Supplies were delivered by the WHO Turkey Hub and distributed to health cluster partners in northern Syria.

Routine immunization with pentavalent vaccine

Medical staff and community health care workers.


In January 2018, 28 verified incidents of violence against the health care infrastructure were reported, resulting in the deaths of four health workers and injuring nineteen.

In January 2018, 33 doctors, nurses, midwives and community health workers were trained by three Health Cluster partners.

SIG vaccinated more than 2000 children among the newly displaced in Idlib governorate.

The temporary suspension of UN cross-border operations at the Syria–Turkey border due to insecurity has resulted in dwindling availability of health supplies in Idlib.

Health Cluster consultative workshop was held to share CCPM survey results and developed “Plan of Action”. Health Cluster Work plan 2018 was also finalized.
Situation update

Hostilities in Idleb Governorate continue to cause casualties and displacement among civilians. Saraqab town and surrounding communities were affected the most during the reporting period, with reports indicating that most of the town’s population have displaced.

A total of 304,203 displacements (some might be secondary displacements) between 15 December and 29 January. Of the total, 272,861 displacements were tracked from southern rural Idleb to central and northern Idleb (CCCM).

In Afrin district, internal displacement from border communities to the central part of Afrin district continues. It is estimated that between 15,000 to 30,000 people have been displaced since 20 January.

The existing health systems in North east Syria are overwhelmed with increase in the number of patients seeking medical care.

Finalization of East Ghouta Preparedness Plan together with Whole of Syria

Public health risks, priorities, needs and gaps

Communicable diseases

The trend of diarrheal diseases is within the expected range, the age distribution shows that more than 50% of the reported cases are in <5 years old age group. In addition to the regular update of the cholera risk scale map, the Early Warning, Alert and Response Network (EWARN) team is monitoring any conversion in children aged >5 years to those aged <5 years as a warning sign of a possible cholera outbreak.

The incidences of ILI and SARI observed among the affected population are within the seasonal baselines, with no increase of ILI trend we need to keep monitoring the situation closely. Therefore, the trends on the sub-national level are monitored regularly to investigate and response to any possible outbreak.

Needs and gaps

Nearly 400,000 civilians living in besieged East Ghouta are facing severe shortages of basic goods and lifesaving medical care. There is dire need to;

- Urgent medical evacuation of patients from East Ghouta for advanced medical care to save their lives.
- Delivery of medicines and medical supplies to health facilities in East Ghouta.
- Need to expand and improve the capacity of the health system especially delivery of health services in Afrin district.
Health Cluster action

Health Cluster coordination

The Health Cluster conducted two coordination meetings in January. Among the issues discussed were: addressing gaps in health services, referrals to Turkey for advanced care, polio campaign as part of SIAs, trainings – infection prevention and control, surveillance and cholera management, health governance in north west Syria: health situation in NSAGs controlled governorates, relocation of surgical unit to southern rural Aleppo, withdrawal of support to 10 health facilities in East Ghouta and its impact, complementarity between cross-line and cross-border interventions, routine health information system and cold chain equipment assessment.

Support to health service delivery

In January, Health Cluster partners provided 1,055,349 outpatient consultations and supported 34,347 hospital admissions. 6916 people living with disabilities were supported with rehabilitation services.

Routine immunization: The expanded programme of routine immunization was revitalized in seven additional health centres in northern Syria, making a total of 54 operational centres by the end of January.

Primary health Care: The health facilities in Dana and Ma’arrat An Nu’man towns as well as Idleb city reported 30-50% increase in the caseload. The mobile clinics were relocated daily to the locations that have a high concentration of IDPs. Mobile clinics are providing an average of 500 consultations per day, while the mobile vaccination teams vaccinated more than 2000 children during the month among newly displaced population.

Health NGOs repurposed some their staff and mobilized contingency stocks of medicines and supplies to health facilities in Dana, Ma’aarat Nu’man, Saraqeb, Ariha, Idleb and Kafr Nobol sub-districts, to ensure delivery of life-saving and life-sustaining health services.

WHO provided four trucks of medicines and supplies that are sufficient for 188,200 treatments to be distributed across 70 health facilities. UNFPA provided in Afrin district with the following items: 32 productive health kits, enough for 2,200 pregnancies; 1,200 dignity kits (700 female dignity kit, 500 male dignity kit) and 2,000 sanitary napkins.

Cluster partners of Turkey hub are present in 09 governorates, 31 districts, 81 sub-districts and 225 communities in northern Syria providing support to 382 health care facilities, including 76 mobile clinics

As of January, 54 primary health care facilities are providing services of expanded programme of routine immunization

Find out more

https://www.facebook.com/healthclusterturkeyhub
In January 2018, 28 verified incidents of violence against health care infrastructure were reported.

Monitoring of violence against health care

In January 2018, 31 incidents of violence against health care were reported. Of these, 28 have been verified and three still being verified. Among the verified attacks, 12 incidents were reported on hospitals. The location of the attacks is, seven in Idleb, three in Hama, and one incident in each of each governorate of Rural Damascus and Aleppo. One of the hospitals attacked is a mental specialized hospital in Aleppo (Azaz), resulting in the killing of one patient and injuring twelve. Nine incidents were reported on primary health centers, of them six in Idleb, two in Rural Damascus, and one in Aleppo governorate. Blood bank was targeted in Idleb (Sarqeb), resulting in the infrastructure and equipment damages. Three other incidents were reported in Idleb on ambulatory system and first aid point resulted in the killing of three health workers.

In January 2018, 28 verified incidents of violence against health care infrastructure were reported. For more details, see the Monitoring violence against health care, January report, 2018.

Capacity building

During January 2018, Health Cluster partners have trained a total of 33 health staff in diverse topics.

Plans for future response

The Health Cluster response priorities for next three months are:

1. To conduct a round of Oral Polio Vaccine campaigns and one round of measles rubella vaccination campaign.

2. To strengthen routine immunization by opening new fixed immunization centers in Idleb and Aleppo.

3. To mobilize funds for Idleb and East Ghouta

4. To reinforce capacity of existing health facilities to absorb additional case load.

5. To maintain disease surveillance system - EWARS

6. To ensure availability of medicines, medical supplies, trauma kits etc.

Non Communicable diseases

NCD/PEN Monitoring Team visited 12 PHCs in northern Syria and used PEN Monitoring Tool.

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