KEY ACHIEVEMENTS AGAINST THE 2015 SRP
- Over 9 million people received medical care
- 2.3 million children vaccinated against polio
- 1.6 million children vaccinated for MMR
- 975,814 people reached with nutrition interventions
- Over 5 million people provided with safe drinking water

HUMANITARIAN PROGRAM CYCLE (HPC)
Following consultation with the hubs, the health sector component of the Joint Operational Plan was submitted to OCHA on the 18th of August in preparation for the upcoming Top Donor Group for Syria meeting. The health sector JOP prioritized two strategic objectives and nine activities within the 2015 SRP.

COORDINATION
The WoS health sector held an inter-hub TC meeting on the 24th of August. The agenda covered follow up and updates on action points set at the previous inter-hub meeting in Beirut in early July. Through increased collaboration, the roles and responsibilities of the hubs and WoS health team have been further streamlined, Iraq and Lebanon 4Ws reporting into WoS has begun and a joint contingency planning template is being established. The WoS team also attended recent ISCCG and SIMAWG meetings in addition to outreach to other WoS sector coordinators. The WoS Health Sector also met and briefed the Director of USAID/OFDA on immunizations and progress in WoS health sector coordination.

UPCOMING EVENTS
- WoSA findings shared – 1 September
- HNO Workshop – 14 and 15 September
- WoS Health Sector Inter-Hub Meeting – 17 September
- HNO draft to be submitted to ISCCG – 22 September
- ISCCG Meeting – TBC
- SSG Meeting for HNO validation – 30 September
- WoS HRP Planning Workshop – October

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STRATEGIC PLANNING
After the Whole of Syria Assessment (WoSA) data cleaning took place during the final week of August, analysis is underway in preparation for the upcoming HNO. Each hub will also conduct analysis of other sources of health information such as HeRAMS, AoO, EWARN/S and HIS information from partners where available. In addition the health sector is currently reviewing the severity scale matrix and People In Need (PIN) calculations formula to ensure sub-districts with the greatest need and gaps are priorities for next year. Analysis of WoSA findings and these other sources of health information will guide the Humanitarian Needs Overview and help set strategic objectives and activities for the 2016 HRP.

GAP IDENTIFICATION
The WoS team has continued to work with the hubs to identify gaps and needs for the next 6 months. A micro-plan at the sub-district level for Northern Syria has been submitted including the type of drug package (PHC, RH and secondary) and number of facilities (anonymized) at the sub-district level. Once micro-plans are received from the Damascus and Amman hubs the WoS team will be able to identify under-served sub-districts and areas with possible overlap for de-confliction.
INCREASED TARGETING OF MEDICAL PERSONNEL AND HEALTH FACILITIES

2015 has seen a marked increase in the targeting of health facilities across Syria. PHR reports an unprecedented increase in recent months, with June recording an all time high of 15 attacks, resulting from the use of barrel bombs, rockets, raids and car bombs. Subsequently, the rise in attacks has also seen an increase in death toll of medical personnel, with nine and ten casualties reported in June and July, respectively. Analysis from the course of the war show that doctors are the prime targets of such attacks followed by nurses and medics.

The conflict has been characterized by brutal violence that does not distinguish between civilians and combatants, nor does it respect the protected status of health personnel and facilities. Parties to the conflict continued to target health facilities with more than 50 attacks on health facilities since the beginning of 2015. Physicians for Human Rights, an independent NGO, verified 15 attacks on health facilities and killing of 10 medical staff in the month of May, a record high number for one month since the beginning of the conflict.

SYRIAN PHARMACEUTICALS AND FUEL PRICE RISES

The Ministry of Health of the Syrian Arab Republic raised locally produced pharmaceutical prices by over 50% on August 17th.

This has impacted all government controlled areas, with the administration aiming to boost profit margins for the severely damaged sector due to increased conflict in the last two years. The ramifications in opposition held areas are worse, with prices soaring by over 100% in some areas. Prices of drugs in opposition-held areas are also based on cost of transportation and cost of drugs at private pharmacies. Health facilities in Aleppo City and Damascus are reporting that besieged and hard-to-reach areas around the country are worst hit with such circumstances not being faced since the Syrian pound dropped two years earlier.

Compounding the price of pharmaceuticals is the dramatic rise in diesel pricing too. This has added to the cost of medicine transportation across the country and increased the financial pressure on civilians due to a rise in everyday cost of living. Black market fuel has risen by almost thirty percent in some opposition held areas following the official price hike to almost a dollar by the Syrian Ministry of Internal Trade.

WATER AS A WEAPON OF WAR

Recent reports highlight severe deliberate cuts are being placed on water supplies by both warring parties. Aleppo and its two million inhabitants are the worst hit by this month long stand off, with each party aiming to put pressure on the other. This tactic has also previously been used in Damascus. Were the cuts to go on, the health risks posed on the population are extensive with limited supplies potentially being contaminated and increasing the likelihood of a non-communicable disease outbreak.

References:
3 Syrian Ministry of Health, OCHA. August 2015.