Eight health facilities in southwestern Syria have been attacked since 24 June. Photo: WHO

<table>
<thead>
<tr>
<th>Number of people expected to be in need of aid</th>
<th>Estimated number of people displaced within southern Syria</th>
<th>Attacks on health facilities since 24 June</th>
<th>Health facilities in areas regained by the Government of Syria (GoS)</th>
<th>Reported medevac cases from Jbab to hospitals in Damascus</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt;450,000</td>
<td>325,000</td>
<td>8</td>
<td>21</td>
<td>24</td>
</tr>
</tbody>
</table>

### SITUATION

- OCHA reports that there are now up to 325,000 IDPs in southern Syria. Of those, 164,000 IDPs have moved towards camps and villages in Quneitra, close to the Golan Heights area.
- Approximately 60,000 IDPs have been displaced to areas in close proximity to Jaber-Nassib border with Jordan, including the free zone. IDPs are subject to dusty desert winds and temperatures of up to 45 degrees Celsius and are lacking shelter, basic items as well as regular access to clean drinking water and health and sanitation services.
- WHO, together with other UN agencies and partners, is working closely with the Royal Medical Services (RMS) at the Jaber-Nassib border to support coordination for medical consultation and medical referral of patients to Jordan hospitals for life-saving treatment at Ramtha Hospital and affiliated MoH hospitals.
- Inside southern Syria, 21 health facilities (of 99 previously located in non-state-armed-group (NSAG)-controlled areas) changed lines of control, including 20 public health centers (PHCs) and one hospital, Al-Hrak Hospital. Different levels of damage are reported as follows: 17 public health centers of 20 PHCs need rehabilitation, with six totally damaged and 11 partially damaged. Al-Hrak public hospital is out of service. In Busra district, five PHCs are currently functioning under the auspices of the Department of Health (DoH). In Tafas, three PHCs returned to GoS control and are functioning.
- All functional PHCs in areas that have changed territorial control are run only by the nurses and midwives who stayed behind. They provide primary health care services, vaccinations, and reproductive health consultations.
- The health facility in Tafs, western Dar'a, was fully evacuated following successive days of hostilities.
I. HEALTH CLUSTER RESPONSE

Coordination

- Health sector response makes use of all available means of access to affected populations, however limited this may be. It involves daily coordination between Jordan cross-border partners, Damascus-based partners, SARC, local health authorities, and the WHO Jordan country office.

II. DAMASCUS HUB RESPONSE

Number of referrals for trauma/tertiary care

- Since the start of the offensive, a SARC reports that a total of 92 patients were referred within Dar’a health facilities and 24 were sent to hospitals in Damascus.

Essential outreach services

- Primary health care/non-communicable disease (NCD) health services are covered by health partners, including DoH Dar’a, SARC, WHO, UNICEF, UNFPA and the network of implementing partners as Al Bir and GOPA NGOs.
- SARC (Syrian Arab Red Crescent) branches in Dar’a, Sweida, and Quneitra are fully engaged.
- WHO partners run two static mobile points and two mobile teams that cover the following locations:
  - Dar’a city (static point)
  - Mseifra, Oum Walad, Eastern Al Karak (mobile team)
  - Jbab (static point)
  - Jbab Third School/Aicha mosque IDP shelter (mobile team)
- A DoH Dar’a mobile clinic donated by WHO covers several newly accessible locations, including Gharya Sharqya, Gharya Ghrabya, and Mseifra.
- There is no access to Quneitra yet due to ongoing clashes.

Disease surveillance

- 66 Early Warning Alert and Response (EWARS) sentinel sites are operational in southern Syria, with 20 received reports. Nineteen sites have not reported since week 24 because of military operations in the area.
- The most reported morbidities are acute diarrhea and influenza-like illness. The most reported alerts are bloody diarrhea. There was also one reported meningitis case.

Mental and psychosocial health support services (MPHSS)

- Twenty health facilities and community centers are providing MHPSS support.

Vaccinations

- The vaccination point at Jbab IDP shelter will be closed as all children under five have been covered.
- DoH vaccination teams are assessing the vaccination status of children moving from the NSAG-controlled areas. The teams screened 520 children under 5 passing through the corridors.
III. JORDAN CROSS-BORDER HUB RESPONSE

- Jordan cross-border partners are operating under the health sector preparedness plan for southern Syria. The hub completed mapping of health partner warehouse capacity to support inter-sector needs.

Medicines and Medical Supplies

- UN convoys at Ramtha border are still suspended. Four health partners currently have thirteen trucks carrying 85 tons of emergency medical response supplies on standby and ready to cross the border once it opens.

Health Facilities and Service Availability

- Among facilities supported by cross-border partners, only 54% remain accessible: just 6 hospitals and 20 PHCs in all of Dar’a and Quneitra.
- The WHO-supported blood bank was relocated after the health facility in which it was located was destroyed, and continues to function with minimum capacity.
- Local health authorities have provided medicines and medical supplies to the mobile clinic run by the community at Tabariyat village and in the surrounding IDP settlement areas.
- A small number of health sector partners can make use of “informal” border crossings to send supplies into accessible areas of Southern Syria. However, even informal movements remain restricted by the security situation on the ground.

Disease surveillance

- The 31 EWARN (Early Warning Alert and Response Network) sentinel sites located in Dara and one surveillance lab based in Kahil health facilities are currently not functioning.

IV. JORDAN RESPONSE

- Jordan-based UN agencies, together with NGO partners, have initiated service delivery to the population sheltering in Jabber-Nassib free zone.
- IMC, IRC are working closely with RMS in supporting health response at Jordanian Jaber-Nassib border. Life-threatening cases are triaged by RMS and referred onward to Jordan MoH hospitals in close coordination with UNHCR.
- On 4 July, WHO facilitated a partner coordination meeting, chaired by the Minister of Health of Jordan, to map partners providing medical referral assistance to patients referred from Syria to Jordan.
- On 4 July, WHO donated to RMS one interagency emergency health kit (IHEK), sufficient for 10,000 patients for 3 months. One IHEK is planned for Ramtha Government Hospital to cushion the war-wounded patient load.

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