



*A WHO-supported medical clinic provides daily medical consultations in Al-Hol camp.*

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**2975**

Consultations provided

**2953**

Beneficiaries reached with medicines

**17**

Children with severe acute malnutrition referred for specialized treatment

**1087**

First-aid and emergency services provided

**1302**

Mental health and psychosocial support services provided

## Situation:

- The camp remains severely overcrowded, with more than 73 000 people living in an area designed to hold 10 000. There are acute shortages of health care and other basic services.
- The severe shortage of health care services has improved somewhat following the recent establishment of three field hospitals inside the camp. However, there remains an acute lack of fixed health care points inside the Foreign Annex.
- 12 WHO-supported health teams (7 mobile team, 2 mobile clinic, 1 leishmaniasis team and 2 vaccination team) are providing health care services (including leishmaniasis treatments and mental health and psychosocial support), vaccinating children and reporting cases of epidemic-prone diseases to WHO's disease surveillance system (EWARS).
- Jointly with local partners, WHO has introduced and is maintaining and supporting the registration of mortality cases in Al Hol camp. Daily and weekly mortality rates (including crude and children under five (U5)) were calculated, monitored and shared with key stakeholders. The analysis indicated the rates were within standard emergency thresholds.
- Mortality rates for children with severe acute malnutrition (SAM) with medical complications also remain below the emergency threshold of 5% according to WHO guidelines.
- In response to growing numbers of suspected cases of measles, WHO is supporting measles vaccination efforts. Thus far, approximately 5000 children have been vaccinated against the disease.
- More than 70% of water tanks in the camp lack covers, leaving the water vulnerable to contamination. Children are bathing directly in the tanks, exacerbating the problem.

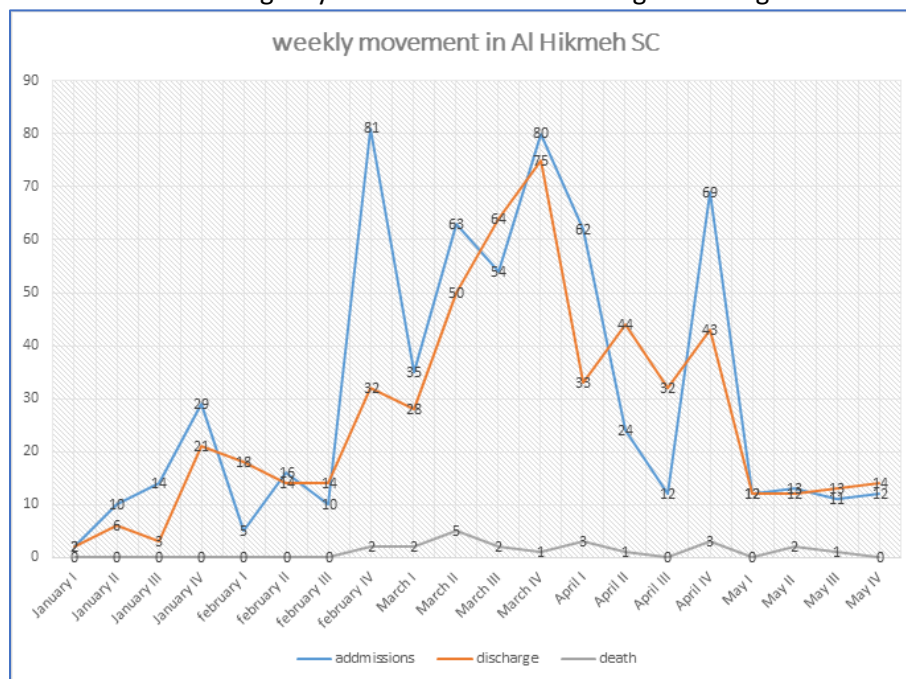
- The referral of patients remains a critical issue. Currently, patients are being referred to the WHO-supported private Al-Hikmah hospital in Qamishli, but the hospital is severely overstretched.
- With WHO's support, the local health authorities and Ibn Khaldoun mental health hospital in Aleppo have agreed on a plan to refer patients with mental health disorders to the hospital.

## Coordination:

- WHO is continuing to coordinate 37 medical teams in the camp and ensure the equitable provision of services.
- The health situation in Al-Hol camp was the main topic of discussion at the latest health sector coordination meeting in Damascus. WHO and partners reviewed the situation with a view to filling the major gaps in the health response.
- Health working groups discussed during two meetings the health situation the updated outcomes of Early Warning and Reporting System (EWARS) in different phases of the camp and the analysis of causes of mortalities there.
- Plans are underway to link health care facilities in the camp with the three new field hospitals. Coordination modalities are being finalized.

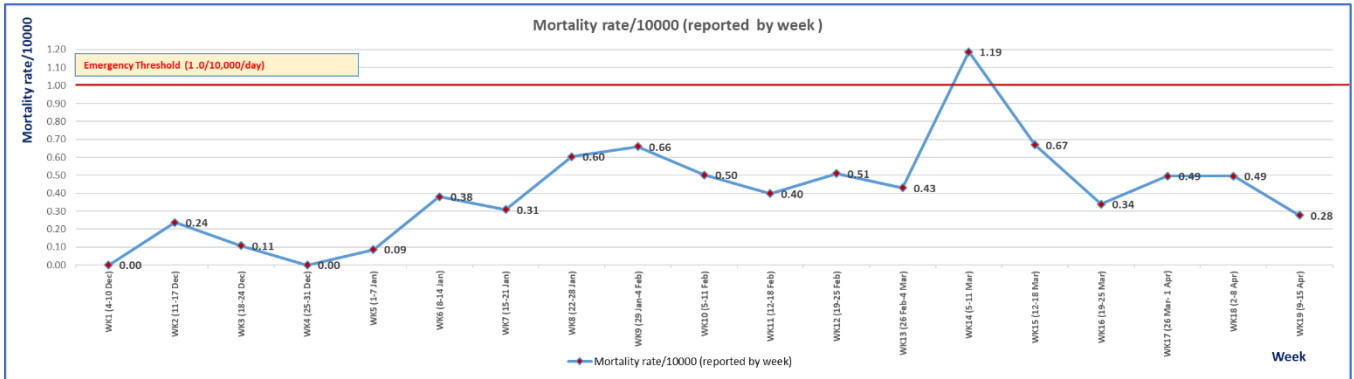
## Response:

- WHO is supporting measles and polio vaccination. Thus far, approximately 5000 children have been vaccinated against measles and more than 15 000 have been vaccinated against polio.
- During the reporting period, 17 children with SAM with medical complications were referred to the nutrition stabilization centre in the WHO-supported Al-Hikma private hospital in Al-Hasakeh. Three deaths from malnutrition were reported.
- Of the 565 children with SAM with medical complications admitted to the stabilization centre between 1 January and 30 April 2019, 533 have been treated and discharged, 21 died and 11 remain under treatment. Children under treatment gained an average of 11g/kg/day, exceeding WHO's guidelines of 10g/kg/day. The overall mortality rate of 3% remains well under the emergency threshold of 5% according to WHO guidelines.

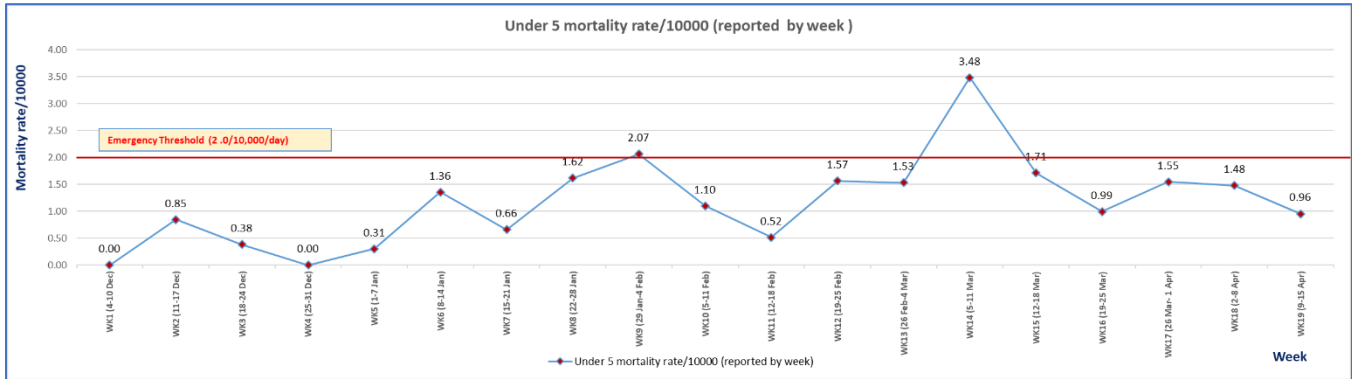


- WHO and local partners are supporting and maintaining the registration of mortality cases in Al Hol camp (a total of 262 cases from 4 December 2018 to 15 April 2019). Daily and weekly mortality rates (including crude and children under five (U5)) have been calculated, monitored and shared with key stakeholders. The analysis below indicates the rates were within standard emergency thresholds<sup>1</sup>.

Graph 1: Weekly mortality rates in the population of Al Hol camp, Hassakeh governorate, Syria, from 4 December 2018 to 15 April 2019.



Graph 2: Weekly U5 mortality rates in the population of Al Hol camp, Hassakeh governorate, Syria, from 4 December 2018 to 15 April 2019.



- WHO-supported medical teams are providing round-the-clock services including mental health and psychosocial support. Twelve health workers are providing psychological first aid and counselling.
- A WHO-supported mobile team is providing leishmaniasis treatment services.
- A total of 5 suspected TB cases have been referred to the DoH’s tuberculosis treatment centre in Al-Hasakeh. This brings the total number of TB cases in Al Hol to 25 patients.
- 22 water sources were tested for microbial contamination in Al-Hasakeh’s national water laboratory to ensure the quality of drinking water; the results were potable.
- WHO delivered medicines and supplies to two local NGOs (Al-Mawdda and Al-Yamama) to support health care services in the camp.

## Priorities:

- Strengthen coordination between local health authorities, the camp administration and the Directorate of Health of Al-Hasakeh in order to improve the referral system for people who require treatment in nearby public PHC centres.
- Cover all water tanks to prevent contamination.
- Train mobile medical teams on preventive and treatment measures for leishmaniasis in preparation for the summer period.
- Deliver additional nutritional formula to the WHO-contracted Al-Hikmah hospital to support the management of children with SAM with medical complications.
- Deliver additional supplies, medicines and equipment to medical teams operating in the camp.
- Deliver additional noncommunicable disease kits to WHO’s hub in Qamishli to be placed on standby for the camp.

<sup>1</sup> Based on Sphere standards, the emergency threshold is defined as a crude mortality rate of 1.0/10,000/day and a U5 mortality rate of 2.0/10,000/day.