



# SYRIA CRISIS

## Turkey update:

- Refugee Health Programme
- Cross-border operations



Hundreds of Syrian health staff were trained on how to respond to the increasing mental health needs among the refugee population. Trainees like the Syrian nurse in the picture learnt the basics on how to screen, diagnose and treat conditions such as depression, anxiety or post-traumatic stress disorder. Photo: WHO/Ali Saltan

### DURING THE REPORTING PERIOD

TURKEY



3.5 MILLION REFUGEES WERE LIVING IN TURKEY



105 000 HEALTH CONSULTATIONS WERE PROVIDED TO SYRIANS IN REFUGEE HEALTH TRAINING CENTRES

NORTHERN SYRIA



3.7 MILLION PEOPLE WERE IN NEED OF HEALTH CARE<sup>1</sup>



THERE WERE 2.3 MILLION INTERNALLY DISPLACED PEOPLE<sup>1</sup>



67 ATTACKS ON HEALTH CARE FACILITIES WERE VERIFIED

### KEY FIGURES

REFUGEE HEALTH PROGRAMME IN TURKEY	
12	WHO HEALTH EMERGENCY STAFF
70	HEALTH SECTOR WORKING GROUP PARTNERS (INCLUDING DONORS)
3.5 MILLION	REFUGEE POPULATION
7	WHO-SUPPORTED REFUGEE HEALTH TRAINING CENTRES
62%	FUNDED OPERATIONS IN 2018 (%)
21 300 000	US\$ REQUESTED FOR OPERATIONS
CROSS-BORDER OPERATIONS IN NORTHERN SYRIA	
22	WHO HEALTH EMERGENCY STAFF
82	HEALTH CLUSTER PARTNERS
4.6 MILLION	ESTIMATED POPULATION
438	HEALTH FACILITIES SUPPORTED BY WHO PARTNERS
82	FUNCTIONING HOSPITALS SUPPORTED BY WHO PARTNERS
22%	FUNDED OPERATIONS IN 2018 (%)
43 500 000	US\$ REQUESTED FOR OPERATIONS

### HIGHLIGHTS

*Under the whole-of-Syria approach, WHO and its health partners provide medical services to Syrian refugees in Turkey and to populations in northern Syria from Turkey.*

#### Refugee Health programme

- More than 470 Syrian and Turkish health workers were trained in mental health and psychosocial support and in the prevention of gender-based violence. More than 40 Turkish-Arabic translators were trained to serve as patient guides in refugee health training centres, refugee health centres and other facilities across Turkey.
- More than 105 000 culturally and linguistically-sensitive health consultations were provided free in the seven WHO-supported refugee health training centres in Turkey.

#### Cross-border operations

- From mid-December 2017 to the end of January 2018, more than 270 000 people were internally displaced to camps in Idlib as a result of hostilities in northern Syria. In February, airstrikes were also reported to have killed civilians and affected hundreds of thousands of people in eastern Ghouta. WHO coordinated the health response to ensure that people had access to essential, life-saving health care services.
- WHO and health partners delivered drugs and medical supplies, shipping 342 395 treatments<sup>2</sup> to a total value of US\$ 815 878.
- In 67 verified incidents against health care facilities, 52 people were killed and 120 injured, including eight health workers killed and 26 injured.

<sup>1</sup> Health Cluster estimate based on Humanitarian Needs Overview 2017.

<sup>2</sup> One standard treatment course (such as an eight-day course of antibiotics) is considered as treatment for one person.

## Refugee Health Programme

### Health needs, priorities and gaps

- Language and cultural barriers remain a major obstacle to the provision of health care services for Syrian refugees, especially at secondary and tertiary levels.
- The mental and psychological consequences of conflict and displacement among refugee populations represent heavy burdens on refugees' health and household expenditure.

### Action by WHO and the health sector

#### *Leadership and partner coordination*

- WHO continued to be the leading agency of the Health Sector Working Group and the mental health and psychosocial support sub-working group involved in the refugee health response in Turkey.

#### *Health expertise and technical operations*

- More than 400 Syrian and Turkish health care workers were trained by WHO and the Turkish Ministry of Health in the assessment and treatment of people with depression, post-trauma stress disorder, thoughts of self-harm, psychosis and substance abuse conditions. Syrians' long-term exposure to violence, social conflict and low standards of living has contributed to an escalation in mental health care needs among the refugee population. These training courses are essential to reduce the tremendous psychological stress that Syrian men, women and children undergo in their new lives in Turkey.
- In a joint training course organized by WHO and the Turkish Ministry of Health, more than 60 Syrian and Turkish health workers learnt the essentials for preventing violence against women at primary health care level. The course aimed to raise awareness and provide the health workforce with the tools to detect and intervene in cases of domestic violence.
- More than 40 Turkish-Arabic interpreters were trained to serve as patient guides to Syrian refugees in refugee health centres across Turkey.
- Following the evaluation of a major vaccination campaign conducted among Syrian children in Turkey in 2017, WHO and its partners plan to update the vaccination records for Syrian children in Turkey more frequently so as to improve follow-up.

## Cross-border operations in northern Syria

### Situation update

- From mid-December 2017 to the end of January 2018, more than 270 000 people were internally displaced to camps in Idleb as a result of hostilities in northern Hama, western Aleppo and southern Idleb. Organized camps were overloaded and people were sheltering in makeshift camps in harsh weather conditions. Heavy airstrikes also destroyed hospitals and schools and killed and wounded hundreds of people in Idleb governorate.
- In January, WHO's partners suspended activities in Afrin due to security reasons. Military operations started in January and the reported blocking of exits virtually trapped many civilians. As the fighting escalates, the number of civilians affected by violence is bound to increase.
- In February, hundreds of thousands of people in besieged eastern Ghouta (an opposition-controlled area near Damascus) came under intense bombardment as government forces attempted to retake control of the area.

## Health needs, priorities and gaps

- WHO coordinates Health Cluster partners in redirecting their capacities so as to follow population movements and ensure that people continue to receive WHO supplies, given the security constraints. The health system is, however, overstretched, fixed health structures have been repeatedly targeted and there are not enough stocks of medicines and medical supplies.
- Together with partners and other WHO hubs, WHO has coordinated preparations for the potential evacuation of more than 700 patients from eastern Ghouta. The health system is disrupted by continuous attacks and the whereabouts of patients are not known as people seek shelter from bombings. There is an acute shortage of trauma kits, antibiotics, dialysis supplies, intensive care unit and orthopaedic supplies and equipment.

## Action by WHO and the health sector

### *Leadership and partner coordination*

- The Whole-of-Syria health team finalized the health sector preparedness and response plan for north-western Syria.

### *Information and planning*

- Attacks on medical facilities deprived hundreds of thousands of people of their basic right to health and put the lives of health workers at considerable risk. In January and February, 74 incidents against health care facilities were reported by Health Cluster partners, 67 of which were verified. In these attacks 52 people were killed and 120 injured, including eight health workers killed and 26 injured.

### *Health expertise and technical operations*

- **Referral system.** In January, a network of 10 health facilities in the area of Saraqeb (south-east of Idleb) started piloting a referral system developed by WHO and health partners to ensure coordination and efficiency. Improved network coordination ensured a faster response to emergencies and minimized disruptions to health care. It also allowed the network to expand quickly to 18 health facilities to address the sudden influx of hundreds of thousands internally displaced persons in the second half of January. WHO directly funds two mobile units in the network; 105 patients were referred by the end of February.
- **Mental health and psychosocial support.** Nearly 7000 mental health patients received support in a mental health acute inpatient centre serving 22 200 people in Sarmada/Idleb governorate. Two mental health mobile clinic teams bring mental health and psychosocial support services to a wider population living in communities and camps.
- **Immunization.** As part of the re-establishment of routine immunization activities, 61 vaccination centres were operational in February, although 11 of them were affected by air strikes in Idleb and Hama. The centres vaccinated on average around 36 000 children per month. All centres in Aleppo, Hama and Idleb also provided inactivated polio vaccines to children aged under two years.
- **Capacity-building.** Nearly 300 Syrian health care workers received WHO training in infection prevention and control, the integrated management of childhood illnesses and the early warning alert and response system.

### *Operational support and logistics*

- WHO and health partners delivered medical supplies providing 342 395 treatments<sup>1</sup> to a total value of more than US\$ 815 000. Medical equipment and supplies included specialized emergency, trauma and burn kits; essential and psychotropic medicines; intensive care medicines; anaesthesia and surgical equipment and other consumables.

## RESOURCE MOBILIZATION

FUNDING STATUS OF APPEALS FOR 2018 (US \$)			
WHO Regional Office for Europe			
NAME OF APPEAL	FUNDS REQUIRED	FUNDED	% FUNDED
Turkey Regional Refugee & Resilience Plan (3RP) 2018-2019 (Refugee Health Programme)	21 300 000	13 000 000	62%
Humanitarian Response Plan 2018 (Cross-border operations)	43 500 000	10 538 310	22%

### DONORS for Refugee Health Programme

European Civil Protection and Humanitarian Aid Operations, the Bureau of Population, Refugees, and Migration of the United States Department of State, KfW Development Bank and the governments of the People's Republic of China, Kuwait and Norway.

### DONORS for cross-border operations

United Kingdom Department for International Development, European Civil Protection and Humanitarian Aid Operations, United Nations Office for the Coordination of Humanitarian Affairs pooled funds, the United States Agency for International Development and the governments of Japan and Norway.

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