



WHO-supported health teams providing health care services to children in the camp ©WHO Syria, 2019

2003

Consultations provided

2002

Beneficiaries reached with medicines

8

Children with severe acute malnutrition referred for specialized treatment

128

First-aid and emergency services provided

478

Mental health and psychosocial support services provided

Situation

- There is observed tension in the camp as people continue to live in harsh and deplorable conditions, with limited access to quality basic services, sub-optimal environment and concerns of insecurity.
- During the reporting period, 178 individuals left the camp and returned to their place of origin in Deir-ez-Zor governorate, decreasing the number of camp inhabitants to 68 490 compared to 68 668 in July.
- 18 static medical points, eight mobile teams, three delivery clinics, two leishmaniasis teams, two vaccination teams, two family well-being centers and three field hospitals are providing health services to the camp's inhabitants in different areas.
- WHO is implementing a health strategy to expand the range of health services provision through converting the mobile points into static health points for the coming 18 months. So far, two mobile points have been converted into static health points in different sectors of the camp.
- The Foreigners Annex still lacks full health service provision to inhabitants, with only one mobile point providing health services.
- Awareness and access to safe drinking water at the camp is still of concern due to the morbidities, like diarrhea, caused by water contamination.
- 12 medical points were reporting through the Early Warning and Response System (EWARS) about morbidity cases. Reports show the most common morbidities are related to diarrhoea, influenza-like illnesses, leishmaniosis, chickenpox, typhoid, brucellosis and measles.
- During the reporting period, there were eight suspected measles cases while no acute flaccid paralysis or tuberculosis cases were detected. Blood samples of suspected measles cases were collected and sent to the reference laboratory in Damascus for analysis.

Coordination

- WHO conducted two regular health meetings with other health partners at the camp to discuss and assess different health topics like analyzing the EWARS updates and the impact of the health services provided by field hospitals.
- WHO conducts regular field visits to the camp to follow up on health service delivery and monitor quality and availability of services, building on findings of previous assessments and ongoing activities.
- WHO held a meeting with the concerned authorities at the camp to discuss the urgent need of establishing an additional static health point at the Foreigner Annex to provide around-the-clock health services.

Response

- WHO health partners conducted different awareness sessions and health education campaigns to disseminate educational messages on various health topics such as HIV and psychological first aid.
- In coordination with health partners at the camp, WHO conducted four on-job training sessions for the new staff of different health partners who provide health care services at the camp. These training sessions encompassed different health topics such as the integrated management of childhood illnesses and the referral mechanism of children from Al-Hol camp to WHO-supported hospitals.
- During the reporting period, 8 new children with severe acute malnutrition were referred to the WHO-contracted Al-Hikmah private hospital in Al-Hassakeh governorate to join the other eight children already hospitalized and under treatment. Thirteen children have been cured and referred to outpatient care at the camp while three other children are still under treatment. Another seven children with severe acute malnutrition and 11 children with moderate acute malnutrition were detected by health partners and referred to the outpatient center in the camp to receive the proper treatment.
- WHO delivered a medical shipment to health partners at the camp. The shipment contains more than 19 500 treatments including specialized kits.
- WHO conducted field visits to the WHO-contracted Al-Hikmah and Al-Hayat private hospitals which are specialized in the referral mechanism of patients from the camp to assess the provision of secondary health care and trauma services.
- WHO delivered seven electric generators to health partners who are providing health services through the pre-distributed caravans to ensure availability of electricity at health points in different phases of the camp.
- In coordination with WHO health partners, two new static points in sector 7 and sector 8 started their provision of health services for camp inhabitants in addition to a mobile team visiting the Foreigners Annex twice a week to provide health care services.
- WHO is following up with the Water Sanitation and Hygiene (WASH) sector at the camp to address access to safe drinking water as water-borne diseases are still reported among patients in the camp.

Priorities

- Dispatch the required quantities of medical shipments to cover the needs of all health partners to support the provision of health services.
- Conduct awareness campaigns on the safe usage of water and advocate on how to avoid the contamination of ice blocks.
- Monitor and evaluate the performance of participants during on-job training of integrated management of childhood illnesses to ensure accurate implementation of the skills they learned.

For more information:

WHO Representative a.i.	Dr. Nima Saeed Abid	abidn@who.int
Emergency Team Lead	Isiaka Stevens Alo	aloi@who.int
Communications Officer	Yahya Bouzo	bouzoy@who.int