

WHO Syria, Week 44, 27 October – 2 November 2018

General developments & political & security situation

The security situation across the country remains volatile and unstable, while the main hot spots remain As-Sweida, Deir Ezzor, Hama, Aleppo and Idlib governorates.

- In **northwest Syria**, the military situation remains volatile and unpredictable with focus on the Demilitarized Zone agreement. The humanitarian crossing point between NSAG-GoS at Abu Thuhour in Idlib was re-opened on 22 October. Between 23-28 October, 485 families (approximately 2,000 individuals, all returnees) crossed into GoS controlled areas and resettled in Hama, Idlib and Aleppo (incl. approximately 100 households in Aleppo city). In western Aleppo, including Aleppo city, hostilities continued to be reported between GoS-NSAGs.
- In the **north**, along the northern border between Syria-Turkey, there has been significant escalation of hostilities between Turkish Army-Kurdish forces from the Euphrates river eastwards to Tal Abyad since 30 October – it is currently unclear what impact this will have on health and on humanitarian operations/access in affected areas.
- In the **northeast Syria**, several asymmetric attacks were witnessed in SDF controlled areas over the past week. Using the opportunity of the bad weather conditions, ISIL intensified assaults against SDF in the surroundings of Hajin pocket and re-captured As-Sousah, Baghouz Fouqani towns and the newly SDF taken part of Hajin town.
- On **Rukban camp**, the UN continues to call upon all parties to ensure safe, sustained and unimpeded access to all people in need, in line with their commitments under international humanitarian law. Ali Al-Za'tari, UN Resident and Humanitarian Coordinator in Syria, issued a statement on failed attempt to conduct a humanitarian convoy to Al-Rukban on 27 October citing the decision to postpone the delivery of humanitarian assistance was based on documented information of real danger.

OVERVIEW

KEY HEALTH ISSUES

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

- Sustained health access for the re-establishment of public health service provision across locations that have recently changed hands (e.g. Eastern Ghouta, northern rural Homs, Southwest Syria and, in future, the Northwest).
- Advocacy for the protection of patients, health workers and health facilities during transitional phases.
- 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.
- Regular approvals from national authorities for road deliveries and convoys of health supplies to all parts of Syria based on needs.
- Sustained donor commitments will be essential to sustaining health response in the country, well beyond the end of the conflict itself and regardless of areas of control.

KEY GAPS & CHALLENGES

- Urgent funding for Damascus hub scale-up of emergency operations in Northwest Syria.
- Attacks on health care facilities, health workers and patients must cease. The targeting of health facilities means that injured people, including children, have practically no access to health care.
- Humanitarian convoys bearing all essential life-saving and life-sustaining supplies must be allowed to proceed immediately to provide medical assistance across conflict lines and to newly accessible areas.

OPERATIONAL UPDATES

1. Coordination:

- Ad hoc Health Working Group meeting on 1 November on strengthening the health sector response to women's health in Syria.

2. Information and planning:

- Weekly update on shift of control, functionality status of public HFs, and control areas for regained areas in the south of Syria
- Health sector 4Ws Jan-Sep 2018 submitted to WoS
- HIS Report on field visits to Al-Mayadin city in Deir-ez-Zor governorate, 27 Oct 2018
- 4 infographics of summary of key performance indicators for September 2018, across Syria; North-east Syria; North-west Syria; Southern Syria
- Health centres snapshot Q2 2018 and hospitals September snapshot for Homs
- Developed maps on: Implementation of EPI activities; Health sector coverage areas in North-east Syria; CMAM, MoH health centres; distribution of health facilities in NES.

3. Health operations:

Northern Syria response:

Afrin Response:

- 6 NNGO mobile teams continue to be deployed displacement areas from Afrin. 2 Static medical points in Nubl and Zahra continue to be supported by WHO. Primary health care services ,MHPSS services, nutrition screening activities are provided by MMTs and static points, in addition to STHC support.
- 612 Primary health care services and 27 MHPSS services were provided during the reporting period.

Eastern rural Aleppo response

- 4 NNGOs mobile teams continue to be deployed in eastern rural Aleppo, in addition to 1 PHC in Dier Hafeir is supported by WHO.
- 2,048 primary health care services and 172 MHPSS services were provided by MMTs during reported period. In addition to 469 provided services in Dier Hafer PHC.

NW response readiness:

- The humanitarian crossing point between NSAG-GoS at Abu Thuhour in Idleb was re-opened on 22 October. Between 23-28 October, 485 families (approximately 2,000 individuals, all returnees) crossed into GoS controlled areas and resettled in Hama, Idleb and Aleppo (incl. approximately 100 households in Aleppo city). The GoS has requested UN agencies to increase humanitarian assistance to IDPs entering GoS controlled areas.
- The Morek crossing point in Hama was also opened for trade on 31 November. So far we have no information on whether any IDPs are using the point.
- Currently, 5 WHO-supported mobile medical teams (MMTs) are providing outreach services, including MHPSS, as part of WHO's NWS response in northern Hama, and western Aleppo. This is being scaled-up.
- From Aleppo, 2 WHO-supported MMTs (Ahl-Al-Kheer) are deployed in Tall Ad-Damman, Al-Boudier and surrounding areas. 1,862 PHC services have been provided (since 16 August 2018)
- In Hama, 3 Mobile health teams supported by WHO provide health services in 17 villages across Northern and eastern Rural Hama. From 3-30 October, they have provided 8,138 services, 6,067 treatments, and screened 932 children under 5 for their nutritional status.

Disease surveillance and response / WASH

- In joint response to AJS reported in Fafin and surrounding areas, UNICEF conducted water analysis to 14 water wells out of 32 in the area. All tested private wells were found biologically contaminated (Coliform and Escherichia Coli).
- Health and WASH sector drafted response plan (as a preventive measurement) the emergency response will be put in effective immediately
- 2 teams from DoH collected 13 blood samples and have been sent for lab testing (PCR HAV and HEV). 15,000 brochures on the prevention of Hepatitis A were handed over to WHO NNGOs partners to be distributed in the affected areas.

TB/HIV:

- Continuing the prevention related activities for children under the age of 10 years who are in contact with TB patients in Fafin camps by Isoniazid is in progress. 2 DoH teams were deployed in this regard, The number of children currently targeted is 22 children under the age of 10 years. 1 new TB case was detected in the Fafin area.
- Active TB finding in Sheikh Maqsood neighborhood of Aleppo to start next week.

Latakia response:

- Followed up with WFP the possibility to distribute food supplies to the newly arrived people from Idleb.
- Coordinated with SARC the best distribution plan for the previously delivered medical health supplies to SARC in favor of IDPs and returnees from Idleb.

Homs response/ Northern Rural Homs:

Al Rukban camp

- An IA convoy is scheduled to depart to Rukban on 3 November.
- WHO will be present on the IA convoy to Rukban and participating with basic medical consumables and supplies for primary health workers with limited health training – 7.5cbm in total. The WHO medicines included in the convoy will cover 31,601 treatments.
- The convoy will provide an important opportunity to assess the health situation in the camp, including to further understand reports of excess morbidity and mortality that have been reported in the media.

Northern rural Hama (NWS response)

- 3 Mobile health teams supported by WHO, providing health services in 17 villages across Northern and eastern Rural Hama. For the period 24-30 October teams have provided 2,520 consultations, 2,411 treatments.
- See Annex 6.

Northern Rural Homs

- Field visits to Talbiseh and Zafrane in Northern Homs area with DOH responsible officer to follow up reported Hepatitis A cases.

Logistics

- Dispatched PHC medicines to a national NGO with total number of 10,837 treatments.

Northeast Syria (Al-Hasakah; Ar Raqqa; Deir-ez-Zor) response

Coordination

- On 24 October, the self-administration reportedly closed three Primary Healthcare Centers and immunization centers. On 25 October, health and nutrition clinics (fixed and mobile) treating severe and acute malnutrition were also closed in Ar-Raqqa city. Humanitarian partners have indicated that this may have been triggered by the presence of GoS/MoH logos and staff at the centers. On 28 October, the UN team in Qamishli met with the Al-Hasakah Governor. The team informed that a resolution had been agreed between the two parties and the pHCs were to re-open.
- Updated health service coverage list of UN agencies and their IPs.
- Health working group in Areesha camp.
- Coordination meetings with:
 - UNICEF to discuss the response in Al-Busayra and Al-Jerzi in Deir Ezzor and ways to provide integrated services.
 - UNDP regarding the new artificial limb center in Al-Qamishly established by UNDP with IP, the meeting discussed the coordination pathways to identify patients requiring artificial limbs from WHO-supported trauma facilities.

Nutrition

- 4 cases of SAM with complications were received at the treatment center Al-Hikma Hospital, 3 of them have been discharged.
- Field visit to Al-Tabqa Hospital jointly with UNICEF to assess capacity for case management for SAM with complications cases from Ar Raqqa governorate. As a recommendation, a new stabilization centre will be established with trained staff for Raqqa Governorate.

Pharmacy and SHC:

- Prepared consolidated list of maintenance, equipment and medicines needed in NES for procurement.
- Needs assessment of Thalassemia patients in Ar Raqqa city.
- Distributed 120 hospital beds to Al Tabqa hospital, Qamishli hospital and Allulua hospital.
- Delivered a nutrition supplies to Qamishli National Hospital.

National NGO coordination:

- Established a new MoU with a NNGO in Deir Ez Zour Governorate for 2 community wellbeing centers.
- 15 participants from the NGOs participated in a workshop about the workshops to strengthen medical staff about the integrated primary health care services at PHC level.
- Field visit to Armenian charity to review the financial and administrative compliance and the performance based on TPM recommendations.
- Implemented preparations to increase support and health capacity in Ain Issa camp after announcement of MSF withdrawal.
- 3,119 consultations were provided by WHO-supported partners in NES during week 44. See Annex 7 for WHO-Supported Health services in NES.

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

Non-Communicable diseases / Primary healthcare

- Prepared/Dispatched 17,800 life-saving primary healthcare treatments to DOH Dar'a and DOH Hama as part of the southwest and northwest response.

Immunization:

- The sub national polio campaign will be conducted this week during the period 4- 8/11/2018 in all governorates targeting 912908 children under 5 , the campaign will focus on special criteria:
 - Districts with PCM less than 80% in October national campaign
 - Districts not reached in October national campaign
 - Districts with low polio3 coverage rate in the routine vaccinations activities.
- IPV vaccines will be delivered to 628,649 children under 2 in the following governorates: Aleppo, Homs, Hama, Al-Hasakeh, Deir-ez-Zor, Ar-Raqqa and Rural Damascus, in line with the last OBRA recommendations.
- More than 4500 field workers will participate in the campaign, with the support of WHO related to campaign operation cost including incentives for field workers, transportation cost and vaccine delivery.

Mental health program:

- Meeting with director of mental health in MOH to discuss medicine needs, and implementation of MHGAP programme. Meeting with director of research in MOE to finalize agreements with ministry
- Site visits were conducted to 4 PHCs in Damascus, Rural Damascus, and Tartous, to follow up on the implementation of MHGAP programme. The WHO mental health professional provided needed technical support to 16 health professionals previously trained on MHGAP-Intervention Guide.

Nutrition and child health:

- In Dar'a, nutrition screening was conducted for 693 children under 5, detecting 9 MAM and 4 SAM cases.
- In Quneitra nutrition screening was conducted for 498 children under 5, detecting 49 MAM and 4 SAM cases.

Secondary health care program:

- Delivered (7) ventilator, (1) Ophthalmological device, (3) baby incubator, (3) ICU beds, (3) Operating tables to health facilities in Tartous, Homs, As-Sweida, Aleppo, and Latakia.

Trauma:

- To enhance emergency and ambulatory services, 5 ambulances were delivered to SARC Damascus.
- One week mission by WHO-regional advisor for GBV to develop a comprehensive action plan for further implementation and adapt existing protocols. During the mission, meetings held (including national health and non-health authorities, and GBV sub-working group) and action plan to focus on: Capacity building of health manager and service providers; Integration of GBV in the HNO and HRP + indicators on GBV; Coordination with GBV SC and MHPSS TWG.

Disease surveillance and response and WASH:

- No update provided for week 44.
- See weekly EWARS bulletins at <http://www.emro.who.int/syr/information-resources/ewars-weekly-bulletins-2018.html>

National NGO coordination:

- 3 MOUs were submitted for internal clearance 2 to support the delivery of essential package of health care services in NES and 1 in Rural Damascus (Al Tal).
- The full list of MOUs is in Annex 1.

External Relations and Communications:

- Submitted a CN to Korea for funding in 2019. Received new funding from HPF to support local NGOs in selected under-served areas.
- Initiated the preparation for 2018 Annual Report.
- Facilitated WR field visit to Hama and Aleppo governorates: WR held official meetings with the Governor of Hama and the Director of Health in Hama; WHO Visited Hama National Hospital; WHO visited the Maternity Hospital in Aleppo to follow up on the ongoing national early detection of breast cancer campaign. WR participated in the Sub-national workshop on Strengthening the Health Sector Response to women's health in Syria, held in Aleppo.
- Issued PR about a cancer patient treated at Hama National Hospital.
- Issued PR on the donation from Japan boosting public health services in Syria
- Following up on WHO-Syria Twitter account, posting several tweets about WHO interventions and health response and the ongoing polio national vaccination campaign.

Operational support and logistics:

WHO Dispatched 37 tons of medical equipment, nutrition supplies, health kits, clinical waste bins, ambulances and medical waste vehicle - covering 9 governorates (Raqqqa, Aleppo, Al-Hasakeh, Homs, Hama, As-Sweidaa, Lattakia Tartous & Damascus). The recipients included 17 MoH facilities, 1 MOHE facility, MoLA, SARC and volunteers. Total number of treatments is 400 treatments. The dispatched supplies included:

- 1 60KVA generator delivered to TB centre in Aleppo.
- Different types of office furniture and ICT equipment delivered to MoH central warehouse in Damascus to be handed over by MoH to TB centres in all governorates.
- 3 Operating tables MIZUHO, 1 infant ventilator Mindray E5, 2 surgical microscope TOPCON - model OMS-800 Pro, 1 Fetoscope ATOM- Model 108 ultrasound foetal Doppler, 8 ICU ventilators ACOMA - Aivision ALV 3000, 4 Incubators for new born ATOM, 6 intensive care bed PARAMOUNT - model KA64230E + KE-791S, 2 ophthalmic YAG laser system NIDEK Model YC-1800, 1 ophthalmological cataract/Vitreotomy unit - NIDEK Fortas AP CV 3000 and 2 portable ventilators KOHKEN funded by the Japanese government have been donated to 9 hospitals in Damascus Aleppo, Homs, As-Sweidaa, Lattakia Tartous governorates.
- 40 Patient beds (hospital beds) delivered to Al-Tabqa national hospital in Arrraqa governorates.
- 30 Patient beds (hospital beds) and 200 cans of both F75 & F100 therap. Milks delivered to Qamishli national hospital.
- 742 RDT HIV kits 1 + 2 (Uni-Gold HIV) delivered to MoH central warehouse in favour of HIV program.
- ICT equipment delivered to MoH central warehouse in favour of drug control directorate in MoH.
- 20 different types of cholera kits delivered to MoH central warehouse in favour of communicable disease directorate.
- Different types of lab kits delivered to MoH – public health labs in Damascus.
- ICT equipment delivered to MoHE central warehouse.
- 1 refrigerated medical waste truck and 150 clinical waste bins 240 ltr handed over to Hama governorate – MoLA.
- 5 ambulances were handed over to SARC.
- 10 infant scales delivered to 10 medical volunteers in Aleppo for nutritional researches.

RESPONSE PRIORITIES

NWS/Afrin, North-East Syria and Rural Homs (Rukban).

Annex 1: Current WHO agreements with national NGOs

Governorate	Location of current of ongoing MOUs	# of on-going MOUs	# of MOUs in preparation
Damascus	Dummer Al Balad - Al Midan - Mezzah/Kiwan, Al Zahera, Ruken Al Din	5	
Rural Damascus	Dahyet Qudsayeh - Hai Al Wouood - Bludan, Madaia, Sargayah, Sasaa , Kharbet Al Ward, Kharbet Al Shaiab, Al Qutaifeh	1	1
EG Response	Adra Electricity shelter, Herjaleh shelter, Dweir Shelter, Al Nashabyeh, Bludan, Madaia, Sargayah, Sasaa, Kharbet Al Ward, Kharbet Al Shaiab, Najha rown, Harjalleh town , Sbaineh, Harasta , Douma,Kafar Batna , Ain Tarma, Hamouryeh, Saqba, Al Muadamyeh, Hejjeira and Al Bouayd shelters	1	3
Lattakia			2
Homs			7
Hama		0	3
Aleppo / Efrin Response	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 Jbeen - Ibeen - Sheikh said - Salah AL-Deen - Al-Mshatia - Bostan AL-Zahra - Al-Villat - Menbej - Agior , Deir Hafer and surrounding villages ((Babiri -Upper Babiri , Babiri -Lower Babiri , Rasm Elbokhar , Kayariyieh , Big Habbuba , little Habobieh , Southern Rasm Elharmal)	1	4
NES	Al Hasakeh - Qamishli - Deir ez-zor	3	
	Deir- Ez-zor - Ar Raqqa city - Al Hasakeh.		4
Total		11	24

Annex 2: WHO supported capacity strengthening (Supported 21 activities for 590 participants).

Date	# participants	Details/Field	Program
31/10-1/11/2018	25	CAD CAM applications in Disability in Damascus	Disability
28-30/10/2018	30	International classification of Diseases (ICD 03) in Damascus	HIS
28-29/10/2018	30	HeRAMS online for Hospitals focal points in different governorates in Damascus	HIS
30-31/10/2018	30	HeRAMS online for Hospitals focal points in different governorates in Damascus	HIS
27-28/10/2018	50	Training for "HIV outreach" activity (part 2) in Damascus	HIV/ GF
29-30/10/2018	50	Training for "HIV outreach" activity (part 1) in Damascus	HIV/ GF
28-29/10/2018	50	2 training activities on Psychological First Aid "PFA" and Self-care strategies, and GBV and Self-care strategies for MoH Nurses in As-Swaida and Damascus	MH
28-29/10/2018	25	Mental health GAP-Refresher for MoH Hama in Hama	MH
30-31/10/2018	50	2 training activities on Psychological First Aid "PFA" and Self-care strategies, and GBV and Self-care strategies for MoH Nurses in Damascus and Tartous	MH
30/10-1/11/2018	25	Workshop on provided primary health care services at PHC level in Al Hassakeh	NGO Unit
27-31/10/2018	25	Expansion on nutrition surveillance clinic, and data entry for nutrition monthly report in Aleppo	Nutrition
28/10-01/11/2018	25	Expansion on nutrition surveillance clinic, and data entry for nutrition monthly report in As-Swaida	Nutrition
27-28/10/2018	25	Meeting for heads of health districts (2/4) in Damascus	PHC

28-31/10/2018	25	Manage risk factors for Chronic Cardio Vascular Diseases in Lattakia	PHC
28-31/10/2018	25	Diagnosis, case management & ongoing health care for NCD patients in Qamishli	PHC
29-30/10/2018	25	Meeting for heads of health districts (3/4) in Damascus	PHC
31/10-01/11/2018	25	Meeting for heads of health districts (4/4) in Damascus	PHC
27-31/10/2018	25	War Wounded Injuries Management in Hama	Trauma
28-31/10/2018	25	Dealing with Hazard Material (Hazmat) management and evacuation of buildings in Damascus	Trauma

Annex 3: outpatient consultations provided to Afrin IDPs

Not provided in week 44.

Annex 4: Nutrition activities for Aleppo-Afrin IDPs

Not provided in week 44.

Annex 5: WHO Supported Health services in Aleppo city

Not provided in week 44.

Annex 6: WHO Supported Health services in northern and eastern Hama

# of beneficiaries 24-30 October			
Area	Provision of medical consultations	medicines	surveys conducted by the malnutrition team
Eastern rural Hama : 6 villages	938	883	232
Northern rural Hama :17 villages	1582	1528	271
Total	2,520	2411	503

Annex 7: 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
Al-Hassakeh	Hassakeh city center	287	177	16	23	0
	Al-Qamishly city	218	49	14	0	0
	Rural of Al-Qamishly	181	179	0	0	0
	Al-Mabrouka camp	219	219	0	14	41
	Al-Hol camp	251	251	3	5	5
Al-Raqqqa	Ain Issa camp	180	174	0	10	12
	Al-Karama	122	122	0	0	5
	Al-Kasrat	122	122	0	0	4

	Al-Twehenah camp	946	937	0	0	24
Aleppo	Manbij	241	241	0	0	10
Dier Ezzour	Abu Khashab camp	278	278	0	0	8
	Al-Busayra	74	74	0	0	13
	Dier Ezzour city	0	52	3	0	0
Sub-total:		3119	2875	36	52	122