



Overview

This week marks two years since the beginning of Syrian crisis. It also sees the number of refugees surpass the one million mark.

As a result of the conflict, 70 000 individuals have lost their lives and an estimated further 350 000 persons have been injured. The health system has been severely disrupted, along with the health care infrastructure, with the workforce and availability of essential medicines and supplies being most affected. This has had a direct impact on the provision of primary and secondary health care (preventive and curative), including support for chronic diseases, reproductive health, infant and child health, nutrition, mental health services, and support for people with disabilities.



An expert group met to discuss the 'Essential Medicines List'

Highlights

- **70% of health workers** living in heavily affected areas (Rural Damascus, Homs and Aleppo) face difficulties in accessing their work place.
- **36% of hospitals** and **7% of health centres** are out of service.
- Insulin, oxygen, anaesthetics, serums and intravenous fluids are no longer available inside the Syrian Arab Republic to meet the current needs. **Health facilities and local pharmacies** are increasingly unable to provide medicines, particularly for the continuous treatment of chronic diseases.
- **"Essential Medicines List"** for the Syrian Arab Republic established through collaboration of pharmaceutical experts, Syrian health authorities, and WHO.
- The funding gap for procuring life-saving emergency medicines, medical supplies, medical consumables and anti-cancer medicines on the Essential Medicines List for a period of one year alone is **US\$ 467 million**.
- Effective **early warning system** helps to contain measles outbreak in Alk'aem refugee camp – Iraq.
- WHO Jordan and International Medical Corps finalized implementation of a **mapping system for mental health, psychosocial, and protection services**.
- WHO Iraq collaborates in the establishment of a small **border clinic to provide essential medicines**.
- On 26 February 2013, WHO Iraq Office delivered a consignment **of life-saving medicines** to be used in Domiz camp.
- Syrians account for **35% of all primary health care** consultations in Lebanon.
- WHO provided the Ministry of Public Health in Lebanon with **10 000 doses of antimonials** for treatment of cutaneous leishmaniasis.

Health situation

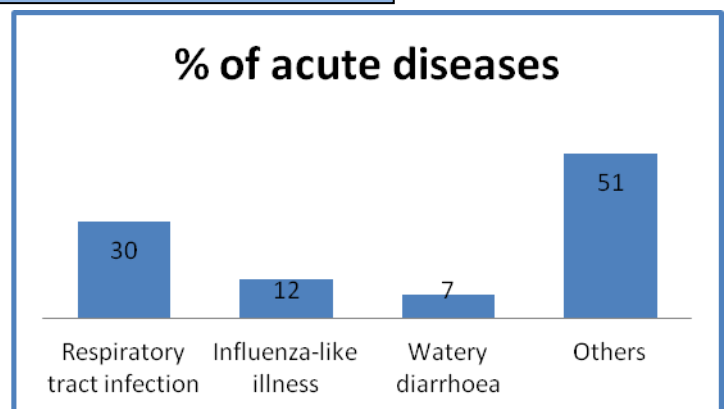
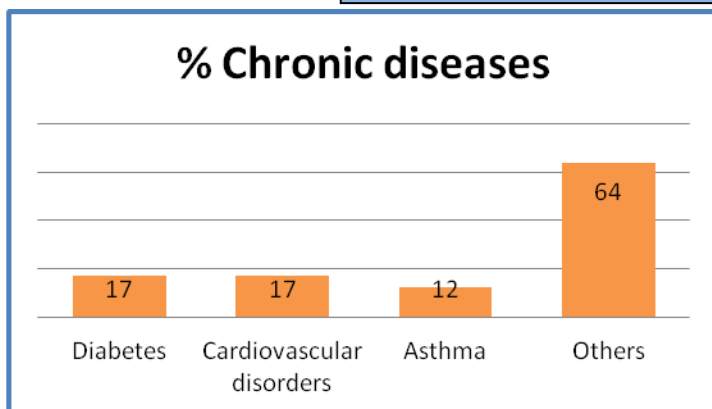
Syrian Arab Republic

- During February 10–16 2013, the Early Warning Alert and Response System (EWARS) reported a total of 217 new cases of suspected hepatitis A. Most of these cases were reported in Aleppo (100 cases), Ar-Raqqa (32 cases) and Idlib (24 cases). Similarly, during 17–23 of February, a further 252 cases were reported. Deir-Ezzor and Aleppo saw the majority of cases with 115 and 62 confirmations, respectively.
- Recent EWARS data shows that the governorates with the most cases of Hepatitis A were located in the north and the north eastern parts of Syria (Deir-Ezzor, Aleppo, Edleb and Raqua). Homs and Rural Damascus have also reported a high number of cases.
- There are continuous reports of leishmaniasis cases throughout Syria with 181 cases reported during February 10–16, 2013, and 252 cases reported during 17–23 February, 2013. The most affected governorates were Hamah, Aleppo and Deir-Ezzor. However, cases of leishmaniasis were detected throughout the country.

Jordan

- There have been 15 564 consultations in Al Zaatari camp in the last week.
- In Al Zaatari camp, utilization and consultation rates per clinician per day are exceeding the average monthly workload.
- The de-worming campaign continues under the guidance of WHO and the Ministry of Health.
- A large increase of upper respiratory tract infections has been reported.
- Mortality rates are stable.
- Two new cases of tuberculosis (TB) have been diagnosed by International Organization for Migration (IOM) this past week. As of 9 March 2013, and in collaboration with Ministry of Health, the IOM has screened a cumulative total of 179 822 Syrians in Jordan over the past year, identifying 260 suspected TB cases (of which 10 had a past history of TB; 8 pulmonary and 2 extrapulmonary), with 42 active TB cases (33 pulmonary; 9 extrapulmonary) of which 4 were multidrug resistant TB.

The number of consultations in Al Zaatari (Source: Ministry of Health)



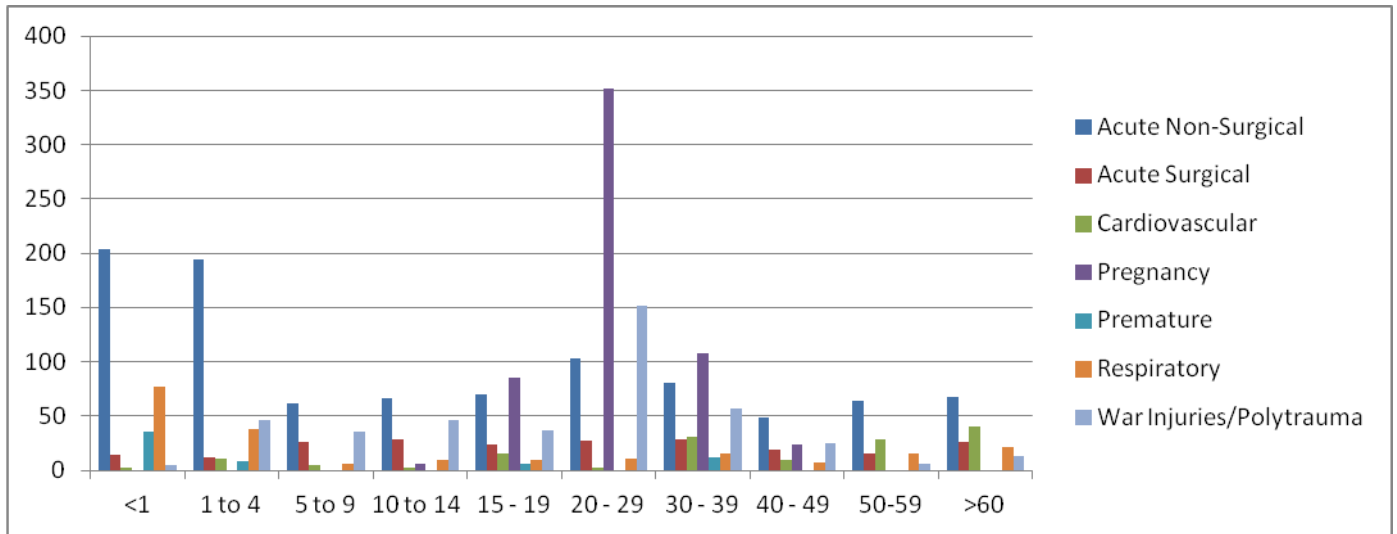
Lebanon

- UNHCR-supported health services to the displaced Syrians in Lebanon are steadily increasing, with around 2250 cases per week reported from UNHCR supported clinics. The rate of hospital admissions is around 650 per week. The Ministry of Public Health has documented a 30% increase in the case load at public health-care centres operating in areas with high concentrations of displaced Syrians.
- The Ministry of Public Health has recorded 50 new cases of cutaneous leishmaniasis among displaced Syrians. More than 100 cases are estimated to have been diagnosed in private clinics in the past two weeks.
- The Ministry of Public Health, UNICEF and WHO are preparing for the initiation of the second phase of the vaccination campaign. The focus of this campaign will be on the areas in the south of Lebanon, Mount Lebanon and West Beka. These locations have been specifically chosen as they have seen a rapid increase in the number of displaced Syrians in the past weeks.
- To date, a total of 129 cases of measles are confirmed across the country: 15% among displaced Syrians.
- No new outbreaks are reported.

Top 5 reasons for primary health care services utilization by displaced Syrians in Bekaa and north Lebanon

		Age group				
		0 to 4	5 to 17	18 to 59	60+	Total
Condition group	1	URTI/ENT	URTI/ENT	OBS/GYN	CVD/NCD	URTI/ENT
	2	Well baby/vaccination	GI conditions other than diarrhoea	URTI/ENT	URTI/ENT	OBS/GYN
	3	Other conditions	Skin conditions	Musculoskeletal	Musculoskeletal	GI other than diarrhoea
	4	Lower respiratory tract infections	Trauma/injury	GI conditions other than diarrhoea	Neurological	Musculoskeletal
	5	Diarrhoea	Ophthalmological and musculoskeletal	Urinary tract diseases	Diabetes and GI other than diarrhoea	Other conditions

Reasons for hospital admission by age group, Lebanon



Iraq

- Al Qa'im camp saw the average number of new consultations in primary health care facilities surpass 1000 per week.
- The leading cause of morbidity is acute upper respiratory infections for adults and diarrhoea for children under five of age. For chronic conditions, hypertension and diabetes are the two main subjects for consultation among adults over 45 years.
- Most primary health care services including immunization, mother and child health, emergency care, pharmacy, and laboratories services and disease surveillance are available free of charge for Syrian refugees.
- Domiz camp has approximately 650 new consultations per day. An average of 10 patients per day are referred to hospitals in the surrounding area.
- WHO Iraq aims to mobilize mental health specialists to train health personnel in the host areas.

In focus

Six-year-old Joseph was diagnosed with leukemia in early 2012. Nine months ago, he and his family fled their hometown in Daraa and are currently living with his uncle near Damascus. Due to shortages in medicines for cancer patients, Joseph has been unable to continue his treatment. “I do not want my child to die”, said Joseph’s father. “We have not been able to secure his medicine for three months now”, he added. “I want him to live for a long time, he is only six...but he is strong and a true fighter”.



6 year old Joseph comforted by his mother

Health response

For the period February 26 to March 11

Syrian Arab Republic

- WHO continues to provide medicines and medical supplies to the Directorate of Health in Aleppo. This has resulted in facilitating 200 surgical interventions over the past two weeks. Similarly, two ventilators, three defibrillators and four reproductive health kits have been supplied.
- In the past two weeks the Jesuit Refugee Service Organization has carried out 1100 surgical interventions using kits supplied by WHO Syrian Arab Republic.
- WHO has also supplied three ventilators and six intensive care unit beds.
- WHO continues to monitor evolving needs and identifying lessons learned for effective programming.
- 60 health care professionals from six governorates were trained to strengthen reporting and monitoring skills for effective disease response and management.
- EWARS sentinel sites have been expanded from 97 to 142.
- WHO and UNICEF will support the Ministry of Health in an upcoming national measles vaccination campaign scheduled for March–April 2013. This campaign will aim to target 1.6 million children and will be conducted primarily in internally displaced person (IDP) shelters, schools and health facilities.

Fact box

WHO Syria initiatives (Jan 2012 – Feb 2013) have resulted in the provision of basic health care supplies for over 1.4 million people.

331 000 medical interventions have been performed through the delivery and distribution of medical kits and essential medicines.

Jordan

- WHO Jordan is working closely with the Ministry of Health to establish a disease outbreak early warning system in the northern governorates of Jordan (Irbid, Ramtha, Mafraq, and Zarka).
- WHO (in collaboration with the Harvard University, the Ministry of Health, UNFPA, UNHCR and UNICEF), is launching and coordinating a Joint Rapid Health Assessment of health facilities in the north of Jordan aimed at determining the impact of Syrian utilization of Jordanian health service delivery facilities.

Females account for 53% of all consultations in Al Zaatari camp.

40% of all consultations are for children under 11 years.

- WHO Jordan continues to support the Ministry of Health in the analysis and evaluation of routine vaccination campaigns throughout the north.
- WHO Jordan agreed with the Irbid Department of Health to open its sub-office on Sunday 17 March 2013 to provide management capacity, coordination and technical support to the health sector. Irbid is the province with the second highest number of Syrians in Jordan.
- WHO Jordan contributes expert technical support inside the Al Zaatari health centres.

Lebanon

- WHO, in collaboration with the Ministry of Public Health, is establishing leishmania clinics across the Lebanon. These will focus on areas with high concentration of displaced Syrians. A total of 10,000 doses of antimonials have been supplied by WHO to the MOPH to begin the campaign. Awareness sessions coupled with distribution of a simplified brochure on leishmania are also being prepared by WHO.
- WHO distributed the third batch of essential and chronic medications to the three public health care centres in north Lebanon and Bekaa.
- The measles and polio vaccination outreach initiative, supported by WHO and UNICEF and in coordination with the Ministry of Public Health, has successfully immunized over 300 000 children in the north of Lebanon and Bekaa, 25% of whom were displaced Syrian children.

Iraq



Truck loaded with medicines for Domiz Camp, Iraq

- On 26 February 2013, WHO delivered a shipment of 24 medicines for the treatment of different diseases to Domiz camp. This supply is sufficient to cover all needs in the camp for three to five months.
- WHO continues to participate in various activities related to disease control and surveillance, immunization, health education and the promotion of hygiene practices.

Egypt

- Displaced Syrian children are being included in both regular immunization campaigns in Egypt and in the new emergency polio campaigns.

Coordination and capacity building

Regional coordination

Pharmaceutical experts and health professionals from the WHO and the Syrian health authorities have met in Amman to address critical shortages in medicines and medical supplies inside the Syrian Arab Republic. The meeting initiated a process to compile an updated Essential Medicines List based on disease profiles, current gaps and critical needs. This in turn, allows WHO and its partners to project and quantify essential medicine requirements and develop standard procurement procedures.

Prior to the crisis, more than 90% of medicines in Syria were locally produced. Since then, economic sanctions, currency fluctuations, difficulty in the availability of hard currency and an increase in operational costs have negatively affected the production of medicines and pharmaceutical products.



Four year old Fatima has been diagnosed with carcinoma

In focus

Four-year old Fatima was diagnosed with carcinoma eight months ago. She used to receive treatment at Aleppo University Hospital, but the ongoing fighting in the city forced her family to flee their home town and relocate to Jaramana, near Damascus. “My daughter used to be treated with radioiodine, but the medication is no longer available in Aleppo,” her mother said. “Here [in Damascus] we regularly go to al-Assad Hospital but they don’t have the medication either. They said they don’t have the required materials. I don’t know what that means! I just want Fatima to receive her treatment.” If Fatima does not receive her radioiodine treatment soon, her chances of surviving cancer will be in danger.

Recent assessments by WHO report that insulin, oxygen, anaesthetics, serums and intravenous fluids are no longer readily available inside the Syrian Arab Republic, and local pharmacies are increasingly unable to provide medicines, particularly those for the continuous treatment of chronic diseases. During a WHO mission to Homs governorate, health care professionals reported that priority is being given to children needing treatment for diabetes due to shortages in insulin.

Bi-weekly health coordination meetings are headed by the WHO Emergency Support Team in Amman bringing together health partners with sub-regional representation. Technical public health aspects are addressed and health information is shared with partners to facilitate coordination of regional activities in support of health actions in the Syrian Arab Republic and in neighbouring countries hosting Syrian refugees.

Syrian Arab Republic

Funded by WHO, the Syrian-based Child Rights Association carried out a workshop that trained 20 internally displaced Syrians volunteers in first aid, 30 internally displaced Syrians in psychosocial support, and 45 children in basic stress and trauma coping mechanisms.

In collaboration with the Ministry of Health, 55 participants assisted in the review of performance-related standards. These meetings resulted in a revision of the EWARS data collection format, a review of focal point capacities, and the

identification of possible future sentinel sites.

Jordan

WHO Jordan continues to lead the bi-weekly health coordination meetings in Al Zaatari camp. WHO Jordan contributes expert technical support inside the Al Zaatari health centers. WHO Jordan also co-chairs weekly and monthly mental health and psychosocial support coordination meetings in Amman and Al Zaatari camp.

WHO Jordan and International Medical Corps finalized the implementation of a strategic mapping tool for mental health, psychosocial and protection services (including gender-based violence and child protection). The mapping will cover services provided to Jordanians, Iraqis and Syrians in all governorates.

WHO Jordan, International Medical Corps, the French Field Hospital and the Moroccan Field Hospital began orientation sessions for general health providers in Al Zaatari camp on the Health Information System (HIS) mental health case definitions.

Lebanon

WHO continues to chair the monthly Health Coordination Group. The last meeting addressed the measles outbreak and the response needed to the increasing number of leishmania cases among displaced Syrians.

Iraq

WHO Iraq continues to actively participate in the health and nutrition coordination meetings in Dohuk. WHO in coordination with other UN agencies within the UN Humanitarian Country Team, is discussing the regional response plan and the Iraq contingency plan. The most recent UNHCT meeting was held on 3 March 2013.



Dr Hussein, WHO Representative in Iraq, visits Al Qaim camp

Egypt

A health subgroup meeting in collaboration with the Ministry of Health, IOM, UNFPA, UNHCR, UNICEF and partner nongovernmental organizations was held on 4 March 2013. Participants agreed to conduct the EWARS training for UNHCR and local nongovernmental organization staff. WHO will then in turn coordinate the feedback. The meeting also discussed the importance of conducting a public health risk assessment, and improving the mapping services of the resident Syrian community. The health facility assessment mission has been postponed due to the current unstable security situation in Egypt. The core team has agreed on the WHO health assessment tools and also on ensuring support to the national public health system.

Donors and funding

Appeal document	Country of operations	Total requested by health sector	Total requested by WHO	Amount received by WHO (including pledges)**	% of overall amount requested by WHO	WHO unmet requirements
Humanitarian Assistance Response Plan (1 January to 30 June 2013)	Syrian Arab Republic	81,905,133	48,465,000	5,688,753	12%	42,776,247
Regional Response Plan 2012	Iraq	2,089,000	1,350,000	274,825	20%	1,075,175
Regional Response Plan 2012	Jordan	15,625,999	2,650,000	848,341	32%	1,801,659
Regional Response Plan 2012	Lebanon	6,613,440	400,000	149,800	37%	250,200
Regional Response Plan 2012	Turkey	2,089,000	1,200,000	248,668	21%	951,332
Regional Response Plan 2013	Iraq**	4,978,196	1,350,000	-	0%	1,350,000
Regional Response Plan 2013	Jordan	30,403,752	4,000,000	-	0%	4,000,000
Regional Response Plan 2013	Lebanon	18,492,775	576,000	151,111	26%	424,889
Regional Response Plan 2013	Turkey		2,400,000	-	0%	2,400,000
Regional Response Plan 2013	Egypt	2,504,590	-	-		-

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