

Highlights

- WHO and health partners are expanding the existing disease early warning system inside the Syrian Arab Republic and establishing similar systems in all countries affected by the crisis in order to detect and rapidly respond to potential epidemics, especially during the coming summer months. Additional activities planned with partners include training of first-line responders, pre-positioning medicines and medical supplies, and ensuring sufficient laboratory capacity to identify infectious diseases, and implementing a summer outbreak containment plan.
- From 14 April to 18 May, Syria's disease early warning system reported 2568 cases of acute diarrhoea.
- Courses on management of diarrhoea in complex emergencies, and the provision of supplies by WHO and partners, have resulted in a significant decrease in the number of cases of diarrhoea in Domiz camp, Iraq.
- 130 cases of diarrhoea have been confirmed in Al Zaatari camp, Jordan from 25 May. Efforts to strengthen the Ministry of Health's active communicable disease surveillance through the early warning and outbreak response network (EWARN) are under way.
- Jordan's Minister of Health met with donors in Geneva on 21 May 2013 to discuss the impact of Syrian refugees on Jordan's health sector and reported shortages in several areas, including vaccines and medicines stocks, medical and surgical supplies, particularly for trauma surgeries and chronic diseases such as diabetes, renal failure, hypertension, cancer and cardiovascular conditions.

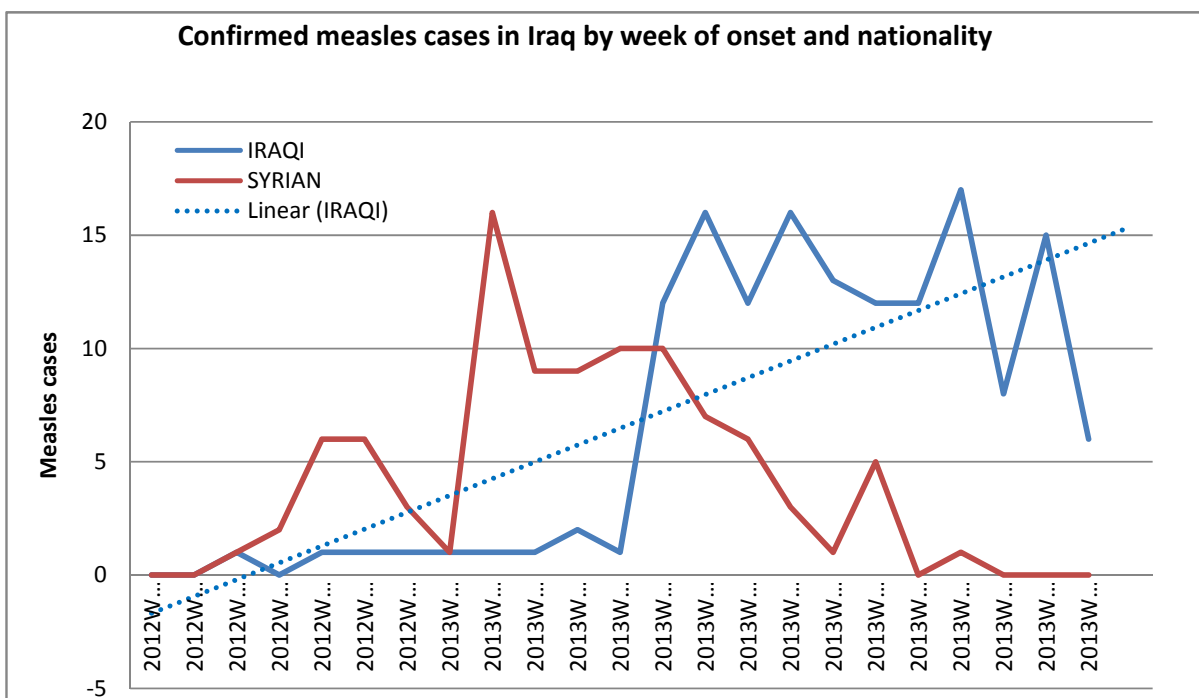
Health situation

Syrian Arab Republic

- Out of a total of 89 hospitals across the country, 33 (37%) are out of service. Similarly, out of a total of 1919 health centres around the country, 146 (8%) are out of service.
- 169 out of 520 ambulances are out of service, and 172 vaccination/supply vehicles have been stolen.
- Since 1 January 2013, the number of laboratory-confirmed measles cases in Syrian Arab Republic reached 218 (compared to zero cases in 2010 and 2011). 71% of those diagnosed were not vaccinated. The highest number of cases was reported in Tartous governorate (most probably due to the functioning surveillance system). The most affected age group was children 1–4 years of age.
- From 14 April to 18 May, Syria's disease early warning system reported 2568 cases of acute diarrhoea. WHO continues to closely monitor trends and indications of outbreaks, particularly as summer approaches. To strengthen current capacity, WHO is reinforcing monitoring by working with partners to establish a system to assess water quality, helping to predict risk of waterborne disease outbreaks, and enhancing preparedness through stockpiling medicines, supplies and laboratory kits.
- From 14 April to 18 May, 1047 cases of leishmaniasis were reported, with 61% of the cases in Aleppo governorate, where the disease was endemic prior to the crisis. As the disease spreads to other areas, 36 new cases have been reported among internally displaced persons in Tartous (15 cases reported in week 19).

Iraq

- Cases of diarrhoea are prevalent in Domiz camp as a result of unsanitary living conditions. However, courses on management of diarrhoea in complex emergencies, and the provision of supplies by WHO and partners have resulted in a significant decrease in the number of cases.
- Cases of measles are dramatically decreasing as a result of response measures by the Ministry of Health, WHO and UNICEF, including vaccinating all Syrian refugees below 15 years of age at the crossing points, vaccinating 3305 Iraqis living in proximity to Syrian refugees, and enhancing surveillance.



Jordan

- The United Nations Office of the High Commissioner for Refugees (UNHCR) estimates that the total number of Syrians in Jordan is expected to exceed 1 million by December 2013, placing additional stress on Jordan's already overwhelmed health sector. The Ministry of Health has reported shortages of medicines, vaccines, and medical and surgical supplies, particularly for trauma surgery and chronic diseases such as diabetes, renal failure, hypertension, cancer and cardiovascular conditions. With more than 70% of refugees living outside the camps, epidemiological surveillance, environmental sanitation, food safety and other public health control and management measures led by the Ministry of Health are being severely strained.
- More than 320 governmental health facilities are operating at full capacity in Irbid, Mafrqa, Zarqa, Ajloun, Jerash, Balqa and Amman in addition to several nongovernmental organizations clinics that also serve refugees outside camps. Ministry of Health and WHO missions report that public health services and health workers are extremely overwhelmed outside the camps, particularly in Irbid, Mafrqa, Zarqa, Jerash, Ajloun, Balqa and Amman.
- From 1 January until 31 March 2013 alone, the Ministry of Health reports that almost 50 000 Syrian refugees were served at its facilities in Jordan with the number of Syrian patients requiring surgical care doubling from January to February and then tripling by the end of March, signifying both the higher morbidity among newly arrived Syrians as well as the massive service load posed upon Ministry of Health facilities and workers.

- The Ministry reports that as of mid-April, 12 out of the 16 available neonatal incubators in Mafraq hospital are occupied by Syrian neonates.
- Jordanian patients are experiencing longer waiting times and are often turned back from scheduled elective surgeries as facilities are overwhelmed with emergency surgeries for Syrians.
- 54 cases of measles were reported among Syrians, Jordanians and Iraqis (of which 12 were inside Al Zaatari camp) and 49 cases of tuberculosis have been confirmed among Syrian refugees (since March 2012).
- 130 cases of diarrhoea were confirmed in Al Zaatari camp between 18 and 25 May. Accordingly, urgent efforts to strengthen the Ministry's active communicable disease surveillance through EWARN and robust outbreak response are under way, led by the Ministry of Health, with direct support from WHO, the Centers for Disease Control and Prevention (CDC) in Atlanta, UNHCR and UNICEF both inside and outside camps.

Lebanon

- A total of 138 cases of cutaneous leishmaniasis have been confirmed by the Ministry of Health.
- A total of 601 cases of measles cases have been reported in Lebanon up to 11 May 2013; 13% are Syrians. 70% of reported cases have been hospitalized.
- Immunization coverage is still considered to be suboptimal despite the completion of the first phase of the vaccination outreach activities. This is due to the increase of Syrian refugees into Lebanon leading to a readjustment of vaccination activities on a weekly basis.
- There is a significant shortage of chronic disease medications and primary health care medicines for neuro-psychiatric conditions and lice and scabies.

Health response

Syrian Arab Republic

- The fourth Vaccination Week was launched in April in the Eastern Mediterranean Region under the slogan "Stop Measles Now!" WHO supported the Ministry of Health in delivering vaccines to affected governorates. In March and April 2013, 978 259 children were vaccinated against MMR; 620 031 children were vaccinated against polio through two national campaigns in schools, internally-displaced persons (IDPs) shelters and health facilities.
- WHO, in collaboration with the Ministry, conducted training to build the capacity of doctors from eight governorates in the management of severe acute malnutrition. The prolonged unrest has resulted in growing food insecurity, limited access to potable water and inaccessibility to the health care services.
- WHO is supporting the Ministry of Health to further expand the EWARS, as well as procuring medicines for rapid response to outbreaks. WHO is also reinforcing the EWARS system by establishing a process for monitoring the water quality. This will help in predicting risks of waterborne disease outbreaks in different regions across the country.
- WHO has trained 90 nurses and medical doctors working in health facilities on classification and case management of diarrhoeal diseases among children under five.
- During the reporting period, WHO has provided to:
 - crossfire areas in Homs: emergency health kits for 30 000 beneficiaries for 3 months; diarrhoea kits for 1400 beneficiaries; lice/nits shampoo for 600 beneficiaries.
 - the Ministry of Higher Education: two ventilators for the intensive care burns unit at Almowasat hospital.
 - the Ministry of Health: life-saving medicines for 4000 beneficiaries.

- o health partners in Deir ez-Zor: interagency health kits for 20 000 beneficiaries; surgical kits for 100 surgical interventions; 5 midwife kits. In addition, life-saving and essential medicines were provided to treat more than 4100 beneficiaries.

Iraq

- WHO procured medicines including antibiotics, drugs for chronic diseases and life-saving illnesses to benefit 40 000 Syrians in Domiz camp and approximately 50 000 Syrians living outside the camp.
- A comprehensive package of essential health services is being provided to Syrian refugees in Domiz and Al-Qaim camps, through four Ministry of Health primary health care centres. Among the host population, the Ministry of Health of Kurdistan provides all the services to the Syrian refugees through government primary health care clinics and hospitals. All Syrian refugees are offered primary and secondary services free of charge along the same lines available to Iraqi population.
- A total of 13 437 consultations were carried out in one month in Domiz camp, which houses 40% of the Syrian refugees. In addition, there were 4321 consultations conducted in the two clinics in Al Qaim camp, which houses a population of 5000 refugees.
- WHO continues to provide medicines, training, and guidance on referral services its partner organizations and institutions such as the Ministry of Health. There is also a small clinic established by Médecins Sans Frontières (MSF)-Holland and equipped by WHO at the border crossing at Al Qaim which provides health services to the refugees stranded at the border.
- WHO trained 10 laboratory technicians from Dohuk, Sulaymaniyah and Erbil in the isolation of cholera from stool samples. Such trainings permit effective preparation for potential cholera/watery diarrhoea during the summer months.
- WHO organized a training workshop for a mass immunization campaign. Vaccinators from the Dohuk Department of Health and MSF were trained in vaccine storage and cold chain management, as well as other immunization techniques. The campaign started on 7 April for one week, three vaccination sites have been established in the camp, the target for the campaign is around 30 000 refugees.
- Other trainings included: mental health and psychosocial support workshop in Duhok to capacitate health care providers in diagnosis and management at primary healthcare level (35 persons were trained from the Ministry of Health, UN agencies and nongovernmental organizations), and training on epidemic diarrhoeal diseases preparedness and response, which included participants from three Kurdistan Regional Governorate governorates, Baghdad and Al-Qaim camp and Ramadi (the areas most affected by Syrian refugees' emergencies). Additionally, a total of 42 physicians, nurses and paramedics from the Ministry of Health, MSF-Switzerland, Save the Children (US), UNICEF, UNHCR and ACTD were trained on EWARNs.

Jordan

- In April, the Ministry of Health successfully led a rapid, massive measles, polio and vitamin A campaign inside Al-Zaatari camp. More than 60 000 Syrians between 6 months and 30 years of age were vaccinated against measles, and more than 16 000 against polio. This campaign was planned and conducted jointly by the Ministry, WHO, UNICEF, UNHCR and Jordan University for Science and Technology in Irbid. Vaccination procedures for new arrivals were revised to ensure vaccinations of Syrians occurred prior to their entry into camps or host communities.
- WHO and CDC conducted training for 20 JUST staff on lot quality assurance monitoring (LQAM) for the vaccination campaign. WHO together with the Ministry of Health, CDC and UNICEF trained 125 Mafrqa Department of Health staff (vaccinators, logisticians, cold chain operators, and others) on campaign vaccination procedures, cold chain management and other immunization techniques. It also trained

approximately 75 Syrian volunteers on the best practices of vaccine campaign procedures, management and coordination. Involvement of the Syrian refugees as volunteers offered a rare opportunity improving community awareness, engagement and participation in managing camp public health challenges.

- In response to 130 cases of diarrhea confirmed in Al Zaatari camp between 18 May and 25 May, urgent efforts to strengthen MOH's active communicable disease surveillance through Early Warning (EWARN) and robust outbreak response are under way, led by the Ministry of Health, with direct support from WHO, US CDC, UNHCR and UNICEF both inside and outside camps.
- Two refresher trainings for the Mental Health GAP Action Programme were conducted by WHO and the Ministry. This training targeted 40 public sector primary health care workers from Ramtha, Mafraq and Irbid.

Lebanon

- Approximately 15 000 consultations are being provided at primary health care centres per month for registered Syrian refugees. An equal number is estimated for unregistered Syrians.
- The second phase of vaccination against polio and measles has been launched. It targets both displaced Syrians and Lebanese children. It will focus on Beqaa and the south, and some locations in the north. The second phase aims at reaching approximately 400 000 children in the coming three months.
- 11 leishmaniasis referral clinics are now fully operational across the country. WHO has supported in provision of Glucantime, medical equipment, technical support for the development of treatment protocols, and awareness material, to ensure leishmaniasis cases are adequately detected and treated. The reporting system has also been upgraded to include leishmaniasis in the surveillance reporting mechanisms.
- A total of 15 public health care centres are subcontracted by UNHCR/ International Medical Corps (IMC) to provide services to displaced Syrians across the country. An additional 16 centres within the Ministry of Public Health public health care centres network are providing services to Syrians across the country.
- 12 hospitals (4 in the north and 8 in Bekaa) are providing services to Syrians with support from UNHCR/IMC.
- Two mobile medical units supported by UNHCR/IMC continue to reach isolated locations, providing necessary medication, diagnostic services and consultations.
- WHO organized training on hazard management for 15 Syrian health staff. A total of 15 medical doctors and nurses working inside Syria received training on clinical case management for patients of high-risk hazards.

Coordination

Iraq

- The health working group in Irbil is headed by WHO, the Ministry of Health and UNHCR. In addition, the group draws its membership from UNICEF, UNHCR, World Food Programme (WFP) and MSF. This month's meeting was chaired by WHO and concluded that UNHCR, UNICEF and WHO will conduct a Joint Assessment Mission starting mid-June. Additionally, WHO and will implement EWARN in all areas where Syrian refugees reside, both inside and outside the camps.

Jordan

- WHO has activated a strategic partnership with JUST's Faculty of Nursing (a WHO collaborating centre), EMPHNET and CDC to provide joint technical support to the Ministry of Health in improving emergency public health preparedness and response to various communicable disease challenges. This technical support will

include improvement in assessing surveillance systems, introducing EWARN, improving outbreak response and providing training in emergency-related public health response aspects.

- WHO has opened its second sub-office in Irbid governorate. Chaired by the Ministry of Health and co-chaired by WHO and UNHCR, the first Irbid governorate coordination meeting took place.

Lebanon

- The WASH sub-working group is focusing on ensuring proper environmental measures are taken to control the transmission of leishmaniasis. The group recommended that municipalities should be trained on waste and garbage disposal techniques to improve sanitation and water access.
- In light of the coming summer months and the increasing risk of communicable diseases, a health-WASH task force has been created to develop a plan for the prevention of, and response to, waterborne diseases.

Donors and funding

Appeal document	Country of operations	Total requested by health sector US\$	Total requested by WHO US\$	Amount received by WHO (including pledges)** US\$	% of overall amount requested by WHO
Humanitarian Assistance Response Plan 2012	Syria	53 150 319	31 145 000	10 667 994	34%
Humanitarian Assistance Response Plan (1 January to 30 June 2013)	Syria	81 905 133	48 465 000	53 304 978	110%
Regional Response Plan 2012	Iraq	2 089 000	1 350 000	274 825	20%
	Jordan	15 625 999	2 650 000	848 341	32%
	Lebanon	6 613 440	400 000	149 800	37%
	Turkey	2 089 000	1 200 000	248 668	21%
Regional Response Plan 2013	Iraq	4 978 196	1 350 000	321 000	24%
	Jordan	30 403 752	4 000 000	6 967 502	174%
	Lebanon	18 492 775	576 000	3 131 612	544%
	Turkey		2 400 000	471 068	20%
	Egypt	2 504 590	-	107 000	
	Funds not yet allocated			3 446 465	

For more information, contact: WHO Emergency Support Team for the Syria Crisis emst@who.int WHO Syrian Arab Republic country office wrosyria@syr.emro.who.int WHO Jordan country office wrjor@jor.emro.who.int	 WHO Lebanon country office wroleb@leb.emro.who.int WHO Iraq country office wriraq@irq.emro.who.int WHO Egypt country office wregypt@egy.emro.who.int WHO Turkey country office whotur@un.org.tr
--	--