WHO is sending a second shipment to the hospital in Sweida to respond to urgent needs. This shipment contains more than 113,000 treatments, including medicines and supplies to treat trauma cases. *Photo: WHO*

<table>
<thead>
<tr>
<th>182,600</th>
<th>100,000</th>
<th>240</th>
<th>84</th>
<th>68</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people remaining displaced in southern Syria</td>
<td>IDPs located in areas near the Golan</td>
<td>Reported casualties resulting from the 25 July terrorist attack in Sweida</td>
<td>Number of health facilities that have shifted lines of control</td>
<td>Number of EWARS sentinel sites supported in Dar’a</td>
</tr>
</tbody>
</table>

**SITUATION**

- The 25 July terrorist attacks by the Islamic State (ISIL) on Sweida City and the eastern countryside reportedly killed 240 people and injured at least 235 people. Fifteen patients remained in ICU and 38 persons underwent surgical operations. Additional medical teams from the Ministry of Health (MoH) in Damascus have been dispatched to support the national hospital in Sweida.
- Population movements continue in Quneitra and Dar’a. While some IDP camps along the Golan Heights border and within Al Rafid area are reportedly decreasing in total inhabitants, there are other reports on the increased number of camps/settlements in the western countryside of Dara’a and Quneitra, there are Ateera camp (4000 IDPs), Jbailia camp (3000 IDPs), Alaliea camp, Membtina camp (Quneitra countryside), and Gerges camp (Quneitra countryside).
- A total of 84 (of 94) public health facilities have shifted lines of control.
- While an increase in outreach services can address some of the health needs of the affected population as an interim measure, Primary Health Care facilities that have seen a change in control need to be re-vitalized. Essential services include immunization, reproductive health, nutrition screening, and mental health and psycho-social support services.
There is a continued need for the supply of life-saving and life-sustaining medicines and consumables to all functional health facilities, whether mobile or static. Access, particularly to Quneitra, remains limited.

Referral systems and treatment facilities for trauma and secondary/tertiary care require strengthening.

There is a continued demand for non-communicable diseases treatments across the affected area.

HEALTH CLUSTER RESPONSE

I. DAMASCUS HUB RESPONSE

Number of referrals for trauma/tertiary care

- The Syrian Arab Red Crescent (SARC) reports that 313 cases have been referred to health facilities within Dar’a and Damascus since 17 June.

Essential outreach services

WHO

- WHO delivered nine tons of life-saving health supplies to Sweida national hospital. This is the seventh WHO shipment to the south since 28 June, with a total of 60 tons of health supplies provided, or 312,000 treatment courses.
- WHO partners continue operations of two static mobile points, one static medical point and two mobile clinics in Dar’a city and shelters in Dar’a, Ibla and Jbab.

UNICEF

- UNICEF supports primary health care services through the DoH that manages deployment of mobile medical teams in shelters and crossing points.
- In the eastern and western countryside of Dar’a, UNICEF has supported the deployment of two mobile medical teams to conduct field visits to 13 locations, including southern Dar’a near the Jordanian border.

UNFPA

- In Dara’a, reproductive health activities are provided through three medical mobile units from the Monastery of Saint James the Mutilated (MSJM), the Syrian Family Planning Association and SARC that have been deployed to Izra, Sanamien, Jbab Shelter and corridors.
- The MMTs have provided 4,713 primary health care services, including 3,271 services from MSJM, 525 through SARC and 917 through SFPA.

II. JORDAN CROSS-BORDER HUB RESPONSE

Health facilities and service availability

- Of an estimated 130 physicians who were present in NSAG-controlled areas before the onset of escalated conflict in mid-June, just 25 remain active at this time.
Health facilities that continue to operate in former NSAG-controlled areas have begun to run low on buffer stocks of health commodities and supplies, particularly in Quneitra and western Dar'a.

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