Highlights

- Syrian health authorities report that out of a total of 91 public hospitals across the country, 55 (60%) have been affected, of which 20 (22%) have been damaged and 35 (38%) are out of service.
- WHO participated in an inter-agency mission to al-Qusair city and Hysie in Homs to identify health needs and facilitate the delivery of medical supplies (see attached report).
- Based on current influx of refugees into Lebanon, it is expected that the demand for health care services by Syrians in Lebanon will increase by at least 30% during the next three months.
- WHO has established a new office in Duhok (Northern Iraq) and has prepositioned medicines, medical supplies and laboratory kits in the city.
- The first Joint MOH/WHO-led Rapid Health Facility Assessment has taken place in Jordan, and findings will be shared at the end of July 2013.

Health situation

Syrian Arab Republic

- Health facilities continue to be affected as a result of the crisis. According to revised figures received from the health authorities, as of June 2013:
  - Out of a total of 91 public hospitals across the country, 55 (60%) have been affected, of which 20 (22%) have been damaged and 35 (38%) are out of service;
  - Out of a total of 1723 public health centers across the country, 593 (34%) have been affected, of which 31 (2%) have been damaged, 359 (21%) are out of service, and 203 (12%) are closed due to insecurity;
  - Out of a total of 520 of public ambulances, 478 (92%) have been affected, of which 357 (69%) have been damaged/affected/stolen/burned and 121 (23%) are out of service, and;
  - 48 vaccination/supply/service vehicles have been damaged/affected, of which 164 have been stolen/burned.
- From 2-8 June, EWARS sentinel sites in 10 out of 14 governorates around the country reported a total of 2526 cases, of which 36% were Influenza like illness (925 cases), 32.7% were acute diarrhoea (828 cases) and 6.2% were Acute Jaundice Syndrome (156 cases). Other reported cases included:
  - 254 cases leishmaniasis, of which 123 in Aleppo;
  - 156 cases suspected hepatitis A, of which 53 in Aleppo;
- 30 suspected cases measles, of which 18 in Aleppo;
- 22 cases bloody diarrhea (suspected shigellosis), of which 14 in Hama;
- 10 cases tuberculosis, of which 5 in Aleppo;
- 5 cases suspected brucellosis, of which 3 in Hama;
- 5 cases suspected typhoid, of which 3 in Hama; and
- 1 case suspected meningitis in As-Suwayda.

AJS: Acute Jaundice Syndrome          BD: Bloody diarrhea          AD: Acute diarrhea          ILI: Influenza-like illnesses

Table 1. Morbidity trends for 4 main diseases as reported by EWARS from Epidemiological Week 13 (24 March) to Epidemiological Week 23 (8 June)

Iraq

- From 19-31 May, a total of 5819 consultations were made in Domiz Camp, Dahuk, with 392 follow-up cases and 114 referrals. According to the Ministry of Health, the following cases were reported among Syrians in the camp during the same time period (see Figure 1):
  - 2242 cases upper respiratory tract infections;
  - 637 cases watery diarrhea;
  - 250 cases skin diseases;
  - 195 cases otitis;
  - 194 cases hypertension / cardiovascular diseases;
  - 157 cases urinary tract infections;
  - 127 cases accidental trauma;
  - 106 cases eye infections;
  - 81 cases bloody diarrhea;
  - 61 cases lower respiratory tract infections;
  - 18 cases sexually transmitted infections;
• 2 cases suspected tuberculosis; and
• 2 cases suspected meningitis

**Figure 1: Reported consultations among Syrians in Domiz camp, 19-31 May 2013**

### Jordan

- The first Joint MOH/WHO-led Rapid Health Facility Assessment has taken place in Jordan, and findings will be shared at the end of July 2013.
- According to the Ministry of Health the following were reported:
  - 138 cases cutaneous leishmaniasis among Syrians from October 2012 – May 2013;
  - 59 cases tuberculosis among Syrians nationwide (including 3 multi-drug resistant cases) from March 2012-June 2013;
  - 54 cases measles nationwide among Syrians and Jordanians, including 5 Syrians in Al Zaatari camp from February-June 2013;
  - 2 cases shigella flexneri among Syrians in Al Zaatari camp in May 2013;

### Lebanon

- Based on current influx of refugees into Lebanon and a total of 564,000 refugees currently in the country, it is expected that the demand for health care services by Syrians in Lebanon will increase by at least 30% during the next three months.
- The Ministry of Public Health reports a total number of 1,058 measles cases in Lebanon, 12% of which are among Syrian refugees. The largest numbers of measles cases are being reported from the Beqaa, the North, and Mount Lebanon -- the three regions with the heaviest concentrations of Syrians. It is worth noting that 46% of all cases are reported as having not received any dose of measles vaccine.
- With regards to other communicable diseases, the Ministry of Public Health reports the following among Syrians in May 2013:
  - 35 cases leishmaniasis;
  - 2 cases viral hepatitis A;
  - 2 cases meningitis;
  - 1 case pertussis;
• 1 case viral hepatitis B; and
• 1 case viral hepatitis C.

• Due to the high demand of Syrians with noncommunicable diseases on the Lebanese health care system, shortages in life-saving medicines, including insulin, continue to be reported.

• As more Syrian refugees witnessing the violence flee into Lebanon, there is an increasing need for mental health services for those affected by the events.

• Recent disease outbreak risk assessments by WHO and partners indicate that there is:
  o A high risk for most water-borne diseases (shigella, typhoid, hepatitis A and E), for brucellosis, tuberculosis, and most vaccine preventable diseases (measles, pertussis, diphtheria);
  o A medium risk for cholera, cutaneous leishmaniasis and rabies; and
  o A low risk for dengue, west Nile virus and chikungunya fever.

Health response

Syrian Arab Republic

• UNICEF and WHO have supported the Ministry of Health (MoH) in implementing the 2013 National Vaccination Campaign against measles and polio from 11 March - 11 April in both government- and opposition-controlled areas. Recent MoH reports (including from the newly reached governorates of Ar-Raqqa and al-Hassakeh) show that:
  o 1,086,218 children from 6 months to 15 years of age have been vaccinated against measles, mumps and rubella in schools, IPD shelters and health facilities; and
  o 758,257 children under the age of 5 were vaccinated against polio.

• From 5 – 20 June 2013, WHO provided:
  o Affected areas of Homs with medical supplies and essential medicines for more than 43,500 beneficiaries (4 IEHK supplementary units for 40,000 beneficiaries, 2 IEHK basic units for 2,000 beneficiaries, 4 surgical kits for 400 surgical interventions, 5 midwife kits for 250 normal deliveries and 500 bottles of lice/nits shampoo for 500 beneficiaries.
  o MoH in Damascus with life-saving, essential and communicable disease medicines to treat 102,000 beneficiaries (Medicine includes: Albumin, Mefenamic Acid, Cefotax, Furosemide, Ciprofloxacin, Paracetamol, Potassium, Hydrocortisone sodium succinate, Genta 80, Nalidixic acid, Coartem and Ceftriaxone), medical supplies and equipment for more than 20,000 beneficiaries (Include IV fluids: Saline and Glucose), dialysis consumables sessions for 125 beneficiaries for a period of 1 month, 50 Burn Kits for 1,500 beneficiaries, and various types of diagnostic kits (Viral RNA Mini Kit and Enzymes for HBV DNA Quantification kits) to MoH’s National Public Health Laboratory.
  o MoH in Dar’a with life-saving and essential medicines for more than 2,600 beneficiaries (Medicine includes: Tramadol, Atropine, Potassium, Perikabiven, Thiopental and Ciprofloxacin), IEHK basic and supplementary unit kits to provide basic healthcare for a population of 45,000 and 4 surgical supply kits for 400 trauma cases.
  o MoHE (al-Mouwassat Hospital in Damascus) with essential medicines to treat 13,320 beneficiaries for common diseases, NCDs and life-saving surgical interventions, and medical supplies for more than 13,330 beneficiaries, IEHK Supplementary unit kit to provide basic healthcare for a population of 10,000 and 1 Surgical Kit for 100 trauma cases.
• During a four month period project (December 2012 to March 2013), the WHO-supported NGO, Syrian Family Planning Association (SFPA), treated a total of 19,744 patients in Homs and Aleppo:

In Homs (12,061 people reached):
  o 4539 patients treated for communicable diseases;
  o 4538 patients treated for noncommunicable diseases;
  o 56 children treated for malnutrition;
  o 1670 patients provided with reproductive health services, and;
  o 1258 patients treated for oral, eye and skin diseases.

In Aleppo (7683 people reached):
  o 2215 patients treated for communicable diseases;
  o 3520 patients treated for noncommunicable diseases;
  o 88 children treated for malnutrition;
  o 1490 patients provided with reproductive health services, and;
  o 370 patients treated for oral, eye and skin diseases.

• WHO supported the diagnostic and treatment capacity of al-Ihsan Charity Association in Aleppo by providing ultrasound and portable X-Ray machines, an X-Ray viewer, 3 nebulizers, 3 diagnostic sets and other dental sets and tools for primary health care services, including basic dental treatment, for 5,000 patients.

• WHO and MoH conducted a workshop for 46 participants from nine governorates on re-activation and strengthening the National Health Information System for emergency response. The workshop aimed to strengthen participant capacities, and provided an opportunity to review the current situation on then Management of Information Systems (MIS) with a focus on the challenges facing MIS focal points at the governorate level.

• Due to the high turnover of the MoH workforce in PHC facilities, WHO and MoH conducted a training course on diabetes management at the PHC level for 50 MoH physicians from 5 governorates. The main objectives were to strengthen capacities of health providers to manage the medical care of diabetic patients and avoid diabetes-related complications. Trainees were also informed on Type 1 and Type 2 diabetes, diagnosis and treatment, lifestyle measures and gestational diabetes.

Iraq

• WHO has established a new office in Duhok (Northern Iraq), where Domiz refugee camp is located, and has prepositioned medicines, medical supplies and laboratory kits for provision to the camp as needed.

Jordan

• 200 vaccinators from the Ministry of Health have been trained WHO and the Center for Disease Control (CDC) on RCA quality control for measles vaccinations as recommended for non-camp campaigns.

• As part of a national vaccination campaign, 370,471 Syrians, Jordanians and other nationalities between 6 months and 30 years of age were immunized against measles and polio in Irbid Governorate and 125,605 were immunized in Mafraq Governorate.

Lebanon

• Approximately 4000 Primary Health Care (PHC) consultations are provided each week to Syrians in Lebanon through UNHCR and implementing health partners. At least an equal number of PHC services are provided
per week through the PHC network supported by the Ministry of Public Health (MoPH). The rate of hospital admissions supported by UNHCR and their implementing partners is around 450 admissions per week.

- 11 leishmaniasis clinics supported by WHO continue to provide treatment for affected patients.
- Preparations for the expansion of the disease early warning system are ongoing by the MOPH and WHO.
- The MoPH, with support from WHO and UNICEF, is continuing the measles and polio vaccination outreach campaign through:
  - Routine and school-based vaccinations, reaching 4168 children during the first week of June in the Beqaa and North;
  - Establishing vaccination teams at refugee registration sites in coordination with UNHCR, starting with 2 sites in May and ongoing plans to expand to all sites; and
  - Acceleration of vaccinations in the Palestinian camps in coordination with the UNRWA.

**Coordination**

**Syrian Arab Republic**

- WHO chaired the weekly Health Working Group (HWG) meeting and presented the final draft of the summer plan which includes the expansion of EWARS, building lab capacity, prepositioning of medicines, capacity building on rapid response and WASH activities. Health partner agreed that this plan should expand to become a health sector contingency plan, embracing activities of all agencies, as well as close inter-sector coordination with involved sectors (ie. WASH).
- WHO signed two new MoUs with NGOs Mar Essia association in al-Hassakeh to provide referral services and medicines for chronic diseases, and Shabab al-Khair association in Homs to provide referral services and provision of surgeries. This brings the total number of NGOs working with WHO to 27.

**Iraq**

- The health/nutrition working group is developing a cholera preparedness plan and strengthening disease surveillance in Domiz camp.

**Jordan**

- A new joint UN/INGO advocacy working group has been established with the aim of raising awareness about the Syrian crisis and reducing negative attitudes by host communities towards Syrians refugees in Jordan.

**Lebanon**

- The final draft of WHO’s risk profile of outbreaks and epidemics in Lebanon has been shared with the Ministry of Public Health.
- An inter-agency meeting was held on June 11 2013 where partners agreed to develop one UN country team contingency plan, including a scenario for complex emergencies resulting in displacement. The current UNHCR contingency plan for Syrian refugees will be added as an annex to the new plan for the next 6 months.
- A unified rapid assessment form for Syrians living in informal tented settlements has been developed by all humanitarian partners in Lebanon.
- A vulnerability assessment for Syrian refugees in Lebanon is ongoing, supported by OCHA and WFP.
### Donors and funding

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