8.7%. The high CFR is attributed to the current testing strategy, basically testing severe COVID-19 cases admitted to hospitals, while testing of mild and moderate cases Ag-RDTs is available only in some PHCs.

Figure 5. The 7-day rolling average of COVID-19 deaths

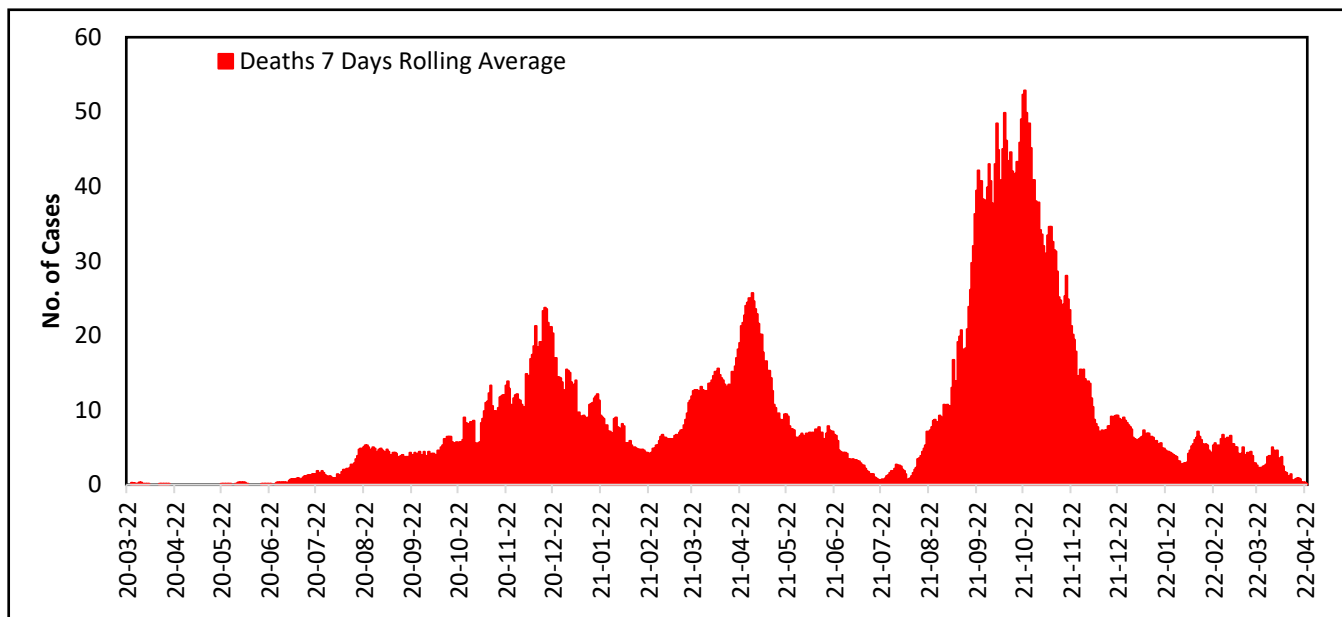


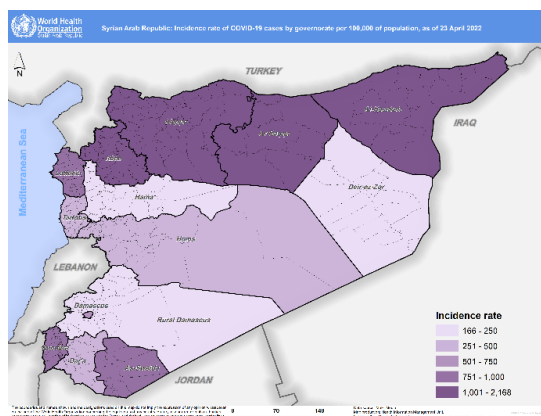
Table 1. Number of deaths increase/decrease since last month

7 182 Total COVID-19 related deaths reported to date	2 23-day average number of deaths (during reported month)
4 28-day average number of deaths (during previous month)	

Table 2. Newly reported and cumulative cases of COVID-19 and associated deaths, by region, up to 23 April 2022

Area	New cases in March 2022(%)	Change in new cases Last month*	Cumulative cases (%)	New deaths in March	Change in new deaths with last Month *	Cumulative deaths (%)
Government of Syria	100 (26.95%)	-91.1%	55,795 (28.29%)	9 (28.13%)	-86.4%	3,150 (43.86%)
North-east Syria	11 (2.96%)	-93.1%	38,571 (19.55%)	3 (9.38%)	-75.0%	1,573 (21.90%)
North-west Syria	260 (70.08%)	-95.2%	102,878 (52.16%)	20 (62.5%)	-51.2%	2,459 (34.24%)
Whole of Syria	371	-94.4%	197,244 (100.0%)	32	-73.1%	7,182 (100.0%)

Map 1: Total number of COVID-19 cases per 100 000 of the population reported in each governorate, as of 23 April 2022



Map 2: COVID-19 related deaths per 100 000 of the population reported in each governorate, as of 23 April 2022

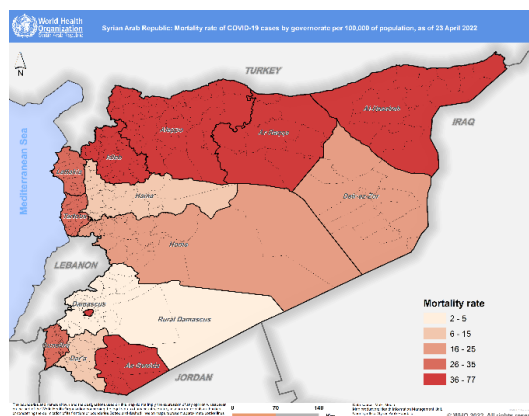
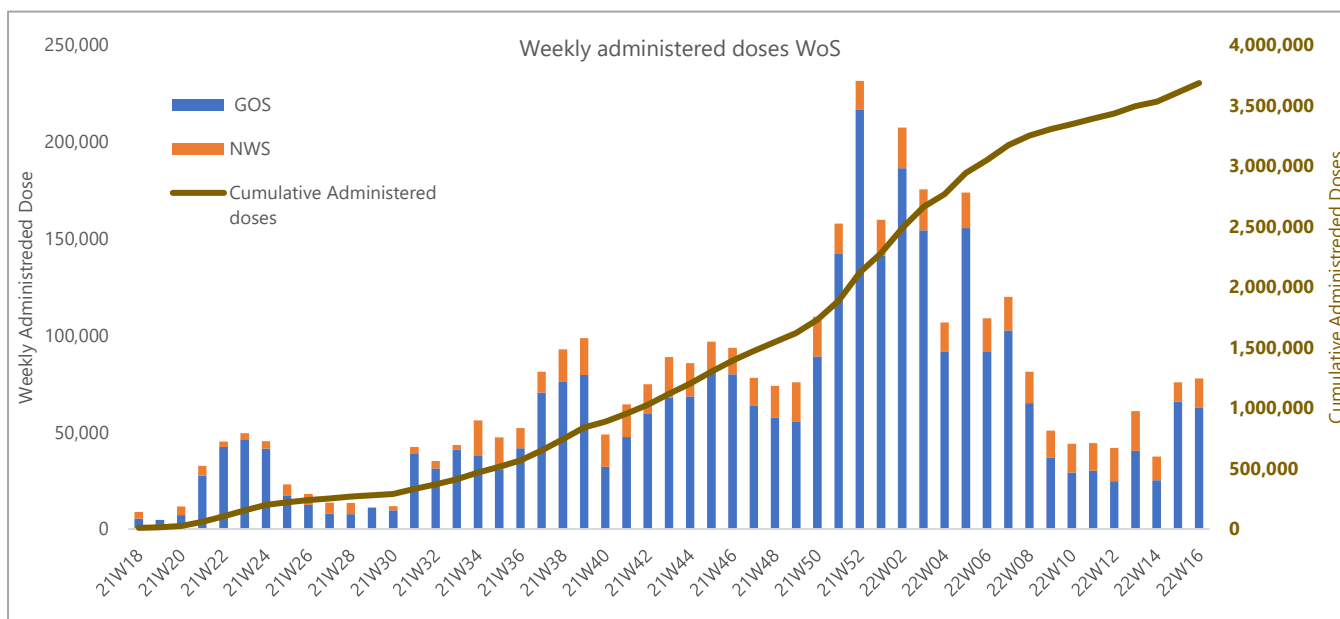


Table 4. Overall delivered vaccines since April 2021 till 23 April 2022:

	Type of Allocation	Manufacturer of vaccine	Quantity
GOS	COVAX	AZ Covishield	1,203,500
		AZ/AZD1222	1,318,340
		Sinovac	3,307,200
		Janssen	3,458,400
		Total	9,287,440
	Bilateral	AZ/AZD1222	368,640
		Sinopharm	1,995,000
		Sputnik light	250,000
		Sputnik V	100,000
		Soberana	20,000
		Abdala	20,000
	Total	2,753,640	
GOS Total			12,041,080
NWS	COVAX	AZ Covishield	53,800
		AZ/AZD1222	350,400
		Sinovac	823,200
		Janssen	832,800
		Total	2,060,200
WOS Total			14,101,280

As per the above table, vaccines received from bilateral agreements represent 20% of the total vaccines received, and the rest 80% were delivered through COVAX.

Figure 5. The average weekly administered doses during March 2022

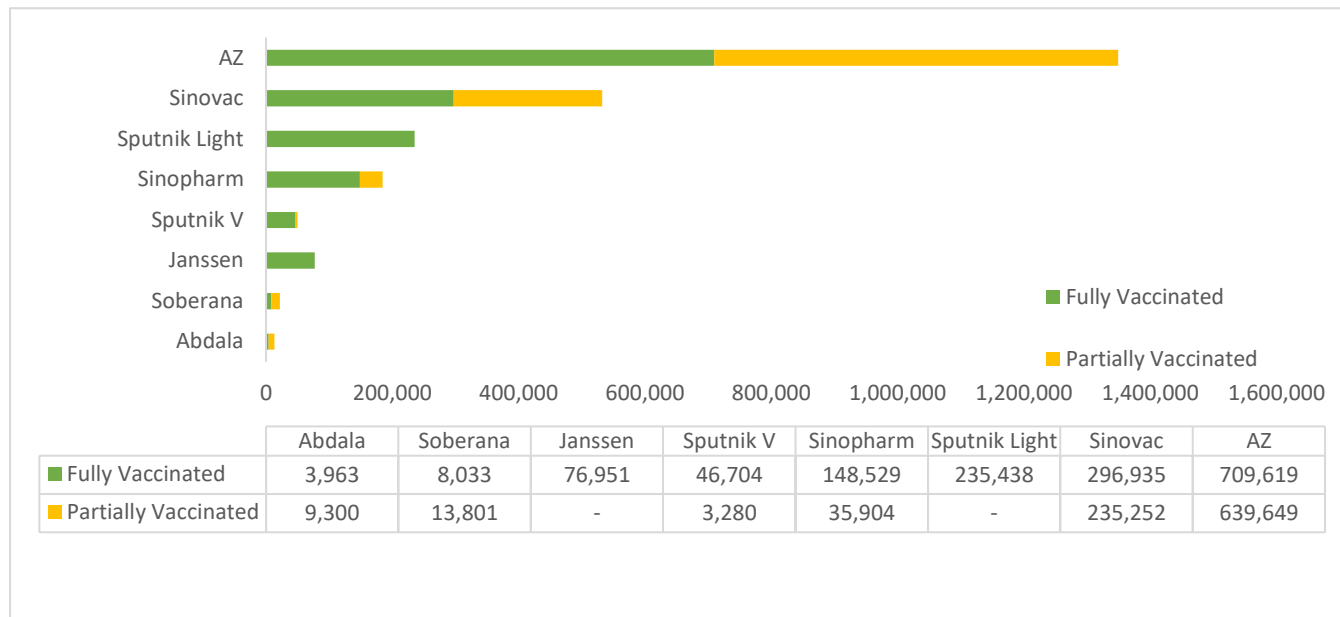


There is a 39% increase in the average of weekly administered doses of vaccines during March compared to the previous month.

Vaccination coverage:

12% of the total population received at least one dose of the vaccine, and only 7.4% are fully vaccinated. A total of 3,677,141 doses of different vaccines was administered and the total number of vaccinated people is 2,463,358.

Figure 6. Vaccination status in Whole of Syria as of 23 April 2022



Vaccination coverage per region:

Government of Syria

3,054,035 Vaccines Administered	
2,065,619 People who received at least one dose	1,300,805 People who are fully vaccinated*
12.7 % Percentage of the population who received at least one dose	0.8 % Percentage of the fully vaccinated population*
0.5 % Percentage point increase from last month	0.9 % Percentage point increase from last month

North-west Syria

623,106 Vaccines Administered	
397,739 People who received at least one dose	225,367 People who are fully vaccinated*
9.3% Percentage of the population that received at least one dose	5.2% Percentage of the fully vaccinated population*
0.5% Percentage point increase from last month	1.2% Percentage point increase from last month

Whole of Syria:

3,677,141 Vaccines Administered	
2,463,358 People who received at least one dose	1,526,172 People who are fully vaccinated*
12% Percentage of the population who received at least one dose	7.4% Percentage of the fully vaccinated population*

Percentage of the population that received at least one dose	Percentage of the fully vaccinated population*
0.6%	0.7%
Percentage increase from last month	Percentage increase from last month

WHO Syria operational updates by other pillars

Pillar One: Coordination

- Completed overview of health service availability, situation and response, including COVID-19, in the south of Syria.
- Initiated and consolidated an internal WHO exercise on reflection of key achievements, including COVID-19, for January-February 2022.
- Prepared key points for RC/HC visit to Nordic states as part of pre-Brussels Conference preparations, including COVID-19.
- Prepared a quarterly overview of health sector supported capacity building events for Quarter 2 of 2022.
- On 26 April, conducted a regular national health sector coordination meeting in Damascus. One of the agenda items was COVID-19 related situation.
- Followed up with respective focal points on preparations for the Brussels side event, including advocacy on COVID-19.
- On 19 and 26 April, attended and provided health sector updates (including COVID-19) during Roj camp monthly operational meeting (18 April), NES Formal and Informal Camps Coordination Meeting (25 April 2022) and Al-Hol camp weekly camp coordination meeting.
- On 21 and 28 April, organized and facilitated the Al-Hol camp health sector coordination meeting.
- On 27 April, organized and facilitated the Sub-national health sector coordination meeting for Qamishli Hub.

Pillar Two: Risk communication and community engagement

- To scale up vaccination services and generate more vaccine demand, during the month of Ramadan, vaccination teams have provided vaccination services during Friday prayers and in the evenings during Tarawih. More than 460 mosques and 13 churches were targeted across different Syrian governorates, with a special focus on NES.
- To scale up vaccination rates in northeast Syria, WHO and UNICEF mutually engaged with the Directorates of Health in Al-Qamishli and Al-Hassakeh, as well as the Ministry of Endowment to address faith-based leaders and discuss vaccine-related issues. The sessions were mind-changing to some people who were hesitant to take the vaccine and were later convinced and became pioneers within societies.
- COVID-19 vaccine acceptance was monitored, testimonials were collected, and initiatives were documented.
- To emphasize the significance of vaccines for everyone, testimonials of WHO staff were recorded and shared over social media platforms highlighting the importance of vaccines in maintaining good health including elderly and healthcare workers.
- To scale up RCCE activities in Syria, WHO, UNICEF and MOH conducted a meeting to discuss ongoing RCCE activities and measures to be taken to generate more vaccine demand.
- To raise awareness and understanding about health risks related to COVID-19, the mental health campaign, launched on 3 April, continues to convey health awareness messages about the importance of COVID-19 vaccination in parallel with addressing how to manage different mental health issues. The target of this campaign is school-aged children and parents in different Syrian governorates.
- WHO, in coordination with the Ministry of Education, launched a 20-day campaign targeting school-aged children and parents in Syria to train them on how to manage mental health issues, understand health risks related to COVID-19 and highlight the importance of COVID-19 vaccination.

Pillar Three: Surveillance

- WHO continues to support MoH to conduct active case finding visits in 14 governorates at prioritized sites and new sites; namely, private hospitals, high-risk groups, such as elderly in care institutions, imprisoned individuals, and IDPs in camps and shelters. Those weekly visits will entail sample collection, testing with COVID-19 Ag-RDTs for suspected cases and orientation for medical staff about COVID-19 case definition, and COVID-19 vaccines advantages to build trust and reduce hesitancy among health care workers.
- WHO continues to support the operations of 101 RRTs in 14 governorates by securing the transportation, and shipping the COVID-19 samples from Dara'a, Qunitera, As-Sweida, and Deir-Ez-Zor to the central reference lab.

- Supported MoH central RRT to conduct a field visit to Dar'a to investigate the outbreak of acute diarrhea which was reported on 25 March 2022 with 444 cases in two neighborhoods (Al-Qousor and Al-Sabel). The outbreak was linked with the contamination of drinking water with sewage, lab results of water samples showed bacterial contamination with E-Coli and Salmonella.
- Conducted a meeting with EWARS relevant officers at MoH to discuss the evaluation of EWARS by MoH and WHO/CO.
- Continue to support sample collection and testing for SARI cases admitted to influenza sentinel hospitals, combine the data and report influenza data on EMRO platform (EMFLU).
- Expand influenza surveillance in two hospitals, the pediatric hospital in Damascus, and Al-Qoutifa hospital in rural Damascus.
- Supported a meeting for the members of the National Influenza Committee and focal points in the sentinel hospitals to follow up on the influenza programme updates and progress.
- Printed and provided MoH with 50 copies of the National Influenza Preparedness Plan 2022-2023.
- Obtained MoH approval on Syria enrolment to the Global Surveillance of Antimicrobial Consumption component of GLASS (GLASS-AMC), and nomination of MoH focal point for GLASS-AMC.

Pillar Four: Points of entry, international travel, and transport

- WHO and UNHCR conducted a meeting to follow up on the process of establishing and equipping five additional medical points of entry in Jisr Al Qamar and Dabousiya in Homs, Areda in Tartous, Kasab in Lattakia, and Nasib in Daraa.

Pillar Five: Laboratories and diagnostics

- On 26 April, WHO completed the delivery of lab supplies and equipment to Deir-ez-Zor newly established laboratory. However, equipment installation and calibration will be completed by end of May. During this period, additional laboratory technicians will be trained as MoH has identified new 11 technicians.

Pillar Six: Infection prevention and control

- Follow up with MOE on the required support needed for the students coming from the cross-line and cross-border for their final exams. WCO will support with IPC/PPE supplies.
- Follow up with EMRO on the upcoming joint meeting with MOH counterparts to discuss the way forward to adopt the updated EMRO surveillance form for severe acute respiratory syndrome (SARS-CoV2) infections among healthcare workers. The overall goal is to protect healthcare workers in the region; provide a standardized methodology to implement a national hospital-based surveillance systems for early detection and timely reporting of the COVID-19 infected HCWs; the detection of hospital outbreaks for the infected HCWs; assess vaccination coverage for COVID-19 among suspect and infected HCWs; utilize the data for COVID-19 prevention of transmission and provide capacity building to national teams on surveillance of HCW infection.
- Coordinate with MOH counterparts and health stakeholders on capacity building needs with focus on IPC standard measures and patient safety in the context of COVID-19, targeted HCWs and front liners from isolation centers, public health laboratories, PHC, MOE and NGOs. Activities to be launched in mid-May.

Pillar Seven: Case management, clinical operations, and therapeutics

- The total number of the ambulances donated recently by WHO is 20 distributed as following: ten delivered to SARC, eight to MOH and two to MOHE.
- SARC ambulances will be distributed to the following governorates: Damascus - 2, Al Hassakeh - 2, Ar-Raqqa - 2, Deir-ez-Zor - 1, Lattakia - 1, Aleppo – 1, Homs - 1. For MOH, Deir-ez-Zor - 3, Aleppo - 3, and Ar-Raqqa - 2, as for MOHE the ambulances will be delivered to Al Baath University Hospital.
- Over 56 673 treatments of life-saving medicines and 255 trauma medical kits were delivered to health partners in Damascus, Aleppo, Hama, Homs, Ar-Raqqa, Al-Hassakeh Lattakia and Tartous. These deliveries are part of enhancing the capacity of public health facilities for timely and appropriate response to COVID-19 cases.
- 50 persons with disabilities benefited from different types of assistive devices that were delivered to health partners in Homs and Hama.

Pillar Eight: Logistics and operations

- In April 2022, WHO provided approximately 122 tons of medical and lab supplies, kits, and equipment to 11 governorates with a total value exceeding USD 2.2 million. They were distributed to the Ministry of Health DOHs in different governorates, MOHE and MOE-affiliated health facilities, NGOs, INGOs, and SARC.




- The Digital Mammography X-Ray Machine for SARC has been received and delivered to SARC Al Zahera hospital.
- The Digital Mammography X-Ray Machine in favor of Harasta National hospital (IMS GIOTTO CLASS 3D READY 30010-00 + Colenta HighCap XP printer) will be received on 8 May 2022 in WHO WH.
- MOFA exemption for 2 Scanners/Spiral Computed Tomography in favor of Harasta national hospital and Al Assad hospital in Deir-Ez-Zor was obtained. GL was provided on 26 April and the ETA is on 15 May.
- Handed over 20 ambulances as follows: 2 for MOHE, 10 for SARC and 8 for MOH.
- Three crossline shipments (one road convoy with two trucks in total and two airlifts) have been delivered to North-east Syria in April 2022 with a total weight of 13,400 kg. It included different types of scales for paediatric-medicines-VIRAL RNA EXTRACTION KIT-Lab, Supplies-Suction, pump-Thermometer infrared, RDT COVID, medicines and vaccines in favor of Qamishli national hospital in Al Hassakeh DOH and Qamishli hub.
- The supplies under the Embassy of Poland donation have been received in WHO WH on 24 and 28 April 2022. The total value of the donation is around 340,000 USD and the shipping cost is covered by WHO. The shipment included ventilators, patient beds, oxygen supplies, essential medicines to enhance the response to COVID-19 case management, and lifesaving medicines sufficient to provide about 71,067 treatments.

Pillar Nine: Maintaining essential health services and systems

- A total of 40 071 mhGAP consultations were provided during the first quarter of 2022, in addition to 37 660 psychosocial counselling provided at public health facilities. A total of 1 527 specialized psychological interventions and 167 awareness raising sessions were also implemented.
- WHO supported 65 194 mental health consultations and comprehensive services through 6 current implementing partners across the country in 120 sub-districts. MH experts are assessing NGO human resource capacities at the hubs level and setting priorities to ensuring that mental health services and the capacity building activities are ongoing.
- The wide national campaign that was launched on 3 April in cooperation with the MoE/ health directorate is still ongoing. Around 2261 schools were reached through 140 multidisciplinary teams and 6893 cases were identified and managed. The goal of this campaign is to combat and prevent bullying behaviours as well as to address coping positively with exams anxiety for students and parents while promoting COVID-19 vaccination and raising awareness about COVID 19 preventive measures. The campaign will be concluded by the end of April.

SYRIA COVID-19

Travel Updates & Requirements (as of March 2022, Source MOH)

 TESTING	 QUARANTINE	 VACCINES
<p>All passengers arriving to Syria, <i>except children under 12 years,</i> must have <i>a negative PCR test result,</i> performed in a Lab accredited by the country's local authorities, and approved by the Syrian Health Ministry, <i>latest 96 hours.</i></p>	<p>Quarantine: Passengers arriving to Syria with negative PCR test <u>do not request Quarantine</u></p>	<p>Exception from mandatory testing: Syrians and foreigners arriving to Syria will be exempted from presenting a PCR test if they are fully vaccinated with the COVID-19 vaccine, in addition to adhering to all health requirements.</p>

Technical guidance and other resources

- [WHO Syria Site](#)
- [WHO technical guidance](#)

- [WHO COVID-19 Dashboard](#)
- [WHO Weekly Operational Updates on COVID-19](#)
- [WHO COVID-19 case definitions](#)
- [COVID-19 Supply Chain Inter-Agency Coordination Cell Weekly Situational Update](#)
- [Research and Development](#)
- [OpenWHO courses on COVID-19](#) in official UN languages and in [additional national languages](#)
- [WHO Academy COVID-19 mobile learning app](#)
- [The Strategic Preparedness and Response Plan](#) (SPRP) outlining the support the international community can provide to all countries to prepare and respond to the virus

Recommendations and advice for the public:

- [Protect yourself](#)
- [Questions and answers](#)
- [Travel advice](#)
- [EPI-WIN: tailored information for individuals, organizations, and communities](#)