

Week 20, 12-18 May 2018

General developments & political & security situation

- Evacuations following local agreements continue to see people moving from areas in rural Damascus and northern rural Homs, with nearly 30,000 people displaced to the northwest over the last week.
- SAA continued its military operation against ISIL in south Damascus with significant advances. Heavy airstrikes and IAF have been used in the operation, which prompted retaliatory IAF against GoS controlled areas.
- Turkey has set up "Monitoring Point 11" in rural of Hama. Russia moved to establish a counterpoint in Idlib.
- The 9th round of peace talks took place in Astana. Russia, Turkey and Iran issued a joint statement that included a number of points that aim at supporting the political settlement process in Syria.

OVERVIEW

KEY HEALTH ISSUES

Health response to multiple and simultaneously evolving emergency situations across the country:

- Cases of measles across the country, leishmaniasis in northern Syria and acute diarrhea in NE Syria.
- An estimated 137,070 individuals remain **displaced from Afrin district** to the Tall Refaat, Nabul, Zahraa and Fafin areas.
- In **East Ghouta**, about 44,000 IDPs remain in eight shelters, and an estimated population between 100 and 140,000 in the communities that remain largely inaccessible to health assistance.
- Approximately 28,000 people have evacuated **Northern Homs** through Rastan exit point since 7 May 2018 towards Idlib governorate. A total of 150,000 people in rural Homs remain in areas inaccessible to health assistance.

KEY GAPS & CHALLENGES

- See week 19 report.

OPERATIONAL UPDATES

1. Coordination:

- OCHA Workshop, 14-15 May, which brought together members of the inter-sector groups at hub level from Damascus, Jordan and Gazientep as well as Whole of Syria coordinators. The overarching theme of the discussions was "**Protection and Continuity of Service Delivery**".

2. Information and planning:

- Produced a health sector 4Ws snapshot for Q1 2018 in Homs.
- Site visits to Lattakia and Tartous to assess priority ICTs needs for hospital management systems in MoHE hospitals and HeRAMS for SARC health facilities; Homs hub to provide support on information systems.
- Developed maps: Distribution of health facilities in Homs at governorate and health districts levels; Drinking water status of uncontrolled groundwater wells in the City of Aleppo, as 14 May 2018.

3. Health operations:

Aleppo Afrin response:

Situation update

- Number of IDPs decreased in some location comparing to what reported previously, this because of the on-going return movement to the community of origin.
- As many as 50,000 people are still in Afrin city and an additional 100,000 in rural Afrin

- Currently, IDP movements are free between the reception areas, while no return or onward movement has been permitted.

Coordination & response pipeline:

- 5 coordination meetings were conducted with (Al-Taalouf, GOPA, Al-Ihsan, Al-Ber & AL-Ihsan) .
- 6 NGOs involved in Afrin response were assessed in terms of medicine and supply needs.
- 7 mobile medical teams supported by WHO still pending , waiting for MoSA approvals.

Nutrition activities:

- WHO supported mobile teams started to provide nutrition surveillance activities and MUAC screening for targeting 20,000 expected children under 59 months. 4 mobile medical teams with 4 paediatric and 4 trained Nurses supported by WHO screened 565 children.
- 5 MAM cases were registered in Tall Refaat and IDPs collective shelters and started their treatment through coordination with national NGOs support by UNICEF in addition to 1 SAM case in Kishtar collective shelter.

Disease surveillance & immunization:

- Acute Diarrhoea, URIs, and Lice are the most reported diseases among IDPs.
- Decreasing in reporting of measles suspected cases in weeks 18 & 19
- DoH activated health center in Fafin village, the center is providing Leishmaniasis treatment.
- Essential outreach services: 26 medical mobile teams, health units and medical points that have been mobilized: 5 DoH donated mobile clinics, 5 SARC mobilized mobile clinics, 8 mobile medical teams by NGOs, 2 DoH PHC centers ,3 SARC PHC, 1 NGO PHC, 1 dialysis center, and 1 local hospital NGOs Activities

Mental Health

- Through DoH: 96 mhGAP consultations
- Through NGOs: 365 mhPSS services for 12 social workers from 3 NGOs; 48 neurological consultations "YBY "; 84 mhGAP consultations.
- 823 MHPSS and medical services have been provided in the GOPA community center

NGO activities

- 13 WHO Supported mobile teams are operated through 5 national NGOs.
- 3 additional mobile teams supported by WHO started their activities during this week
- One static point in Nubbol , with 4 specialist doctor , 3 nurse and 3 health worker are providing primary health services for Afrin IDPs in Nubbol.
- 132 patients received STHC services including 46 deliveries referred to Al-Zahraa field hospital since patients transportation are facilitated through SARC ambulances.

East Ghouta response

- Daily IA assessment/monitoring missions ongoing. Approved WHO, SARC and MoH rapid public health assessment is still pending.
- High-level interagency visit into East Ghouta was finally carried out on the 14 May. 2 locations (Saqba and Kafr Batna) were visited, including a DoH health center and private/SARC supported hospital.
- Limitations in freedom of movement for the IDPs in the shelters and also for the people left behind or returned inside East Ghouta.
- IDPs in shelters are expected to return to East Ghouta before and during the first week of Ramadan – the first 3,000-4,000 have left today Herjallah shelter (numbers to be confirmed) to Saqba.
- Adjusted monitoring tool for shelter visits introduced and tested this week.
- Urgent need for a public health assessment inside East Ghouta as more people are expected to be allowed to return while coverage of health services is very limited and freedom of movement is expected to remain limited for the time to come.

Service delivery EG shelters (about 44,000 IDPs in eight shelters)

- All eight shelters are covered by fixed and mobile teams providing ambulance/emergency services, OPD, RH and child, and mental health services, coverage is sufficient.
- Consultation numbers are high, total # of health services provided per day reaches 10% of shelter population consulting daily in one of the services.

- No EWARS alerts in last 2 weeks from the shelters
- SARC is rationalizing mobile teams in the shelters and closed one of the 24 hour clinics in Dweir shelter.
- Reduction of number of national NGOs teams supported by WHO –permission to provide mobile services inside East Ghouta

Service delivery inside East Ghouta (estimated population between 100 and 140,000)

- 8 locations served with daily DoH mobile teams
- 3 NNGOs (MSJM, Al Sham, SFPA) allowed to provide mobile clinic services inside EG, others waiting for permission

Challenges:

- Limited access by UN agencies inside EG, only one quick high level mission realized until today (14th of May) to only two locations.

Homs response:

Response to Northern Rural Homs

- DOH teams vaccinated 2573 children u5 with OPV and 403 children with routine vaccination.
- Lack of information or access to populations remaining in areas under negotiation.

Routine operations

- EWARS weekly reports & tally sheets collected, including new SARC health points.
- Facilitate a workshop at 12-15/5/2018 on Basic Trauma Life Support –Mobile clinics-DOH Homs for 25 participants.
- Facilitated a workshop at 13-17/5/2108 on MH GAP interventions guide phase 1- for DOH Homs for 25 participants.
- HIS: monitoring visit to Albir NGO shelter introduced for the 9th grade (316 students) from Alhoule Northern Homs area for the exam period 13-24/5/2018. Medical services provided by SARC team.
- Distribution of the Permethrin 1% Shampoo in 4 shelters by 2 local NGOs. Dispatched shipment of Medicine and Permethrin 1% Shampoo to SARC Homs.
- HeRAMs field visit conducted to Jouber PHC (in Northern Homs area).

Lattakia response:

- Preparedness for possible influx of IDPs from Idlib Governorate (Foah and Kefraya).
- Follow-up visits to Al Hamidieh & Altalae camps with Tartous social welfare manager.
- Printing PFA materials for Mental Health program.

Northeast Syria (Al-Hassakeh; Ar Raqqa; Deir-ez-Zoir) response:

Pharmacy and STHC program:

- Prepared distribution plan to support the needs of Alhasaka, Arraqqqa, Deirzzor and eastern rural of Aleppo governorates, targeting 8 hospitals (Alkasra, Altabka, Tal Abiad, Tal Tamr, Alhasaka, Qamishli, Allulua, Kobani), 2 health centers (Arraqqqa city, Ras Alain city) and 3 camps (Alasreesha, Alhol, Mabrouka) through different health actors.

National NGOs coordination in

- St.Ephram committee in coordination with three NGOs, GOPA and Al-Hikmah private hospital are the ongoing WHO's partners.
- A medical mobile team conducted six field visits to Al-Kasra and Zghaer in Dier Ezzour, the mobile team consisted of: Internist, Gynecologist, Pediatric, Paramedic, 2 nurses, midwife, Psychotherapist and Admin, the mobile team provided PHC services and distributed 3200 brochures about the key healthy messages.
- Prepared to start the static medical point of Al-Areesha camp which will take place in the next week.
- Follow up the diarrhea cases in Al-Mabruka camp.
- Follow up cases were referred from Tal Abyad National Hospital to Al-Hikma private hospital in Al-Hassakeh for advanced secondary health care and Trauma management.

Acute Diarrhea in Dier-Ezzor:

- Cases of acute diarrhea have been reported to WHO from Deir Ezzor Governorate in north eastern Syria since 26 April. Several villages on the eastern bank of the Euphrates have reported cases.
- Laboratory results of 18 stool cultures indicate that E. coli as the predominant etiology. The national public health laboratory is further ascertaining the strain (though identification of E. coli O157:H7).

WASH interventions to date are continuing:

- Bacteriological laboratory analysis of 3 Euphrates river water samples from affected areas showed that the river water is contaminated with levels of E. coli above accepted standards.
- Water tankers disinfection began on 5 May for 13 villages located in the Husseiniyeh District along the eastern side of the Euphrates River (area controlled by KSA). Total number of inhabitants is 70,000 to 80,000.
- 400 - 500 tankers are disinfected daily. 2000 - 2500 chlorine tablets are utilized to disinfect tanker water.
- UNICEF is conducting a technical assessment in order to determine specific needs in conjunction with the local council.

4. Technical Expertise

Non-Communicable diseases / Primary healthcare

- Submitted & followed up an official letter to the Syrian MOH regarding the “High-level Regional Policy Dialogue in preparation of the Third High-level Meeting of the United Nations General Assembly (UNGA) on the Prevention and Control of Non Communicable Diseases”, EMRO, Cairo, Egypt, 3-5 July 2018.

Immunization:

No update.

Mental health program:

- Site visits were conducted to seven PHC and community health centers in Hama, Homs and As-Sweida'a to follow up on the implementation of mhGAP programme and to provide the needed technical support.
- Coordination with Syrian Pulse NGO to follow up on the process of establishing the family well-being community centers in Deir-ez-Zoir city.

Nutrition and child health:

- Conducting 6 Social mobilization meetings in new borne care at home for 90 focal points in 6 governorates: Damascus, Daraa, As-Sweida, Rural Damascus, Quniterah, Homs.

Secondary health care program:

- Conducted a mission to Homs to follow up the progress of work and present an overview of work plan activities under secondary program.
- With co-ordination with WHO engineer consultant, assessed the functionality of medical equipment in Tartus and Al-Mosat Hospital and developed a response plan to ensure the functionality of the mentioned machines.

Trauma:

- Daily follow up with the Directorate of Emergency and Ambulatory Services on the referred cases from Eastern Ghouta and IDP shelters to public hospital in Damascus and Rural Damascus. It is noticed that the number of referred patients has declined (almost 60 %) in the past 2 weeks compared with the beginning of the evacuation.

Disease surveillance and response:

Disease surveillance in HTR areas:

- Training on EWARS for DoH health workers at the areas located in Deirezzor conducted from 10 - 12 May.
- For the eastern bank of the Euphrates, WHO has assigned 9 new EWARS assistants to collect weekly reports.

TB response:

- 30 TB patients were reported from Ain AL Arab district in Rural Aleppo, WHO is coordinating with the national TB program to deliver TB medicines to Ain Aarab through Al-Hassakeh
- Following up the notification on TB cases in Roj camp in NES, 2 patients were under treatment for more than 2 months, new septum samples will be collected to identify patients progress in order to response accordingly.

Leishmaniasis response:

- WHO supported Mentor treatment center in the north east Syria with 5000 vials of Glucantime.

WASH

No update.

National NGO coordination:

- Facilitated and coordinate data collection among technical units as part of the preliminary procedures for WHO training assessment / phase 1 conducted by an international consultant.
- Key findings and recommendations of the Public health assessment in IDPs camps in NES Syria were presented to WHO technical staff and a plan of action was developed to address the identified needs.

External Relations, Coordination and Communications:

No update

Operational support and logistics:

- Dispatched 0.4 tons of medicines and wheelchairs, covering 2 governorates (Rural Damascus and Al-Hasakah). The recipients included SARC, Governorate and INGO.
- The total number of treatments is 1,768. The dispatched supplies included:
 - 11 adult wheelchairs and 5 children wheelchairs delivered to the governorate of Al-Hasakeh.
 - 5,000 ampoules of Meglumine antimoniate 1.5 g/5 ml delivered to Mintor INGO – Al-Hasakeh.
 - 3030 tablets of Olanzapine 10 mg tab delivered to SARC warehouse in rural Damascus to support the IDPs from Eastern Ghouta in the shelters.

RESPONSE PRIORITIES

- Afrin, Eastern Ghouta, Rural Homs, North-East Syria

Annex 1: Current WHO agreements with national NGOs

| Governorate | Location of current of ongoing MOUs | # ongoing MOUs | # in preparation |
|----------------|--|----------------|------------------|
| Damascus | Dummer Al Balad - Al Midan | 3 | 5 |
| Rural Damascus | Dahyet Qudsayeh - Hai Al Wourood - Bludan, Madaia, Sargayah, Sasaa , Kharbet Al Ward, Kharbet Al Shaiab | 2 | 2 |
| EG Response | Herjaleh, Harasta, Kfer Batna, Ein Terma | 1 | 5 |
| Homs | Wear, Al Hamra, Al Hamediyah ,Al Qaryatain, Al Fruklus | 1 | 5 |
| Hama | | 0 | 3 |
| Aleppo | Nabul - Zanairta - Mayasah - AL-Mogambo - Burj Al-Kaaf -Al-Zouk - Tall Refaat - Kafar Naya - Al-Zyara - Deer Jmal - Ihras - Kashtaar - Al-Ukaibeh - Kherbat AL-Hayat - Tal | 3 | 5 |

| | | | |
|--------------|---|-----------|-----------|
| | Jbeen - Ibeen - Sheikh said - Salah AL-Deen - Al-Mshatia - Bostan AL-Zahra - Al-Villat - Menbej | | |
| Al Hasakeh | Hasakeh city - Mabroukeh camp | 3 | 1 |
| Ar Raqqa | Al-Tabqa - Al-Twehena camp - Ain Issa camp Al-Karama/Alhamrat | 1 | |
| Deir Ez zor | Deir Ez zor city + Abu Khashab | 1 | 1 |
| Total | | 15 | 27 |

Annex 2: WHO supported capacity strengthening:

| Date | # participants | Details/Field | Program |
|---------------|----------------|---|---------|
| 12/05/2018 | 25 | NS, IYCF, Supplementary feeding, and new nutrition surveillance records for NGO in Damascus | NUT |
| 12-15/05/2018 | 25 | Basic Trauma Life Support "BTLS" in Homs | Trauma |
| 12-16/05/2018 | 25 | War Wounded Injuries Management "WWIM" in Damascus | Trauma |
| 12-17/05/2018 | 25 | TOT for Integrated management childhood illness (IMCI) program in Damascus | NUT |
| 12-14/05/2018 | 25 | HIV program officials from All Syrian Governorates in Damascus | EWARS |
| 13-17/05/2018 | 25 | Mental health GAP intervention guide phase1 for MoH of Homs -Doctors in Homs | MH |
| 13-14/05/2018 | 25 | Doctors of reporting hospitals in Damascus | PHC |
| 13-17/05/2018 | 25 | School Mental Health Program for MoE Hama in Hama | MH |
| 13-15/05/2018 | 25 | First Aid and Basic Life Support "FA&BLS" in As-Swaida | Trauma |
| 13-17/05/2018 | 25 | Mental health GAP intervention guide one-phase training for Deir Ezzour NGOs in Damascus | MH |
| 13-14/05/2018 | 25 | Mental health GAP intervention guide phase1- Part2 for Damascus and R. Damascus NGOs in Damascus | MH |
| 14-18/05/2018 | 10 | Poliovirus Diagnosis using rRT-PCR (ITD and VDPV) version 5.0 in Damascus | PHC |
| 15-17/05/2018 | 25 | Prevent HIV transmission from pregnant mother to fetus in Damascus governorate duration of 1st quarter 2018 in Damascus | EWARS |
| 16/05/2018 | 20 | Polio Follow-up Committee in Damascus | PHC |
| 16-17/05/2018 | 25 | Mental health GAP intervention guide refresher for MoH Hama-Doctors in Hama | MH |
| 16/05/2018 | 45 | 3 meetings on Social mobilization for newborn care at home programme in Damascus, Daraa and As-Swaida | NUT |
| 17/05/2018 | 20 | NITAG committee in Damascus | PHC |
| 17/05/2018 | 45 | 3 meetings on Social mobilization for newborn care at home programme in Damascus and Homs | NUT |

Annex 3: WHO Supported Health services in NES

| Governorate | Area | # of outpatient consultations | # of beneficiaries reached with the medicines | # of secondary health consultations | # of trauma referrals | # of Mental Health Psychosocial Services | # of assisted people with disability |
|-------------|------------------------|-------------------------------|---|-------------------------------------|-----------------------|--|--------------------------------------|
| Al-Hassakeh | Hassakeh city center | 664 | 517 | 52 | 70 | 0 | 3 |
| Al-Hassakeh | Al-Mabrouka camp | 402 | 402 | 0 | 0 | 42 | 0 |
| Al-Raqqa | Al-Tabqa | 697 | 696 | 0 | 0 | 68 | 0 |
| Al-Raqqa | Al-Twehena camp | 780 | 780 | 0 | 0 | 120 | 0 |
| Al-Raqqa | Ain Issa camp | 1355 | 1334 | 0 | 0 | 98 | 0 |
| Al-Raqqa | Al-Karama/Alhamrat | 741 | 729 | 0 | 0 | 33 | 0 |
| Aleppo | Manbij | 611 | 611 | 0 | 0 | 49 | 0 |
| Dier Ezzour | Al-Kasra and Zghaer | 805 | 783 | 0 | 0 | 43 | 0 |
| Dier Ezzour | Dier-Ezzor city center | 508 | 394 | 0 | 0 | 0 | 0 |
| Sub-total: | | 6589 | 6176 | 52 | 70 | 453 | 3 |

Annex 4: WHO Supported Health services in Homs

| Partner | District | Commune/Village/Town | # of outpatient consultations PHC services | # of SHC services | # of trauma patients |
|------------|------------------|----------------------|--|-------------------|----------------------|
| AL-Birr | Alhamra clinic | Homs city | 3385 | 179 | 24 |
| AL-Birr | ALWaer clinics | ALWaer | 1798 | 172 | 27 |
| AL-Birr | Furqlus | Furqlus village | 734 | 89 | 19 |
| AL-Birr | Qaryatayn | Qaryatayn village | 460 | 103 | 26 |
| AL-Birr | Hamediyeh clinic | Homs city | 2890 | 139 | 24 |
| Sub-total: | | | 9267 | 682 | 120 |

Annex 5: WHO Supported Health services in Aleppo

| Humanitarian actor | Area | Afrin IDPs | | Host community | | Comments |
|--------------------|------------------------|-------------|----------------|----------------|----------------|---|
| | | NO families | NO individuals | NO families | NO individuals | |
| SARC | Tal Refaat | 4,011 | 19,149 | | | Including host community |
| | Dir Jmal | 1,619 | 8,091 | | | |
| | Kafr Naseh | 573 | 2,872 | | | |
| | Zahraa | 4,000 | 24000 | | | Estimated number by SARC, re-assessment is on-going |
| | Nubul | 6,000 | 36000 | | | |
| | Shahbaa Camp | 110 | 615 | | | |
| | Barkhadan (Fafin) Camp | 675 | 3700 | | | |
| A'ser Camp | 255 | 1000 | | | | |

| | | | | | | |
|----------------------|------------------|---------------|----------------|------------|--------------|--|
| | Afrin camp | 74 | 400 | | | |
| | Aloushiyeh Camp | 140 | 840 | | | |
| | Aleppo City | 919 | 4595 | | | Before and during the first 2 weeks of the military operation in Afrin |
| Ahl Al-Khaier | Kafr Naya | 1,205 | 7,100 | | | Registration still on-going |
| Tallouf | Oqibeh | 1,328 | 7968 | | | |
| Al-Ihsan | Khirbet Al-Hayat | 690 | 2,929 | | | |
| | Ziyaraa | 977 | 4,082 | | | |
| For Aleppo | Tal Ajar | 40 | 193 | 33 | 159 | |
| | Kafr Anton | 33 | 160 | 31 | 148 | |
| | Tenb | 30 | 152 | 84 | 412 | |
| | Kashtaar | 106 | 512 | 84 | 405 | |
| | Subtotal | 22,785 | 124,358 | 232 | 1,124 | |

Annex 6: Health services provided through national NGOs health facilities to Afrin IDPs

| # | Partner | Health facility | District | # of outpatient consultations PHC services | # of patients received assistance with medicines | #of MHPSS services | # of SHC services | # of Services provided for people with special needs |
|----|------------------|-----------------|----------------------|---|--|--------------------|-------------------|--|
| 1 | Al-Ihsan | Mobile team | Meskaan-Kafr Naseh | 136 | 136 | 86 | 3 | |
| 2 | Al-Ihsan | Mobile team | kafen | 67 | 67 | 47 | | |
| 3 | Al-Ihsan | Mobile team | Abin | 73 | 73 | 36 | 2 | |
| 4 | Al-Ihsan | Mobile team | Kishtaar – Tenib | 84 | 84 | 47 | 1 | |
| 5 | Yadan Biyad | Mobile team | Kherbet Al-Hayat | 70 | 70 | | | 12 |
| 6 | Yadan Biyad | Mobile team | Zyara | 249 | 249 | | | 8 |
| 7 | Yadan Biyad | Mobile team | Afrin Camp | 141 | 141 | | | 17 |
| 8 | Yadan Biyad | Mobile team | Fafin Barkhodar Camp | 196 | 196 | | | 22 |
| 9 | SCC | Mobile team | Afrin Camp | 68 | 93 | 10 | | |
| 10 | SCC | Mobile team | Al-Asser Camp | 119 | 80 | 19 | | |
| 11 | Al-Taalouf | Mobile team | Al-Aloushiya camp | 86 | 86 | | | |
| 12 | Al-Taalouf | Mobile team | Al-Ukaiba | 62 | 62 | | | |
| 13 | GOPA | Mobile team | Al-Shahbaa camp | 40 | 48 | 120 | | |
| | Al-Ihsan | PHC | Nubbol | 1014 | 987 | | 5 | |
| | Sub total | | | 2405 | 2372 | 365 | 11 | 59 |

