

HEALTH CLUSTER BULLETIN

June 2020



Fig.: SAMS – ICU for COVID-19 cases in newly opened Alziraa Hospital, Idleb.

Turkey Cross Border

Emergency type: complex emergency

Reporting period: 01.06.2020 to 30.06.2020



2.7 MILLION*
INTERNALLY DISPLACED
PEOPLE IN NWS

*out of 4.1M NWS population



2.8 MILLION
HEALTH PIN IN
NWS HNO 2020



3.6 MILLION
SYRIAN REFUGGES
IN TURKEY



17ATTACKS**
AGAINST HEALTH CARE
(**WOS JAN - JUNE 2020)

HIGHLIGHTS

- As of June 30th, Idleb laboratory reported around 1700 PCR COVID-19 samples tested in the NWS; all confirmed to be NEGATIVE.
- 14 June World Blood Donor Day NWS NGOs raised awareness about the global need for safe blood.
- 20 June World Refugee Day commemorated the 50th Anniversary of the 1951 Convention relating to the Status of Refugees. Turkey is the largest host country of registered refugees, with over 3.6 million Syrian refugees.
- HNAP 2020 Mid-Year Returnee Overview finalized covering January to June 2020's data on 275,111 returns to Syria. Most returns happened because of the dire economic situation in the place of displacement.
- On 25 June, Russian UN Ambassador Nebenzia officially announced its withdrawal from the UN-lead deconfliction mechanism in Syria, as a response to abuses of the system by "various 'opposition groups'¹.
- The European Union and the United Nations co-chaired the IV Brussels Conference on "Supporting the future of Syria and the region", which took place from 22 to 30 June 2020. The conference succeeded in mobilising aid to Syrians inside the country and in the neighbouring countries, including for hosting communities, through pledges totalling US\$5.5B (€4.9B) for 2020, and multi-year pledges of close to US\$2.2B for 2021.



124 NWS HEALTH CLUSTER MEMBERS
39 IMPLEMENTING PARTNERS REPORTING
MEDICINES DELIVERED²



506,600 TREATMENT COURSES FOR COMMON DISEASES

FUNCTIONAL HEALTH FACILITIES HERAMS



141 FUNCTIONING FIXED PRIMARY HEALTH CARE FACILITIES
59 FUNCTIONING HOSPITALS
70 MOBILE CLINICS

HEALTH SERVICES³

860,607 CONSULTATIONS
9,525 DELIVERIES ASSISTED BY A SKILLED ATTENDANT
16,771 REFERRALS
946,724 MEDICAL PROCEDURES
27,734 TRAUMA CASES SUPPORTED
1,681 NEW CONFLICT RELATED TRAUMA CASES

VACCINATION



9,642 CHILDREN AGED <1 VACCINATED⁴

MENTAL HEALTH SERVICES



8,116 MENTAL HEALTH CONSULTATIONS

DISEASE SURVEILLANCE



445 SENTINEL SITES REPORTING OUT OF A TOTAL OF 454

WOS HEALTH HRP & COVID-19 2020 FUNDING \$US⁵



HRP	RECEIVED	\$67 M (15% funded)
COVID19	IN 2020	\$32 M (21% funded)

¹ https://www.msn.com/en-xl/europe/top-stories/russia-quits-un-system-aimed-at-protecting-hospitals-aid-in-syria/ar-BB160E6N?li=BBKuHye&OCID=ems.display_welcomeexperience

² Supplies were cross border delivered by the WHO Gaziantep Hub and distributed to implementing health cluster partners in northwest Syria as of June 2020.

³ Figures reported and updates are from 1 – 30 June 2020.

⁴ Routine immunization with pentavalent vaccine (5 in 1 vaccine)

⁵ Source: OCHA Financial Tracking System, Syrian Arab Republic Humanitarian Response Plan (HRP 2020) as of June 2020. <https://fts.unocha.org/>

Situation Update:

The upcoming dateline of 10th July 2020 for the renewal or not of the UNSC Resolution 2504 marked the Health Cluster operations during the month of June. As a preventive measure, the Health Cluster partners and namely WHO as cluster lead agency significantly increased (see inserted figure) the cross-border provision of medicines and medical supplies to the impemeting NGO health partners into NW Syria; as to mitigate the effects of possible no extension of the cross border operations in order to fill critical livesavings gaps and continue the essential health care servcies in the coming months.

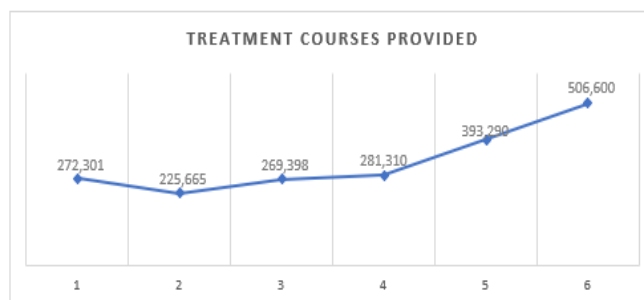


Fig. Cross-Border treatment courses provided Jan - Jun 2020

Through the adoption of resolutions 2165 (2014) and its subsequent renewals and up to the current resolution 2504 effective until 10 July 2020, the UN Security Council has authorized the UN agencies to use routes across conflict lines and the border crossings at Bab al-Salam, Bab al-Hawa, Al-Ramtha and Al Yarubiyah, to deliver humanitarian assistance, including medical and surgical supplies. Based on resolution 2504, Bab al-Salam, Bab al-Hawa are the only designated crossings for the UN agencies to provide humanitarian aid from Turkey in support the implementing partners for the people in need in northwest Syria.

Adding to the potential risk of a NO resolution renewal, on 25 June the Russian Federation announced no more participating in the Humanitarian Notification System (a.k.a. the deconfliction mechanism). Russia made the decision following an internal UN inquiry in April found it was "highly probable" the Syrian government or its allies carried out attacks on three healthcare facilities, a school and a refuge for children in NWS last year. Russian representatives asserted that humanitarian action will not be jeopardized and stressed that information concerning protected infrastructure such as hospitals and clinics should be communicated directly to the Government of Syria. According to the WHO Surveillance System for Attacks on Health Care (SSA), 17 attacks were reported during the ongoing year, this figure is a significant decrease when compare with 2019.

As for COVID-19, the overall preparedness and response is ongoing. During the month, the Health Cluster NWS COVID-19 Task Force and partners made significant efforts to scale up capacities and to provide health staff with the required knowledge and equipment to prepare and respond to severe cases. Surveillance and testing capacity remain low in the response. Testing will need to be further increased to ensure cases can be detected in a timely manner and at scale. By the end of June 1696 of samples from patients collected in NWS (664 Aleppo and 1032 Idleb) all tested negative, while Damascus had recorded 279 positive cases at 9 deaths in the government control areas. The taskforce continued to coordinate the application of relevant IPC measures across the NW including Points of Entry (PoEs). Plans are underway to provide to all health facilities staff with PPE material (masks and surgical gloves), and the ventilator capacity will be increased to support three active COVID-19 designated referral hospitals and in-planned ones.

Lastly, is worth to note that on the 20th of June the World Refugee Day was held globally, commemorating the 50th anniversary of the 1951 Convention relating to the Status of Refugees. The Syrian conflict is one of the world's largest refugee crisis. In Turkey, WHO in collaboration with the government and health partners under the Refugee Health Programme, Syrian doctors, nurses, bilingual patient guides are trained to serve Syrian refugees through the national health system to provide quality and affordable health services to the Syrian refugee population. Turkey hosts over 3.6 million registered Syrians under the temporary protection. Under the Law on Foreigners and International Protection (2013), asylum seekers and refugees have free access to medical services related to emergency care and communicable diseases. To cater for the needs in preventative and non-emergency health care services, MoH in Turkey has established a network of 180 health centres and employed more than a thousand refugee health care professionals to provide culturally and linguistically sensitive services to Syrian refugees. Yet, as IDPS in NW Syria, Syrian refugees in Turkey are likely to be more affected by the COVID-19 emergency. Syrians already face a wide-range of effects from displacement that impact their health, wellbeing and access to health services, and increasing mental health and psychosocial needs.

Public health risks, priorities, needs and gaps

- The insecurity, the protracted conflict, repeated displacement, socio-economic deterioration in addition to the latest catastrophic fall of the Syrian Pound vs. USD (the lowest ever) are contributing factors for the suffering of people in NWS. In addition to the aforementioned factors, COVID-19 pandemic is now adding new layers and establishing additional barriers through the restriction to move between districts, closure of services and delays in importing goods (including basic life needs);
- Seen the uncertain renewal of the UN resolution 2504 in 10 July 2020, it is crucial and vital to assure a buffer of non-communicable diseases (NCD) medicines and consumable are in NWS to serve at least for 6 months and to sustain essential health services for the people in need;
- While COVID-19 continues to be threat to NWS the NCD/ TB's patients continue to be considered out of the weakest to survive the virus if it hits NWS. "Public education on risk factors associated with NCD comorbidities, capacity building of doctors" is needed to assure the quality of NCD care, prevention and support for all NCD patients once COVID-19's cases surface.
- COVID-19 surveillance and testing capacity remain low in the response. Testing will need to be further increased to ensure cases can be detected in a timely manner and at scale. This will entail strengthening field level efforts vs. reopening the sentinel sites which have remained closed, training, etc.
- Some health facilities reported gaps in funds especially following the change made by many partners changing their usual activities to be under the preparedness plan for COVID-19.
- Functional Triage across health facilities managed by partners is a key area being coordinated under the COVID-19 Taskforce. Key highlights pointed to limited space issues at some of the health facilities as a reason the tents are not installed, or information gap on why the tents are being used or not used.
- Due to some delays (donor agreements, recruiting staff etc.), the work in the CCTC had been delayed and only 2 remain active till date (Idleb city and Kafr takareim).
- A thorough progress was shown in the last period in procurement of supplies under the preparedness and response plan (PRP) for COVID-19, however the need to secure Personal Protection Equipment (PPE) and Infection Protection and Control (IPC) measures remains crucial.
- In Q1 2020, there had been 132 suicide attempts/ self-harm reported, especially from IDPs living in very dire circumstances, which are the result of social needs.

Health Cluster Coordination and Service Delivery

Two virtual Health Cluster coordination meetings were held in June and the Health Cluster COVID-19 Task Force (TF) continue to meet twice per week to assure the implementation of preparedness and response plan (PRP) and the coordination with all stakeholders. The Health Cluster continue to welcome new members as a result of the broader impact and needs required from the COVID-19 response. The Health Cluster members' COVID-19 task force is revising their core membership composition, as to different phases of the response requires different expertise. As part of the response, an International Health Regulation (IHR 2005) orientation was given to the TF members and as well all clusters partners.

In addition to the COVID-19 response, the Health Cluster partners funding activities took a priority during the month of June. A Syria Cross-Border Humanitarian Fund 1st Standard Allocation (SCHF SA1-20) which was launched on May, required all projects revision and approvals to be completed during the month. The allocation has been designed to address both urgent and long-term needs through immediate and slightly longer-term interventions to respond to high vulnerability level of a large part of the population living in northwest Syria. This allocation was significant as it could mark the end of OCHA as the manager of the Turkey hub common pooled fund is the UNSCR 2504 was not extended beyond the dateline of July 10th. The Health Cluster formed as per practice, a Strategic Review Committee (SRC) and finalized the scoring and reviewing of all the submitted health proposal. The SRC final recommendations to the SCHF was an estimated enveloped for 10.4M USD in gap filling projects.

In 2019, the OCHA Gaziantep managed SCHF reported a record amount of \$134.7 million contributed by twelve donors, which is the largest amount provided in a single year to the SCHF. For the second year in a row, the Fund ranked as the second largest Country Based Pooled Fund (CBPF) in the world. In the beginning of 2020, the SCHF ranks the first in terms of contributions received and funds allocated.

After the end of Ramadan and the Bayram/Eid al-Fitr holidays in May 2020, during which the health outpatient department (OPD) consultations (in attendance and reporting) generally decreased. As seen in below graph, in June the partners reported a significant increase in healthcare delivery, with a 42% increase in OPD consultations. While, compared to first quarter of the year, in the second quarter, there were 2% less OPD consultations reported.

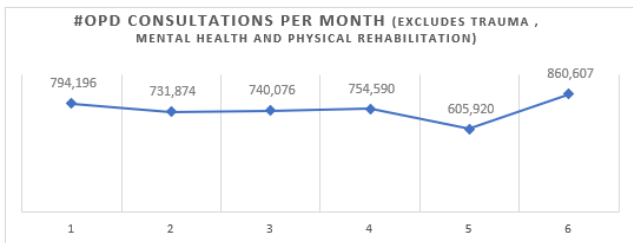


Fig.# OPD consultations per month Jan-Jun 2020

Another welcome and significant increase was seen in the routine immunization services. This could be attributed to many factors, but the main would be the post Ramadan month rise which happens every year. As there is around 7-10 days of celebrations in Ramadan parents tend to postpone the vaccination of their children to after the festivities. It is expected that the same behaviour will happen during Eid Ul-Adha (Bayram) holidays in August.

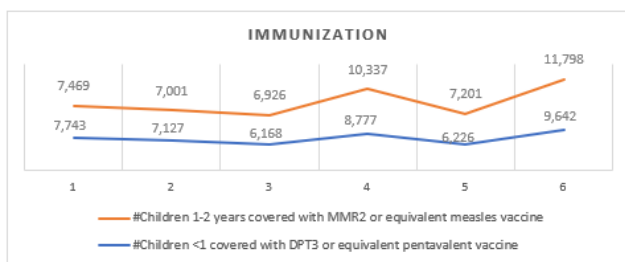


Fig. EPI monthly services in NWS Syria.

The Medical Referrals inside Syria continues to significantly increase (-see below graph), and this month by 17% compared to previous month. While compared to first quarter, in the second quarter there was an increase in referrals by 33%.

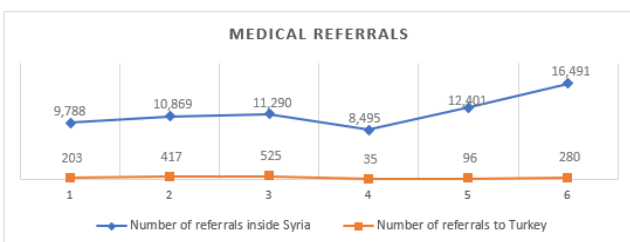
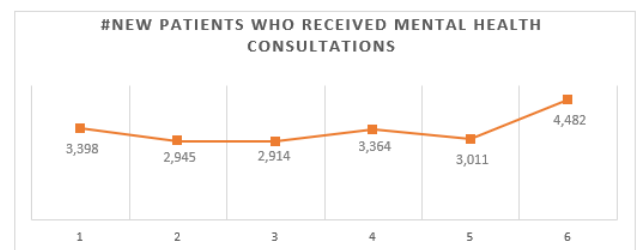


Fig. # Medical referrals in and outside NWS Jan-Jun 2020

Regarding referrals to Turkey, there was also an increase of 191% from the previous month. While compared to first quarter, in the second quarter there was a decrease of 64%. These fluctuations in referrals are a direct result of the Turkey border closure as part of the COVID-19 mitigation restrictions been implemented by the border authorities.

During June, the number of new patients who were provided mental health consultations increased by 49%, compared to previous month. While compared to first quarter of the year, in the second quarter, there was a 17% in such patients who received mental health consultations. Consultations provided so far this year, already approach 75% such consultations provided in the previous year



The marked increase seems to be multi-factorial, could be due to the recent mhGAP training in May for the 163 PHC doctors on the new mhGAP version training on mhGAP, and the mhGAP field supervision being done since June 2020 for 6 months. The supervision is being provided by two overall mhGAP supervisors (Psychiatrists and mhGAP trainers) and with 7 mhGAP field supervisors (4 for Idlib and 3 for Afrin-Azzaz-Al Bab and Jarablus). Juts for the month of June a total of 100 field supervision visits were done by the mhGAP field supervisions.

The other reasons could be the improving partnership between the 163 mhGAP-trained doctors and the 306 PSWs, plus the good integration happening now of MHPSS into the Primary Health Care.

In addition, as well is the result the of the MHPSS training conducted with community leaders (Imams, local councils, youth and women's leaders) whom we trained on PFA on COVID-19 and Self Care where we also trained them on simple Detect and Refer. WHO trained 496 community leaders plus the 500 community leaders trained by SIMRO for a total of 996 community leaders. The trainers here were senior psychologists who were working on MHPSS Programs inside NW Syria.

Health Cluster Technical Working Groups and Partners Updates

Turkish Red Crescent (Kizilay) founded on 11 June 1868 as Society for Aiding Wounded and Ailing Ottoman Soldiers celebrated its 151st anniversary. Kizilay is the largest humanitarian organization in Turkey, with an international network through which it provides relief to other nations in need. Over the years it has been called the Ottoman Red Crescent Society (1877), Turkey's Red Crescent Community (1923), Turkish Red Crescent Community (1935), and finally, Turkish Red Crescent Society (TRCS 1947).

The name Kizilay (red crescent moon) was given to the institution by Mustafa Kemal Ataturk, founder of the Turkish Republic. The Society's logo, a red crescent facing left against a white background, is "the accepted protective and defining symbol for the medical services of armed forces in times of war, as well as for individuals and institutions," says Kizilay's official website. Kizilay's symbol cannot be used by any other individuals or institutions as it symbolizes immunity and neutrality during wartime. Kizilay is also active in providing disaster management, blood donations, healthcare, first aid, international aid, and immigration and refugee services. "Providing aid for needy and defenceless people in disasters and normal periods as a proactive organization, developing cooperation in society, providing safe blood supplies, and reducing vulnerability," is Kizilay's mission, according to their website <https://www.kizilay.org.tr>.

Kizilay provides unconditional aid and non-profit, volunteer-based social services, and is a corporate body governed by special legal provisions. Kizilay strives to be "a model in humanitarian aid service in Turkey and in the world ... with people in their hardest times," the website added.

MENTOR Initiative (MI) is providing Leishmaniasis support to 56 health facilities: 24 in Idlib governorate and 32 in the northern Aleppo countryside. In addition, to four Leishmaniasis mobile treatment clinics servicing 36 communities in Harim, Afrin and Azaz districts. 26,713 treatment consultations were conducted during June.

As of mid-year, there was 32 visceral leishmaniasis (VL) cases diagnosed in NWS when in the full 2019 there had been 22 cases and in 2018 a total of 20 cases.

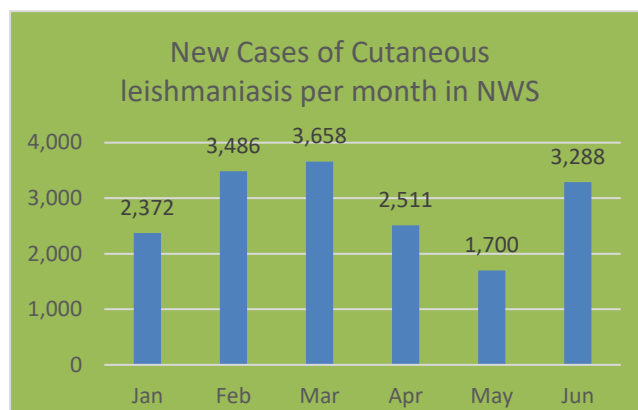


Fig. New cases of CL diagnosed in NWS per month in 2020. @MI

Mentor reported an increase of 193 % compared to the month of May recording 3,288 new cases (above fig.) of cutaneous leishmaniasis (CL) out of which 66% are children. There is a very critical need to expand the services and the capacity with relevant preventive and curative measures for successful results as seen in below picture.



Fig: MENTOR Initiative- CL before, during and after treatment in Idlib Governorate

Social Development International (SDI) is applying infection and prevention control measures in in all SDI supported health care facilities in line with the WHO and global recommendations in order to prevent risk of COVID-19.

In Al-Hakeem PHC center (level 3) in Afrin, a total of 4,171 medical consultations were provided to 2,537 beneficiaries, in addition to 4,964 lab services. Another 5,598 consultations were provided in Save the Soul Hospital for Maternal and Child health in Salqin. The hospital performed 355 vaginal and C-sections deliveries and 10,243 medical services, including laboratory, MHPSS and nutrition consultations. Harim General Hospital in Idlib, provided 4,569 medical consultations, including 695 trauma consultations, 58 major surgeries and 8,983 general health services to 3,297 beneficiaries.

SDI supports two physical rehabilitation centers (Swasia Orthotic & Prosthetics & Physiotherapy Center in Afrin and Tal Abiad Center for physical rehabilitation) which provided services for 156 patients and delivered 144 assistive devices. In addition, 983 physical therapy sessions for 351 patients and 194 mental health sessions for 138 beneficiaries were conducted.

In Afrin, the blood bank provided 1,335 blood units and other blood components for the patients in Afrin' health facilities. Therefore, in the **Global Blood Donation Day (14 June 2020)**, a blood donation campaign was organized in 4 main points in Afrin, Harem and Salqin and 400 blood units were collected. Awareness messages about COVID-19 and prevention measures as well the importance of blood donation was raised by the CHWS during the campaign with distribution of hygiene kits.



Fig: SDI - Global Blood Donation Day- Awareness sessions material during the campaign

Lastly, SDI is operating two mobile clinics covering 10 communities in Salqin subdistrict. In June, about 2,173 beneficiaries were consulted (1,006 medical consultations) in addition to 2,127 health and nutrition services including MHPSS. The CHWs teams recorded 435 households visit.

Medical Education Council (MEC) continues providing physical rehabilitation therapy services in the academic center for physical therapy located in Sarmada -Idleb. Despite the lack of auxiliary tools, 26 items were provided to beneficiaries such as walkers, crutches and wheelchairs.

The center is considering the cultural barriers that why there are female and male staff serving the beneficiaries with special measures implemented lately for COVID-19.

MEC 7 physical therapists examined 57 new patients and provided in total 447 sessions (new & follow-up).



Fig: MEC- Physiotherapy session for family members in the "Academic Centre for physiotherapy" in Sarmada.

Relief Expert Association (REA-UDER) supports two PHCs in Sarmada and Termanin. In June, provided 12,987 total consultations: 50% are communicable diseases followed by reproductive health (18%), non-communicable diseases (13%), dental health (11%) and 7% emergency cases.

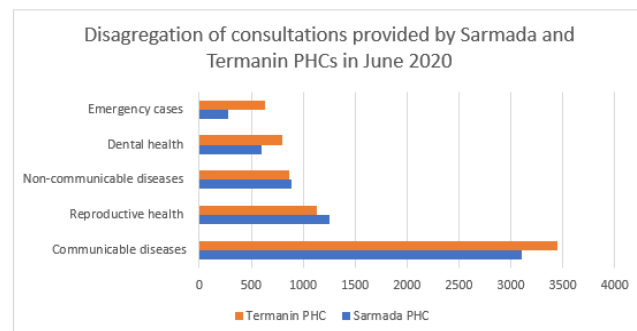


Fig: UDER – PHCs disaggregation of consultations provided in June 2020.

The most common CDs reported were respiratory infections: URTI 18.4% and LRTI 12.3%. For NCDs, the most common cases were hypertension and diabetes, which represented 5.95% and 3.97%, respectively. In Reproductive Health, ANC visits represented 31% of all RH visits, while the percentages of family planning and PNC visits were 19% and 6%, respectively.

In both facilities, staff was trained on COVID-19 infection, prevention & control (IPC) measures and triage management preventive measures applied.



Fig. REA COVID-19 triage tent in Termanin PHC.

Al-Resala Foundation (RF) through its 2 PHCs in Al Resala camp in Afrin and the 2 mobile clinics in Dana (Al Manarah camp), Bulbul and Sharan sub-districts, is serving IDPs and host communities. In June, medical



& reproductive health services, in addition to physical rehabilitation, health promotion and immunization services were delivered with rigorous application of IPC measures (-see pic Al-Resala Afrin PHC)

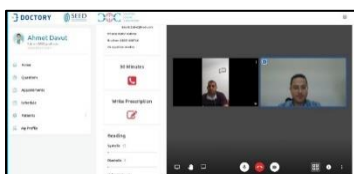
The NGO seven dialysis centers are providing life-saving services in Darkosh, Shafak, Kafr Tkharrim, Ibn Sina, Bab Al Hawa, Qah and Armanaz. On MHPSS 2-day training on psychological first aid (PFA) held for Community Health Workers (CHWs) who are in direct contact with IDPs in Aleppo and Idleb. Ninety-nine (99) participants attended from 4 health partners, 20 males and 79 females.

Al Seeraj via its PHC in Bab al-Hawa camp, Al-Seeraj PHC in Darbasiyah, Afrin's PHC, Muhambel PHC (new) and the Tele-Microbiology Laboratory about 9,200 IDPs and host community beneficiaries were served. Around 13,850 consultations were provided in June while the thalassemia project served 52 patients with fully treatment procedure package.



Fig: Al Seeraj – Tele microbiology lab in Idleb

Sustainability Empowerment and Economic Development (SEED) Foundation continues to collaborate with health partners in order to integrate the telemedicine in the daily routine during the time of COVID-19.



collaborate with health partners in order to integrate the telemedicine in the daily routine during the time of COVID-19.

In June there had been an increase in number of consultations (- pic screenshot of tele consultation).

SEED compared data from prior month shows the number of consultations in June increased to 148 cases when it was 75 in May. The percentage of children consulted is 28%, compare with 72% adults. The higher rate of consultations is for ENT conditions, skin diseases and neurological disorders

BALSAM is applying IPC measures against COVID-19 in its prosthetic center. In June, there had been 12 beneficiaries who received prosthesis, 5 received orthoses, 23 accessed the orthopaedic consultations and 44 received physical rehabilitation sessions.



Fig: BALSAM - lady with lower limb amputation during preparation to receive prosthesis.

Syrian American Medical Society (SAMS) launched a new service in Alziraa Hospital in Idleb city. The hospital is a dedicated isolation and treatment facility in Idleb for suspected and confirmed COVID-19 cases. It will provide specialized intensive care for highly suspected / confirmed COVID-19 patients through trained staff on IPC and case management.

The COVID-19 dedicated health facility include 10 ICU beds, 10 ward beds, 5 recovery beds, a medical laboratory and radiology departments; in addition to two dialysis machines.



Fig: Al Zira'a Hospital ICU staff and ventilator for COVID-19 patients. @SAMS

Sexual and Reproductive Health (SRH) TWG: a service mapping done in June for all SRH services in North West Syria. The mapping showed 174 health facilities including PHC's offering outpatient SRH consultations. Out of the 174 health facilities, 33 are BEmOC's while 37 are CEmOC.

50,000 patient (medical passport) cards printed by **UNFPA** will be distributed to 65 of the supported health facilities in the initial phase, including PHC's offering SRH services (13,200 copies will be distributed to BEmONC facilities while 36,800 copies will be distributed to CEmONC facilities). In addition, 4,035 copies of different RH protocols were printed for distribution.

The IEC materials printed by **Save the Children** 19,950 copies of each 14 different IEC in leaflet form (279,300 pieces) and 340 pieces of flip charts will be distributed to 27 partners.

The maternal mortality monitoring tool developed through the SRH TWG was launched in February of 2020 as a continuous process. In May 2020, 13 partners (51 facilities and 4 mobile clinics) sent their data, one maternal death reported. The case was reviewed, and recommendations given on the way to improve to prevent a similar case from reoccurring; in June no maternal deaths were reported.

Reproductive Health Kits distribution plan was finalized for 361 kits and 49,000 bulk family planning items including 20,000 IUDs and 4,000 male condoms which approximately covers a population of 500,000 in 3 months sent to **SEMA** who will distribute to 166 health facilities including mobile clinics in NW Syria.

NWS COVID-19 Task Force (TF)

As part of the NWS COVID-19 Preparedness and Response Plan (PRP) and with the funding support of the SCHF allocation for COVID-19, the Turkish Red Crescent Society (**TRCS**) facilitated the procurement and distribution of urgent needed supplies such as PPEs, and 35 Turkish-made ventilators to be distributed to designated COVID-19 Intensive Care Unit (ICU) hospitals assigned for severe cases management.

The TF continues to coordinate actions to activate planned COVID-19 Community Treatment Centres (CCTCs), which have seen delays in starting operations (due to reasons ranging from location changes, funding delays, human resources recruitments).



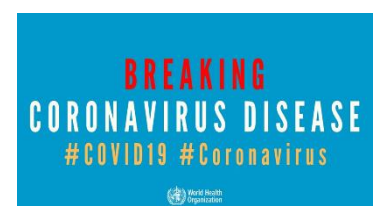
On behalf of the COVID-19 TF, the RCCE group issued advisory messages on the public use of fabric facemasks and on the necessity of the continued application of COVID-19 preventive measures were finalized vis-à-vis the perceived disregard shown by the community for preventive measures and the non-believe in the non-presence of the corona virus, as no positive cases have been confirmed. The messages were distributed to the awareness-raising teams to be shared with community members and were posted on telegram groups.

The Coronavirus Awareness Team (CAT) is working on an enhanced digital communication strategy. Health cluster members reported utilizing awareness workers to reach estimated 20,000 beneficiaries with different awareness-raising activities, 459 NGO workers participated in related trainings. Clusters have collaboratively distributed 720,000 food parcels with soap, including 420,000 with COVID-19 stickers, instead of the in-person distribution of brochures.

As of end of June, out of 13 cross-border/cross-line entry points, seven points of entry (PoE) are partially open and have measures in place to screen travellers, suspect and refer cases. More human resources added to the 7 Points of Entry (PoEs) in addition to vehicles for referrals, equipment and PPEs. The crossline POEs in Abu Zending, Um Jloud and Saraqeb were closed due to national public school' exams taking place this month which can lead to a significant movement of students. Two mobile teams to screen travellers and refer suspected cases in case opened were identify.

As of 1 June 2020, all newly diagnosed tuberculosis patients are being cross-tested for COVID-19;

in case of any transmission, all lab-confirmed COVID-19 cases will also be tested for tuberculosis.



World Health Organization (WHO) supported hospitals in the provision of secondary and tertiary health care services to 29,174 beneficiaries, which included 27,382 outpatient medical consultations and treatments and 488 normal deliveries provided by skilled birth attendants. In addition, 1,304 trauma and surgical care consultations and interventions were provided.

Four-teen truckloads of medical supplies including essential medicines for primary care and specialized kits for non-communicable diseases to serve an estimated 750,000 population for 3 months. In addition, specialized health kits were provided to serve 7,200 trauma and surgical interventions.



ATTACKS ON HEALTH CARE Prevent · Protect · Provide

Monitoring of violence against health care

In Syria, as of mid-year 17 attacks are been reported by cluster partners. These attacks caused 10 deaths and 36 Injured, of which 5 were health care providers.

Since the beginning of the COVID-19 pandemic, attacks on health care have been noted across the world despite an overwhelming support for the response. As of June 2020, the WHO Surveillance System for Attacks on Health Care captured 94 incidents in 11 countries experiencing complex humanitarian emergencies.

In addition, secondary sources have reported over 200 incidents directly related to the COVID-19 response in 35 countries across the world.

In order to support and protect COVID-19 frontline health workers during the response, dedicated psychosocial support helplines are been establish.

التغلب على الشعور بالقلق الناجم عن فاشية مرض فيروس كورونا-2019 (كوفيد-19)

منظمة الصحة العالمية
المكتب الإقليمي للشرق المتوسط

من الطبيعي الشعور بالحنين أو القلق أو الارتباك أو الخوف أو الغضب أثناء الأزمات. يساعد التحدث مع أشخاص تثق بهم على التغلب من هذه المشاعر. فحافظ على التواصل مع أصدقائك وأسرتك.

إذا كان لزاماً عليك البقاء في المنزل، فاتباع أسلوب حياة صحياً - تناول طعاماً صحياً، واحصل على قسط جيد من النوم، وممارسة التمارين الرياضية، وتواصل مع أحبائك الموجودين معك في المنزل، ومع الآخرين من أفراد عائلتك وأصدقائك عبر البريد الإلكتروني والهاتف.

امتنع عن التدخين أو شرب الكحوليات أو تعاطي المخدرات ولا تستخدمها وسيلة في التغلب على المشاعر السلبية. إذا اجتاحتك مشاعر يصعب عليك التحكم فيها، فتحدث إلى أحد العاملين أو المرشدين الصحيين. وجهز خطة، وحدد أين تذهب وكيف تلتزم المساعدة لتلبي احتياجاتك الصحية الجسدية والنفسية عند الإقضاء.

ابحث عن الحقائق. واجمع المعلومات التي تساعدك على تحديد الخطر الذي تتعرض إليه بدقة، حتى يمكنك اتخاذ الاحتياطات المطلوبة. وابحث عن مصدر موثوق، مثل الموقع الإلكتروني لمنظمة الصحة العالمية، أو إحدى الهيئات المحلية أو الحكومية للصحة العامة.

تغلب على شعورك بالقلق والهباج بالتقليل من الوقت الذي تقضيه أنت وأسرتك في مشاهدة التغطية الإعلامية التي تسبب لك إزعاجاً أو الاستماع إليها.

استجمع مهاراتك التي ساعدتك على إدارة الشدائد التي مرتت بها في الماضي، واستخدمها في إدارة مشاعرك في هذه الأوقات الصعبة بسبب الفاشية.

World Health Organization

Coping with stress during the 2019-nCoV outbreak

It is normal to feel sad, stressed, confused, scared or angry during a crisis. Talking to people you trust can help. Contact your friends and family.

If you must stay at home, maintain a healthy lifestyle - including proper diet, sleep, exercise and social contacts with loved ones at home and by email and phone with other family and friends.

Don't use smoking, alcohol or other drugs to deal with your emotions. If you feel overwhelmed, talk to a health worker or counsellor. Have a plan, where to go to and how to seek help for physical and mental health needs if required.

Get the facts. Gather information that will help you accurately determine your risk so that you can take reasonable precautions. Find a credible source you can trust such as WHO website or, a local or state public health agency.

Limit worry and agitation by lessening the time you and your family spend watching or listening to media coverage that you perceive as upsetting.

Draw on skills you have used in the past that have helped you to manage previous life's adversities and use those skills to help you manage your emotions during the challenging time of this outbreak.

Plans for future response: events & dates

- Health Cluster meetings | July 2, 16 and 30 (tbc)
- UNSC Resolution 2504 end date | 10 July 2020
- Eid el-Adha / Kurban Bayramı | 31 Jul - 3 Aug

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