Week 26, 23 – 29 June 2018

General developments & political & security situation

- The security situation within the AOO remains volatile and unstable with the main hot spots in areas of Daraa, Al-Hasakah and Al-Mayadin towns.
- As hostilities escalate in southwestern Syria, civilian deaths continue to be reported and up to 66,000 people have been displaced. The majority of the displaced fled from eastern Dara’a towards the Jordanian border, many of whom remain stranded in the desert area with little access to humanitarian assistance. At least 13,000 have fled toward Quneitra governorate and hundreds of others have reportedly fled to Government-controlled areas in As-Sweida governorate. The number of internally displaced people is expected to rise as hostilities continue. At least 29 civilian deaths have been reported as a result of ground-based strikes and airstrikes on 28 June, and at least 50 have been reported since 17 June. Between 24 June to 27 June, five attacks on healthcare were reported, including three hospitals and two primary healthcare clinics. While routes used by interagency cross border convoys from Jordan remain open, planned convoys in the past two days were postponed due to ongoing hostilities and safety concerns.
- In the northwest, two vehicle-borne improvised explosions occurred on 27 June in Afrin city, which reportedly killed 11 people and wounded 23 others. The explosions came hours after armed clashes reportedly took place in the same area. This is the first incident of this kind since the area changed control.
- In the northeast, the last week witnessed a continuation of SAA and Pro-GoS forces (against ISIL locations in Al-Boukamal, Al-Mayadin as well as the vicinity of T2 oil pumping station. ISIL conducted several attacks against GoS forces in the area mainly of Kashmah, east rural Deir Ez-Zor. SDF continued “Al-Jazeera Storm” operation in east rural Deir Ez-Zor and south rural Al-Hasakah, which aim at eliminating ISIL presence in the area as well as to secure the Syrian – Iraqi borders. SDF has notably intensified its offensive against ISIL in south rural Al-Hasakah to the east of Al-Shaddadi town. The threat of landmines, UXOs, and ERW is still of concern, especially against IDPs returning to their homes in Ar-Raqqah and Deir Ez-Zor cities.

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.
- WHO’s Response plan for Southwest Syria has been activated to respond to the continued escalation of conflict and displacements witnessed during the week.
- Responses to displacements from Afrin district (134,000 individuals Tall Refaat, Nabul, Zahraa and Fafin areas), in East Ghouta (approximately 28,000 IDPs remain in 7 shelters and an estimated population of 140,000 in communities), in northern rural Homs 150,000 people remain in areas largely inaccessible to health assistance.

KEY GAPS & CHALLENGES

1. Increased health access for the re-establishment of health service provision across locations that have recently changed hands (e.g. eastern Ghouta, northern rural Homs).
2. Advocacy for the protection of patients, health workers and health facilities during transitional phases required.
3. Increased attention to vulnerability to disease outbreaks given recent population movements within the country and lack of access to basic services, including poor water and sanitation.
4. Regular approvals from national authorities for road deliveries of health supplies to North East Syria.

OPERATIONAL UPDATES

1. Coordination:
• Developed the draft of the health sector Syria hub preparedness and response operational plan for the southern Syria.
• SARC to initiate submission of inputs for 4W health sector.
• Enhancement of 4W reporting mechanism by the health sector through ensuring date completeness and data quality assurance.
• Follow up with XB partners on the situation in camps in NES (e.g. Mabrouka camp).
• WHO convened the second health sector sub-working group meeting to coordinate response operations for Southwest Syria.

2. Information and planning:
• HeRAMS snapshot for May 2018 of the public hospitals across Syria
• Flash update # 30 for monitoring violence against Dar’a National hospital (MoH) in Dar’a (26 June 2018)

Developed maps:
• Distribution of health facilities of Yadan Biyad charity (NGO) in Aleppo city, June 2018;
• Distribution of health facilities for Charity and Social Service Society Organization (NGO) in Dar’a, June 2018;
• Distribution of AD cases in Deir-ez-Zor governorate, June 2018.

3. Health operations:

Aleppo & Afrin response:
Situation update
• No major change in situation during the reporting period.
• 136,000 people estimated to remain in Afrin District. 134,000 people remain displaced to the Tall Refaat sub-district, Nabul and Zahraa towns and surrounding communities.
• News about the new roadmap of the near future of Tall Refaat town, tell that both YPG and GoS forces will withdraw from the area but no FSA/NSAGs faction will enter as the military presence will be only for Russian and Turkish forces.
• Local council will be formed to administer the area and volunteers of the local community will form police stations to ensure security (supported by joint Turkish and Russian forces)
• Based on the alleged agreement, There’s no clarity about the decision of Afrin IDPs who are staying in Tal Refaat area, whether they will be allowed to stay, or will be evacuated from Tal Refaat.
• In Tal Refaat town the estimated number of IDPs is 3,000 families in addition to 500 families who are the inhabitants of Tal Refaat. However, the estimated number of IDPs in Tal Refaat and surrounding areas is more than 105,000 IDPs.

Humanitarian Impact and Challenges:
• Displacement to SDF-controlled areas in Fafin camps (and NE) and/or to Euphrates Shield areas, probably based on ethnic lines.
• Returning movement to Tall Refaat is expected (from Euphrates shield areas), as well as returning movement to Afrin (from current IDPs) if controlling parties allow.
• Temporary/permanent no-access of UN and humanitarian partner to Tall Refaat town (including SARC and DoH active points)

NGO activities
• Coordination meeting was held with participation of all intervening NGOs to map out MMTs activities and avoid duplication.
• 13 medical mobile teams and 1 PHC center provide essential health care services, MHPSS services are integrated with 13 medical teams, and nutrition surveillance services are integrated with 10 MMTs
• Referral system is supported through local NGO to Zahraa local hospital

Medical transportation for critical cases
• Coordination is in place, including SARC and DoH, on the effective mechanism to transport critical emergency patients to Aleppo city facilities
• SARC first aid squads are active in the area of displacement, 8 cases were transported to Aleppo city hospitals.

**East Ghouta and South Damascus response**

• Only 18,543 people remain housed across 7 shelters in Eastern Ghouta. Others have returned to communities across East Ghouta.
• UN agencies have still no regular access granted into communities of East Ghouta. WHO’s initiative to conduct a health needs assessment inside Eastern Ghouta IDPs shelters and across Eastern Ghouta started with the arrival of an international consultant in Damascus for the period of 30 days.
• WHO is supporting the response to East Ghouta communities by reprioritizing the 16 NGO mobile teams currently serving the shelters in coordination with health authorities.

**East Ghouta response in numbers from 15 March – 29 June 2018:**

- 16 shipments containing 772,543 medical treatments delivered accounting for 56.5 tons of health supplies.
- 48 EWARS sentinel sites reporting surveillance information, with 309 reports produced and 28 alerts investigated and responded to.
- 58 field assessment missions to shelters (IA and WHO) conducted by WHO staff.
- 30 nutrition surveillance DoH mobile teams supported by WHO (with operational costs), 26 were operational in the past week.
- 17 malnourished children have been hospitalized in stabilization centres.
- 14 educational nutrition sessions have been conducted by WHO-supported NGOs.
- 13 WHO-supported NGOs deployed for the response, with 9 NGOs operating in the past week through 18 mobile teams. 267,899 patients have been assisted by national NGOs including 15,489 in the past week.
- 9 MHPSS mobile teams deployed, with 3 operating in the past week, and 71 static medical points provide integrated MHPSS services. 7,018 basic psychological interventions have been provided to people.
- 2,048 patients hospitalized in public hospitals.
- 42,568 children under 5 vaccinated (polio and EPI), including 946 in the past week. WHO has supported 32 DoH mobile teams.

**East Ghouta communities**

**Homs response/ Northern Rural Homs:**

- No significant change in the situation since Week 24. Access to UN agencies has not yet been provided.
- DoH reportedly opened 10 PHC centres but only vaccination services are provided at this stage, with severe gaps in human resources available to work at the centres.
- A WHO supported NGO will provide health services in villages that have no functioning health facilities.
- WHO Dispatched IA convoy to Al Rastan with 18,394 treatments and medicines and supplies for 200 trauma cases.

**Other weekly updates from Homs hub:**

- 2 cases of acute meningitis were admitted in Razi hospital, samples were taken by DOH.
- Assessment of the SARC hospital and 5 polyclinics in Homs city was done to include the health facilities of SARC in HeRAMS system.

**Lattakia response:**

- Replenished Homs hub with 15 tons of medicines
- Dispatched shipment of 19 tons of medical health supplies in favor of Daraa DOH (Lattakia part only)

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

**Situation update**

- SDF fighters will begin leaving northern Syria's Manbij region as of July 4, following a month of preparations.
- SDF campaign against ISIS still ongoing and the fled people go through two options Al-Hol camp and Ain Issa camp, the number of IDPs arrived to Ain Issa camp is more.
• Expectation to receive about 10,000 IDPs from Dier Ezzour in the camps of Al-Hassakeh.

Coordination
• Coordination between all UN agencies and INGOs in NES at Newroz camp and the below points were addressed: Cross cutting protection issues and advocacy required with local authorities; Dier Ezzour response updates, including the diarrhea outbreak and displacement; Update in Al-Raqqa city plans; Moving Al-Twehena IDP site to Al-Mahmoudli area.
• AHCT meeting with all UN agencies and the below points were discussed: Attwaihenh/Mahmoudli camp; Deir Ez Zor - new camp set up; Deshaisha and DZ IDPs response; Coordination meeting with NES INGOS on 27 June; Manbij response scenarios.

Pharmacy and STHC program:
• Conducted site visits to follow up on medicines availability, delivered shipments, maintenance works in a number of Alhasaka, Dierzzor and Araqqa hospitals and camps.

National NGOs coordination:
• GOPA, 11 medical mobile teams and Al-Hikmah private hospital are the ongoing WHO’s partners.
• St Ephram committee is providing the medicines from the remaining medicine’s balance of the last project in Al-Hassakeh and Dier Ezzour.
• Conducted a field visit to Ain Issa camp to follow up the implementation of the health activities.
• Participated in coordination meeting in Al-Newroz camp leaded by OCHA and discussed the coordination pathways between the UN HUB and NES group.
• Coordinated to mobilize a nutrition team to start nutrition surveillance at Al-Mabrouka camp, this will take place at the beginning of the next week.
• A medical mobile team is working in Manbij city , rural areas and the both eastern and western near camps.
• Annex 5 contains number of beneficiaries of partners in NES.

Acute diarrheoa in Deir Ezzor
• Reporting of bloody diarrhea cases continued in week 25, however, a decrease in the trend of cases was noticed in this week.
• As of 24 June 2018, 578 cases, including 12 deaths, of acute diarrhea in Deir Ezzor Governorate have been reported since week 10.
• To date, the distribution of symptoms is: acute diarrhea (100%); bloody diarrhea (94%); abdominal pain (93%), fever (80%); vomiting (15%); and dehydration (8%). The distribution by place is: 34% cases from Kasra, 25% from Zugier Jazera, 15% from Alassaoh, Harmoshia 6%, Kubar 5%, Mhmeida 3%, and separate cases were reported from 21 other locations in Dier Ezzor Governorate.
• The lab results of testing 5 new specimens at WHO reference lab will be provided next week.
• WHO and Unicef held a joint operational planning meeting to advance household distribution of aquatabs to 15,000-20,000 households and related awareness raising messages.
• The full mission report is shared separately.

Southwest Syria response:
Situation update
• Since 17 June, hostilities in southern Syria – an area that is part of the ceasefire agreement adopted in July 2017 between Jordan, the Russian Federation, and the United States-- have been escalating. Hostilities have already claimed the lives of tens of civilians, rendered civilian infrastructure out of service, and displaced tens of thousands of individuals.
• At the time of writing, hostilities have displaced an estimated >65,000 individuals, with the majority displaced within eastern Dara’a governorate to areas near the border with Jordan while others have been displaced from western Dara’a.
• There are 3 crossing points open into GoS controlled Sweida and 4 humanitarian corridors opened by GoS from East Dara’a into the GoS controlled areas.
• 2 new shelters are set up for IDPs close to two main crossing points east and west in GoS control areas. GoS shelters are operational in Jbab, Izra (Der’a) and Qurayya (Sweida).
• An estimated 4,500 people arrived in Jbab shelter on 27 June, including 2,000 who moved to stay with their families. Approximately 1,500 remained in the shelter, mostly children, women and the elderly. The continued displacement towards the Jordanian border and Golan border led to establishment of new shelters in the village of Berga, in the Quneitra countryside.

• On 26 June 2018 at 6:30 pm, Dar’a National hospital was reportedly targeted by two mortars landed in the ambulance square, one of them exploded, which led to windows cracked and destroyed. The equipment and furniture were not affected. No casualties were reported. The hospital provided health services for 1,626 patients during May 2018. It is currently partially damaged and partially functioning.

• Several other attacks on healthcare have also been reported by the WHO hub in Amman.

**Health authority and WHO response**

• The status of public health care facilities in southwest Syria is as follows:
  - Out of 90 assessed public health centres, 60% (54) were reported partially functioning, and 40% (36) non-functioning (completely out of service).
  - Out of 5 assessed public hospitals, only 20% (1) was reported partially functioning, and 80% (4) non-functioning (completely out of service).

• MOH/DOH Der’a have established a referral system from Der’a National Hospital to other public hospitals in Der’a (Izra and Sanamein hospitital and then onto Damascus where a surge plan is in place at the Al Mujtahed hospital. DOH has also established a plan to provide health screening, services and referrals for individuals in need of care at crossing points.

• SARC provides ambulance services + health care services as follows:
  - Evacuation of wounded and those in need of hospitalization in the province or to hospitals in Damascus. The number of Referrals (by SARC only) averages at 10 cases per day so far.
  - Yesterday, for the first time since 2011 SARC evacuated 3 cases from FSA areas towards GoS hospitals.
  - Allocation of an ambulance at each crossing point (3 crossing points) and 1 ambulance in Jbab Shelter.
  - Mobile nutrition surveillance team (cMAM) + mobile health education team + mobile mental health team + health promotion team, these teams will start work on Saturday, through a mobile clinic dedicated to this purpose.

• WHO activated its emergency response plan, as part of this:
  - On 27 June, delivered over 27 tons of medical supplies to be distributed in responding health facilities. The shipment will provide 135,000 treatments and 21000 trauma cases. It includes trauma supplies, IV fluids, lifesaving medicines including adrenaline, mental health and psychotropic medicines, burns kits, NCD kits as well as other primary and secondary healthcare supplies.
  - WHO to support SARC Der’a and DOH Der’a and Sweida with further supplies, especially NCD medicines.
  - WHO has activated 2 fixed NGO clinics (in Der’a city and Jbab) and 1 mobile team.

4. **Technical Expertise** (See Annex 2 for capacity building activities this week)

**Non-Communicable diseases / Primary healthcare**

• Prepared a new list of PHC medical equipment to be delivered in favor of Moadamiyeh Al Sham PHC center affiliated to DOH in rural Damascus, recently rehabilitated with WHO support.

• Oral health services for school students to be supported by WHO as EG response in cooperation with Ministry of Education. Arrangement is in Process..

**Immunization:**

MOH has confirmed the dates of coming campaigns in the second half of 2018 as follows:

• Measles campaign in two rounds conducted in 7 governorates: Hasakah, DZ, RQ, Aleppo, Hama, R. Damascus (East Ghota, Yelda, Beit Saham, Bebla) and Homs (North rural Homs and Tadmor)
  - Round 1: 15-26 July 2018 for children 7-71 months
  - Round 2: 16-27/9/2018 school children 6 – 12 year old
- Polio campaigns
  - **bOPV NIDs**: 7-11 October 2018 for children 0-59 months
  - **SNIDs**: 4-8 November 2018 which will include: bOPV for children 0-59 months, PV for children 2-23 months as per OBRA recommendations and part of the outbreak response SNIDs campaign will conducted in 7 governorates: Hasakah, DZ, RQ, Aleppo, Hama, specific areas in Homs and specific areas in Rural Damascus
- On 20 - 21 June 2018, 25 paediatricians from the Syrian Paediatric association and 25 physicians from National Public Health Association have been briefed on polio situation in Syria and the importance of immediate reporting of acute flaccid paralysis cases.
- Special session was given to the current Measles outbreak and the MOH plan to control the outbreak through 2 successive measles campaigns on Jul and Sep 2018
- WHO in coordination with local authority in Raqqa was able to meet with a representative from water resource ministry who was able to support in collection of environmental surveillance samples from Raqqa.

**Mental health program:**
- Site visits were conducted to 6 PHC and community health centers in Damascus and Rural Damascus to follow up on the implementation of mhGAP programme. The WHO mental health professionals provided the needed technical support to 16 health professionals previously trained on mhGAP-Intervention Guide.
- Meetings were conducted with the management of several NGOs working in southern Syria to gauge needs and develop the MHPSS response in the area.

**Nutrition and child health:**

**Childhood**
- Conducted 3 trainings for 75 volunteers to implement new borne care at home program in 3 governorates: Homs, Al Sweida, Deir Ezzor.

**Nutrition**
- Conducting workshop on nutrition surveillance Growth Assessment and IYCF counselling in Lattakia, Tartous and Homs for 75 trainees.
- Following up to our response in Afrin, a nutrition screening was conducted for 301 children under-5, detecting 7 moderate and 1 severe acute malnutrition cases.

**Secondary health care program:**
- Delivered the following secondary healthcare supplies and medicines:
  - 42,046 treatments of essential and life-saving medicines mainly anesthetics, analgesics, antibiotics in addition to 1 autoclave device to Daraa DOH.
  - 6,992 treatments of essential and life-saving medicines mainly anesthetics, analgesics, antibiotics to Ar-Rastan in Homs through IA.

**Trauma:**
- As a response to trauma cases in southern west parts in the country and Ar-Rastan in Rural Homs, WHO included in the delivered shipment to DOH Darra and to SARC IN Ar-Rastan convoy 10 trauma kit B, 1 surgical kit and 10 first aid kit. The kits are sufficient to treat 44,040 trauma cases.

**Disease surveillance and response:**
- A significant decline in the number of detected positive Measles was observed in June with only 4 positive cases comparing with 25 cases detected in May, and 30 cases in April. The decrease in reported cases might be attributed to the vaccination campaign conducted in last week of April. The national immunization program at MoH is planning to conduct second Measles campaign in July.
WASH
• Operational planning on WASH actions after visit to NES.

National NGO coordination:
• In response to the deteriorated humanitarian situation in newly accessible areas in Northern Rural of Homs, 3 medical mobile teams are being supported to deliver essential health care services.
• A comprehensive meeting was conducted with WHO focal point of Dara’a to explore potential areas of intervention based on the daily updates, resulted in updating the contingency and response plan which was presented in the joint meeting with UN agencies and other stakeholders to coordinate the response activities in South Syria.
• Current NGO MoUs and pipeline are in Annex 1.

External Relations, Coordination and Communications:
• Q2 Donor Update under preparation.
• No update provided on communications.

Operational support and logistics:
• Dispatched 19.5 tons of medical supplies, equipment, printing materials and health kits, covering 3 governorates (Aleppo, Daraa and Homs). The recipient included 1 MoH facility, 1 MoHE facility, 3 NGOs and IA convoy.
• The total number of treatments is 149,147 treatments and 1,110 trauma cases. The dispatched supplies included:
  - 12 Sphygmomanometer adult cuff, 1 mechanical scale, 2 pneumonia kits B, 10 first aid kits, 1 Autoclave vertical/top-loading capacity 157 litres, 9 Italian emergency kits B, 4 IEHK supplementary kits, 2 portable stadiometers, 3 mechanical scales, 1 examination bed, and different types of EWARS, mental health, PHC and STHC medicines and consumables delivered to Daraa DoH as an urgent response for the current situation in Daraa governorate.
  - 4 vials of Octagam 10 g in 200ml delivered to MoHE – Aleppo university hospital.
  - 4,800 different types of insulin vials and penfils delivered to 3 local NGOs in Homs.
  - 1 Italian emergency kit B, 1 examination bed, 1 Sphygmomanometer adult cuff, 1 surgical supply kit and different types of EWARS, nutrition, PHC, STHC and trauma medicines, consumables and printing materials were delivered to Homs – Ar Rastan as an IA convoy through SARC support.

RESPONSE PRIORITIES
- Afrin, Eastern Ghouta and South Damascus, Rural Homs, North-East Syria and Southwest Syria.
### Annex 1: Current WHO agreements with national NGOs

<table>
<thead>
<tr>
<th>Governorate</th>
<th>Location of current of ongoing MOUs</th>
<th># of ongoing MOUs</th>
<th># of MOUs in preparation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Damascus</td>
<td>Dummer Al Balad - Al Midan - Mezzah/Kiwan</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Rural Damascus</td>
<td>Dahyet Qudsayeh - Hai Al Wourood - Bludan, Madaia, Sargayah, Sasaa, Kharbet Al Ward, Kharbet Al Shaib</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>EG Response</td>
<td>Herjaleh, Harasta, Kfer Batna, Ein Terma</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Homs</td>
<td></td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Hama</td>
<td></td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Efrin Response</td>
<td>Nubbol , Tal Re'fat , Kafr Naseh , Meskan , Kafer Naya , Tanab, Kasht'ar , Abin , Deir Jmal , Fafin Camps , Tal Jbeen and Al-Zahraa</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Deir Ez Zor</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Al Hasakeh</td>
<td></td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>17</strong></td>
<td><strong>22</strong></td>
</tr>
</tbody>
</table>

### Annex 2: WHO supported capacity strengthening (Supported 25 activities for 645 participants)

<table>
<thead>
<tr>
<th>Date</th>
<th># participants</th>
<th>Details/Field</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>23/06/2018</td>
<td>40</td>
<td>Educational and awareness lectures on AIDS in Al Qunaitira</td>
<td>EWARS</td>
</tr>
<tr>
<td>25-27/06/2018</td>
<td>25</td>
<td>Training for health workers at the centres of voluntary counselling and testing, on counselling services for both general people and HIV/AIDS patients in Damascus</td>
<td>EWARS</td>
</tr>
<tr>
<td>26-28/06/2018</td>
<td>25</td>
<td>TOT of NTP health workers on contact tracking in Damascus</td>
<td>EWARS</td>
</tr>
<tr>
<td>24-26/06/2018</td>
<td>30</td>
<td>Trainings for MoH staff to improve utilizing and investing the collecting HeRAMS data using office program in Damascus</td>
<td>HIS</td>
</tr>
<tr>
<td>24-25/06/2018</td>
<td>25</td>
<td>Mental health GAP intervention guide phase 1-Part 2 for NGOs in Damascus</td>
<td>MH</td>
</tr>
<tr>
<td>24-28/06/2018</td>
<td>25</td>
<td>School Mental Health Program for MOE in Hama</td>
<td>MH</td>
</tr>
<tr>
<td>24-28/06/2018</td>
<td>25</td>
<td>Mental health GAP intervention guide phase 2 for NGOs in Hama</td>
<td>MH</td>
</tr>
<tr>
<td>23-29/06/2018</td>
<td>100</td>
<td>4 activities Health villages volunteers on newborn care at home programme in Daraa, As-Sweida, Deir Ezzor and Homs</td>
<td>NUT</td>
</tr>
<tr>
<td>24-28/06/2018</td>
<td>25</td>
<td>Nutrition surveillance and Infant &amp; Young Child feeding in Lattakia</td>
<td>NUT</td>
</tr>
<tr>
<td>24-28/06/2018</td>
<td>25</td>
<td>Nutrition surveillance and Infant &amp; Young Child feeding in Tartous</td>
<td>NUT</td>
</tr>
<tr>
<td>27-30/06/2018</td>
<td>25</td>
<td>NS &amp; IYCF for Private Pediatricians in Homs</td>
<td>Nut</td>
</tr>
<tr>
<td>Date</td>
<td>Code</td>
<td>Event Description</td>
<td>Location</td>
</tr>
<tr>
<td>--------------</td>
<td>------</td>
<td>----------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>24-28/06/2018</td>
<td>25</td>
<td>ToT surveillance - Medical Doctors in Damascus</td>
<td>PHC</td>
</tr>
<tr>
<td>25-27/06/2018</td>
<td>25</td>
<td>Leadership and strategic management in Damascus</td>
<td>SHC</td>
</tr>
<tr>
<td>25-27/06/2018</td>
<td>25</td>
<td>Leadership and strategic management in Aleppo</td>
<td>SHC</td>
</tr>
<tr>
<td>25-27/06/2018</td>
<td>25</td>
<td>Leadership and strategic management in Lattakia</td>
<td>SHC</td>
</tr>
<tr>
<td>27-28/06/2018</td>
<td>25</td>
<td>Rational use of medicines GXP in Damascus</td>
<td>SHC</td>
</tr>
<tr>
<td>27-29/06/2018</td>
<td>25</td>
<td>Rational use of medicines in As Swieda’a</td>
<td>SHC</td>
</tr>
<tr>
<td>24-28/06/2018</td>
<td>25</td>
<td>War Wounded Injuries Management “WWIM” in Lattakia</td>
<td>Trauma</td>
</tr>
<tr>
<td>24-27/06/2018</td>
<td>25</td>
<td>Basic Trauma Life Support “BTLS” in Lattakia</td>
<td>Trauma</td>
</tr>
<tr>
<td>25-28/06/2018</td>
<td>25</td>
<td>Basic Trauma Life Support “BTLS” in Damascus</td>
<td>Trauma</td>
</tr>
<tr>
<td>27-30/06/2018</td>
<td>25</td>
<td>Basic Trauma Life Support “BTLS” in Tartous</td>
<td>Trauma</td>
</tr>
<tr>
<td>24-26/06/2018</td>
<td>25</td>
<td>Disability Management-Application of physiotherapy devices in Damascus</td>
<td>Trauma &amp; Disability</td>
</tr>
<tr>
<td>23/06/2018</td>
<td>40</td>
<td>Educational and awareness lectures on AIDS in Al Qunaitira</td>
<td>EWARS</td>
</tr>
<tr>
<td>25-27/06/2018</td>
<td>25</td>
<td>Training for health workers at the centres of voluntary counselling and testing, on counselling services for both general people and HIV/AIDS patients in Damascus</td>
<td>EWARS</td>
</tr>
</tbody>
</table>

**Annex 3:** outpatient consultations provided to Afrin IDPs  
Not provided in week 26

**Annex 4:** Nutrition activities for Aleppo-Afrin IDPs  
Not provided in week 26

**Annex 5:** WHO Supported Health services in NES

<table>
<thead>
<tr>
<th>Governorate</th>
<th>Area</th>
<th># of outpatient consultations</th>
<th># of beneficiaries reached with the medicines</th>
<th># of secondary health consultations</th>
<th># of trauma referrals</th>
<th># of Mental Health Psychosocial Services</th>
<th># vocational training activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Al-Hassakeh</td>
<td>Hassakeh city center</td>
<td>52</td>
<td>576</td>
<td>43</td>
<td>121</td>
<td>13</td>
<td>30</td>
</tr>
<tr>
<td>Al-Hassakeh</td>
<td>Al-Areesha camp</td>
<td>463</td>
<td>284</td>
<td>0</td>
<td>0</td>
<td>166</td>
<td>0</td>
</tr>
<tr>
<td>Al-Hassakeh</td>
<td>Al-Mabrouka camp</td>
<td>430</td>
<td>430</td>
<td>0</td>
<td>0</td>
<td>41</td>
<td>0</td>
</tr>
<tr>
<td>Al-Hassakeh</td>
<td>Al-Hol camp</td>
<td>683</td>
<td>635</td>
<td>0</td>
<td>0</td>
<td>28</td>
<td>0</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Al-Tabqa</td>
<td>389</td>
<td>387</td>
<td>0</td>
<td>0</td>
<td>76</td>
<td>0</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Al-Twehena camp</td>
<td>394</td>
<td>394</td>
<td>0</td>
<td>0</td>
<td>81</td>
<td>0</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Ain Issa camp</td>
<td>1319</td>
<td>1319</td>
<td>0</td>
<td>0</td>
<td>74</td>
<td>0</td>
</tr>
<tr>
<td>Location</td>
<td>Sub-location</td>
<td>Count 1</td>
<td>Count 2</td>
<td>Count 3</td>
<td>Count 4</td>
<td>Count 5</td>
<td>Count 6</td>
</tr>
<tr>
<td>-------------------</td>
<td>-----------------------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Al-Kasrat / Madan</td>
<td>379</td>
<td>379</td>
<td>0</td>
<td>0</td>
<td>27</td>
<td>0</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Al-Karama/Alhamrat</td>
<td>432</td>
<td>421</td>
<td>0</td>
<td>0</td>
<td>30</td>
<td>0</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Al-Jarneyah</td>
<td>144</td>
<td>144</td>
<td>0</td>
<td>0</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Al-Raqqa</td>
<td>Al-Mahmoudli</td>
<td>123</td>
<td>123</td>
<td>0</td>
<td>0</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Aleppo</td>
<td>Manbij</td>
<td>584</td>
<td>553</td>
<td>0</td>
<td>0</td>
<td>38</td>
<td>0</td>
</tr>
<tr>
<td>Dier Ezzour</td>
<td>Abu Khashab camp</td>
<td>515</td>
<td>504</td>
<td>0</td>
<td>0</td>
<td>33</td>
<td>0</td>
</tr>
<tr>
<td>Dier Ezzour</td>
<td>Dier Ezzour city</td>
<td>0</td>
<td>58</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Sub-total:</strong></td>
<td></td>
<td>5907</td>
<td>6207</td>
<td>43</td>
<td>121</td>
<td>623</td>
<td>30</td>
</tr>
</tbody>
</table>

Annex 6: WHO Supported Health services in Homs

None provided for Week 26.