



Polio Immunization Campaign – Photo by WHO

**HEALTH SECTOR BULLETIN  
JULY 2020**

SYRIAN ARAB REPUBLIC  
Emergency type: Level 3 Emergency  
Reporting period: 01-07-2020 to 31-07-2020



**12 M**  
PIN of Health Assistance



**11.4 M**  
Targeted with Health Interventions



**3.4 M**  
IDPs



**443.2 M**  
Funds required



**146,200**  
Returnees

**HIGHLIGHTS**

- As of 31 July 2020, the Ministry of Health reported COVID-19 cases in Syria has reached 477, including 43 deaths\*. The first confirmed case was declared on 22 March and first death on 29 March.
  - Syrian Humanitarian Fund Standard Allocation was launched on 9 July with a planned allocation of US\$ 40 million. The health sector envelop is US\$ 7 million and it received 22 proposals.
  - Health sector continues to bolster PPE supplies in Syria, with a focus on protecting health workers. To date, WHO has delivered more than 4.4 million PPE items, while health partners has delivered more than one million PPEs.
  - The Ministry of Health targeted more than 948 300 children under 5 in hard to reach areas in different governorates during polio immunization activities from 19-23 July 2020
  - The medical procedures, treatment courses and vaccination coverage showed considerable increase in July following a downward trend in June. 4
- \* Currently there are 2173 confirmed cases of COVID-19 including 8 associated deaths as of 22 August, 2020

**HEALTH SECTOR**



**61** HEALTH SECTOR PARTNERS

**KITS DELIVERED TO HEALTH FACILITIES/PARTNERS**

**416** IEHK BASIC & SUPPLEMENTARY KITS  
**09** TRAUMA A & B KITS  
**28** NCD KITS  
**08** CHOLERA KITS

**SUPPORTED MOBILE HEALTH UNITS**



**132** MOBILE HEALTH UNITS/TEAMS

**HEALTH ACTION**

**969,638** MEDICAL PROCEDURES  
**541,190** TREATMENT COURSES  
**15,102** TRAUMA CASES



**VACCINATION**

**51,226** PENTA 3



**EWARS**

**1,272** REPORTING SITES



**FUNDING \$US**

**443.2 M** REQUESTED -ONLY (10 % FUNDED)



## Situation update

As the Syria crisis enters its tenth year, the scale, severity and complexity of humanitarian needs remain extensive. This is the result of continued hostilities in localized areas, new and protracted displacement, spontaneous returns and the sustained erosion of communities' resilience during more than nine years of crisis. Syria is still one of the biggest and most complex crises globally. The Syrian crisis created more than six million refugees and displaced a further 6 million Syrians inside their own country.

Health needs in Syria are already significant. Thousands of children are suffering from severe malnutrition. Thousands of more people suffer from cancer, diabetes, and other chronic conditions for which treatment is limited.

50% of hospitals were reported fully functioning, 25% hospitals were reported partially functioning (i.e., shortage of staff, equipment, medicines or damage of the building in some cases), while 25% were reported non-functioning. 47% of public health centres were reported fully functioning, 22% partially functioning, and 31% non-functioning (completely out of service).

More than 12 million people (out of the total estimated population of 20 million) are in need of health care services in 2020. 70 % of the sub-districts (188 out of 268) have most severe health needs and severity score of 3 and above.

COVID-19 has aggravated the situation further. In July, health authorities announced 320 confirmed COVID 19 cases as compared to 157 confirmed cases in June and 79 confirmed cases in May 2020. All indicators point out that the disease is spreading rapidly across the communities in the country.

The aid agencies continue to ramp up efforts to suppress the transmission of the virus through risk communication and community engagement; procurement and distribution of medical supplies and equipment; by supporting COVID-19 clinical readiness; and safeguarding the public health care system.

## **FUNDING STATUS TO HEALTH SECTOR**

### **SHF-RESERVE ALLOCATION FOR COVID 19 RESPONSE**

More than US\$ 14 million was allocated to 13 health sector partners including UN agencies, national and international NGOs for COVID 19 readiness and response for six months.

### **SHF –STANDARD ALLOCATION 2020**

SHF –Standard Allocation was launched on 9 July with the deadline to submit proposal by 23 July. The health sector received 22 proposals amounting to almost US\$ 14 million against an envelope of US\$ 7 million.

### **HRP 2020**

The health sector is only 10 % funded according to OCHA- Financial Tracking Service.

## Public health risks, priorities, needs and gaps

The ongoing conflict, violence and displacement have grave public health consequences with increased morbidities, mortalities and disabilities among affected and vulnerable population. The most affected are children, women and elderly people.

Despite challenges, Ministry of Health and humanitarian partners continue to assist people in need where access is possible with focus on collective shelters and IDP camps delivering essential health services.

**The first confirmed case of COVID-19 was announced on 22 March.** As of 31 July 2020, the number of reported cases in Syria has reached 477, including 43 deaths and 237 recoveries.

The areas of concern are densely populated areas, notably Damascus/Rural Damascus, Aleppo and Homs, and those living in camps, and informal settlements in northeast Syria (NES), collective shelters throughout the country, as well as other areas including Deir-Ez-Zor, and where hostilities may be ongoing making sample collection more challenging.

The populations of concern are all groups are susceptible to the virus. However, the elderly (those 60 years and above) and people with underlying health conditions are particularly at risk; as are vulnerable refugee and IDP populations and healthcare workers with inadequate personal protective equipment (PPE).

COVID-19 testing is taking place at laboratories in **Damascus, Aleppo, Homs and Lattakia** governorates.

The enhancement of laboratory and case investigation capacity across Syria remains a priority, as does the timely communication of all information relevant to the safeguarding of public health. The UN has pledged its support to assist the MoH achieve its stated goal to have testing capacity in all 14 governorates.

## POLIO IMMUNIFICATION

The Ministry of Health targeted more than 948 300 children under 5 in high risk and hard to reach in different governorates from 19-23 July 2020. Special attention to NES (namely Hassakeh, Der Ez Zor, Raqqa) while Aleppo was also included in the campaign.

The campaign was implemented by 3044 vaccination teams through 618 fixed sites and 2426 mobile ones focusing on children in high-risk and hard-to-reach areas including Al-Hasakeh, Ar-Raqqa and Deir-Ez-Zor.

All IDP camps in NES were part of the polio campaign. WHO-supported mobile vaccination teams conducted tent-to-tent visits to vaccinate the children in the camps.

The MOH reported the coverage of 972,984 children with Oral Polio Vaccine (bivalent). The independent monitoring teams have estimated the coverage at 89% as per family recall and 78% as per Finger Marking. The population acceptance is high, all teams were having PPEs but maintaining physical distancing was a challenge especially at village level.

## EWARS and epidemiological updates at national level (week 27,2020-week 30,2020)

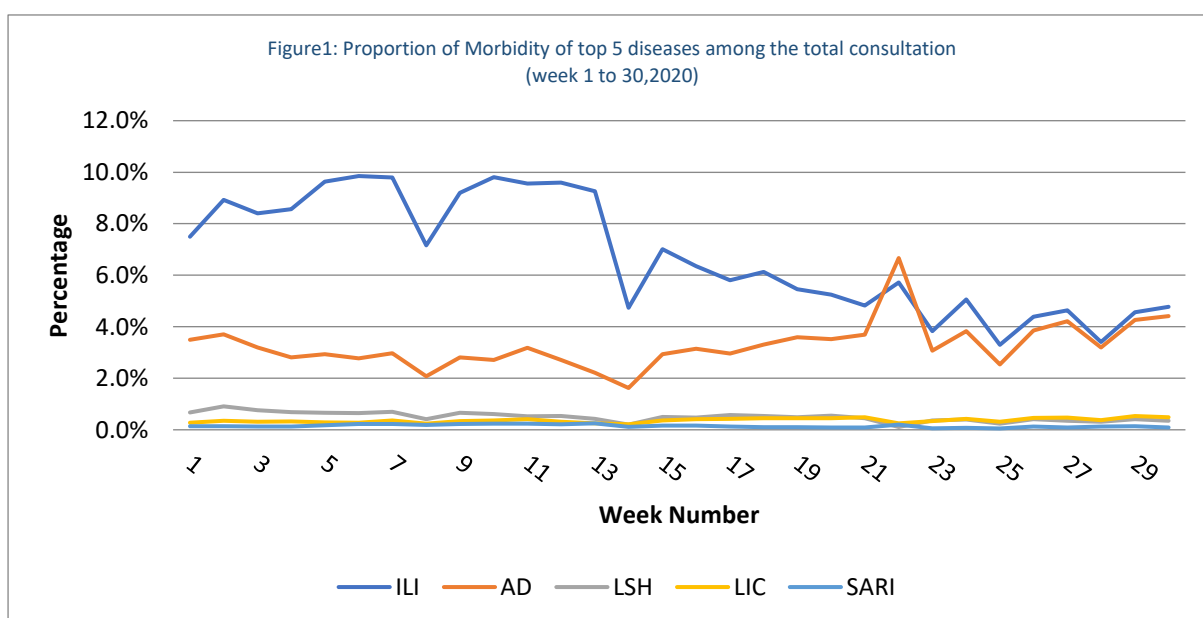
### Surveillance performance:

- A total of 1163 out of 1304 active reporting sites (89.4%) in all 14 governorates of Syria reported through early warning alert and response system (EWARS) with 90% of timeliness.
- Total number of consultations was 997,045. Decreased by 18.6% than the previous month. in June was 1,211,949.
- Out of the 986,175 total consultations, a total of 102,061 EWARS notifiable cases were reported.

### Morbidity:

The leading causes of morbidity among all age groups were influenza-like illnesses, and acute diarrhoea (Figure 1). The breakdown was as follows:

- Influenza-like illness (ILI): 342,232 accounting for 41.4% of total cases. Most cases reported from Aleppo, Rural Damascus, and Tartous (Figure 2). The average number of ILI case per week was 10,558.
- Acute diarrhoea (AD): 39,094 (38.3 % of total cases), most reported from Deir-ez-Zor, Aleppo, and Idleb.
- Severe acute respiratory infection (SARI): 1075 case were reported, which increased by 18% compared to the number of SARI during the previous month (911) (Figure 1). The average of weekly number of reporting was 268.
- Acute jaundice syndrome (AJS): 2692 most reported from Deir-ez-Zor, Ar-Raqqa, and Idelib.
- Suspected measles (SM): 112 - most reported from Idleb, Deir-ez-Zor, and Aleppo.
- Acute flaccid paralysis (AFP): 16 - reported from Aleppo, Hama, and Deir-ez-Zor.
- For the “other diseases” category 15,892 cases were reported, with the most reported cases is Lice of cases (4,554), leishmaniaiasis (3466), and typhoid (2470).



## EWARS and epidemiological situation in Al-Hol camp (week 27,2020-week 30,2020)

### Surveillance performance:

- Total number of reporting site is 1272
- Average completeness of reporting 100%, and average timelines is 100.0%.
- Total number of consultations were 18,580, Out of the 18,580 total consultations, 3,512 EWARS notifiable cases were reported.
- 54.2% of the cases were among females, and 45.5% were distributed among children under 5 years.

### Morbidity:

- The leading causes of morbidity among all age groups were acute diarrhoea (52.9%/1,861), then influenza-like illnesses (36.3%/1,276).
- 3 suspected measles was reported, which two cases were under five years old, and one case above 5 years.
- Zero cases of AFP reported.

## COVID-19 updates 31 July:

### Situation:

- The first case of COVID-19 - 22nd of March 2020 in Damascus, imported from USA; no positive cases through contact tracing
- As of 29th of June 2020, a total of 694 cases - in 10 governorates as follows: 397 (57.2%) in Damascus, 152 (21.9%) Rural Damascus, 37 (5.3%) Quneitra, 30 (4.3%) Aleppo, 29 (4.2%) Lattakia, 16 (2.3%) As-Sweida, 12 (1.7%) Homs, 10 (1.4%) Dara', 10 (1.4%) Hama, and one case in Tartous.
- Number of COVID-19 deaths is 40 and CFR= 3.8%. (6 in Damascus, 1 Rural Damascus, 1 Quneitra, 1 Al-Hasakeh and 1 Aleppo).
- 104 cases (15%) are travel related cases, 185 cases (26.7%) are contacts of confirmed cases, and 405 cases (58.4%) - unidentified source of exposure.
- 58% are male and 42% are female. The average age is 40 (ranging from 3 to 80) figure 3.
- A significant increase in COVID-19 cases has been observed in July with 415 cases till 29 of July, comparing with 157 cases in June and 79 cases in May. Figure 4.
- The current transmission is presented as "community", local transmission identified in Damascus, Rural Damascus, Aleppo, Lattakia, As-Sweida, and Daraa.
- The number of confirmed COVID-19 cases among health workers increased to 61 in mainly in Damascus hospitals, in addition to Rural Damascus, Aleppo and As-Sweida. 7 HWs deaths were reported among positive COVID-19 cases (5 Damascus, one Rural Damascus and one in Aleppo)
- As of 31 July a total number of 13,860 lab tests were performed in public health laboratories in four governorates Damascus, Aleppo, Homs, and Lattakia. The current testing rate is 68 tests per 100,000, and positivity rate is 5%. (table1)

Table 1: The number of confirmed cases by governorate

Governorate	Population size	Test done	Testing rate / 100,000	Number positive	Positivity rate	Incidence / 100,000	Deaths	CFR
Damascus	<b>1,835,380</b>	5,223	285	397	7.60%	21.6	34	8.56%
Rural Damascus	<b>3,160,454</b>	3,382	107	152	4.49%	4.8	3	1.97%
Homs	<b>1,451,058</b>	827	57	12	1.45%	0.8	0	0.00%
As-Sweida	<b>379,170</b>	207	55	16	7.73%	4.2	1	6.25%
Al-Hasakeh	<b>1,060,341</b>	44	4	0	0.00%	0.0	0	0.00%
Dar'a	<b>1,015,275</b>	499	49	10	2.00%	1.0	0	0.00%
Lattakia	<b>1,186,494</b>	1118	94	29	2.59%	2.4	0	0.00%
Aleppo	<b>3,933,168</b>	1130	29	30	2.65%	0.8	1	3.33%
Ar-Raqqa	<b>690,801</b>	2	0	0	0.00%	0.0	0	0.00%
Deir-ez-Zor	<b>741,249</b>	30	4	0	0.00%	0.0	0	0.00%
Hama	<b>1,342,187</b>	490	37	10	2.04%	0.7	0	0.00%
Quneitra	<b>103,269</b>	695	673	37	5.32%	35.8	1	2.70%
Tartous	<b>906,362</b>	213	24	1	0.47%	0.1	0	0.00%
Edleb	<b>2,588,454</b>	0	0	0	0.00%	0.0	0	0.00%
<b>Total</b>	<b>20,393,662</b>	<b>13,860</b>	<b>68</b>	<b>694</b>	<b>5.01%</b>	<b>3.4</b>	<b>40</b>	<b>5.8%</b>

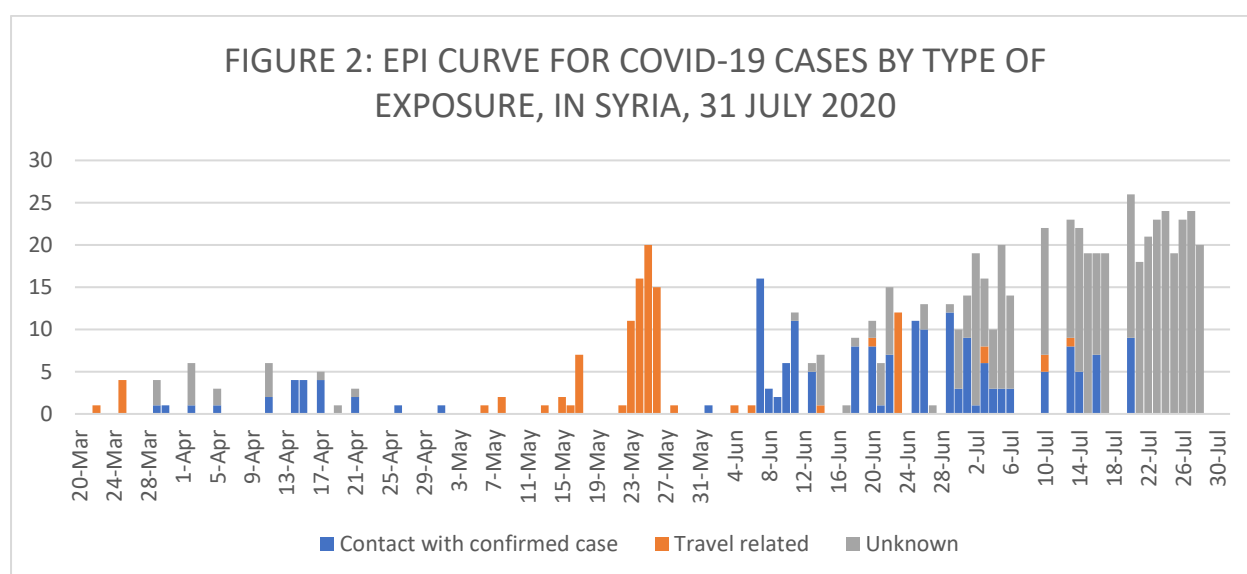


FIGURE 3: EPI CURVE FOR COVID-19 CONFIRMED AND DECEASED CASES, IN SYRIA, 31 JULY 2020

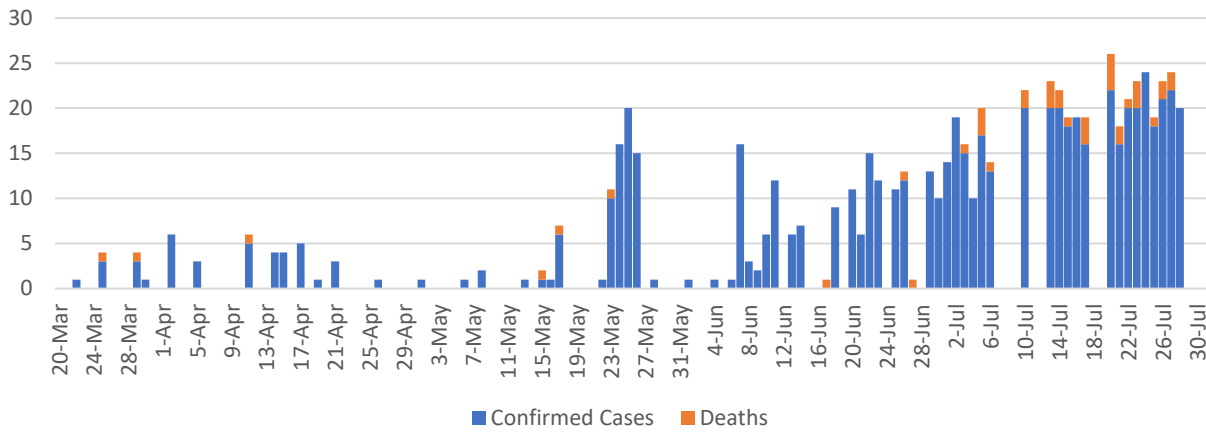
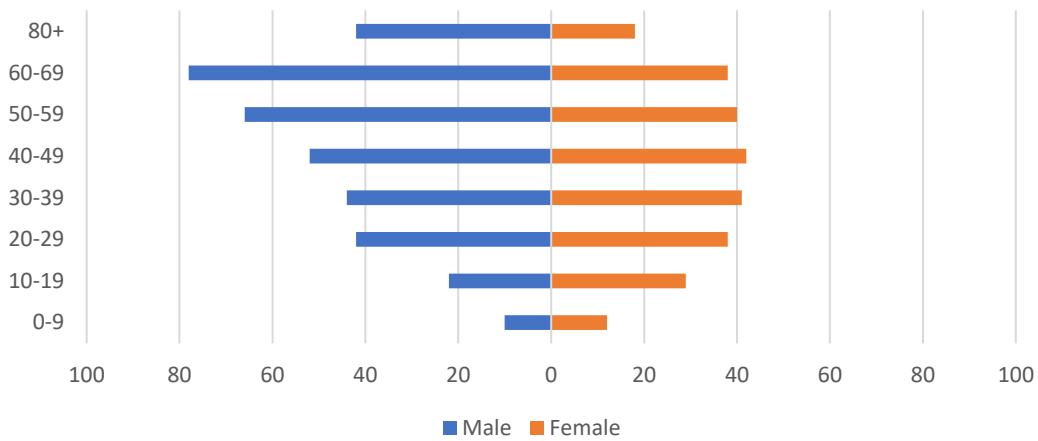
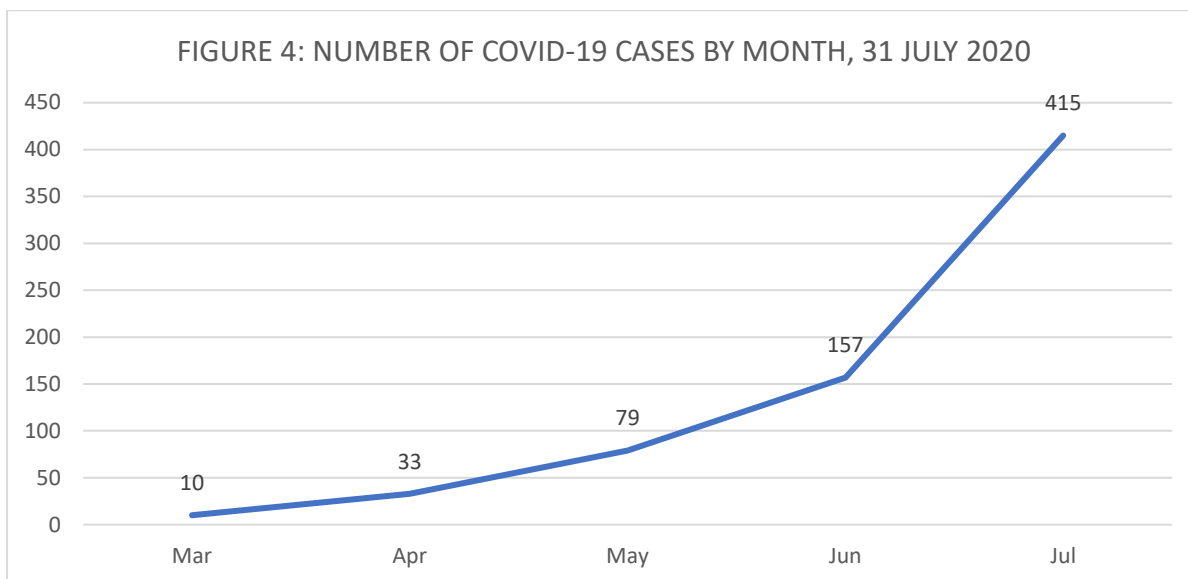


FIGURE 4: DISTRIBUTION OF COVID-19 CASES BY GENDER AND AGE GROUP, IN SYRIA, 31 JULY 2020





*Response:*

### **1. Response activities**

- On 28 and 29 of July, WHO supported two days meeting for the heads of communicable disease departments in 14 governorates, 25 MoH officers participated in this meeting and agreed on the following points:
  - Finalize and endorse the new COVID-19 case definition for Syria aiming at widening the scope of COVID-19 case detection in Syria
  - Finalize and endorse the new developed electronic COVID-19 case reporting format; the aim is to improve the quality and timeliness of data shared by the field reporting sites to the central level (Laboratory and CDC central).
  - Endorsement of updated formats for contacts monitoring and follow up.
  - Agree on the groups to be prioritized for PCR testing and those to be excluded.
  
- WHO supported the 25 active surveillance teams in conducting the active surveillance visits to 125 hospitals in 13 governorates; during the reporting period about 450 visits were conducted, active finding of suspected COVID -19 cases was conducted, in addition, to session for the health workers teams on case definition and prevention measures.
  
- WHO supported the Rapid response teams to undertake investigation and response of COVID-19 alerts by facilitating the transportation of RRTs, samples collection and transporting to designated laboratory in 4 governorates. Number of RRTs at district level is 99. In addition to 13 RRTs at governorate level. More than 6386 suspected COVID-19 cases and contacts were investigated properly within 24 hours during the reporting period.

## Health facility Functionality

### Public Hospitals

By end of 2019, out of the 113 assessed public hospitals [MoH & MoHE], 50% (57) were reported fully functioning, 25% (28) hospitals were reported partially functioning (i.e., shortage of staff, equipment, medicines or damage of the building in some cases), while 25% (28) were reported non-functioning. 81% (91) hospitals were reported accessible, 8% (9) hard-to-access, and 11% (13) were inaccessible.

The general practitioner (0.2%) and emergency physician (0.3%) were the lowest proportion of health staff in public hospitals, followed by dentists (0.8%), pharmacists (0.7%), midwives (4.9%), laboratory (5.1%), specialists (12.5%), resident doctors (20.7%), and nurses (52.8%).

### Public Health centres

By end of 2019, out of 1,813 assessed public health centres, 47% (853) were reported fully functioning, 22% (405) partially functioning, 31% (555) non-functioning (completely out of service). 83% (1,501) health centres were reported accessible, 2% (40) hard-to access, and 15% (265) were inaccessible, while the accessibility status of 0.4% (7) health centres were unknown.

The resident doctors represented (2%) of total health staff at centres' level, along with pharmacists (4%) followed by general practitioners (4%); laboratory (6%); Specialist (7%); dentists (10%); midwives (11%); and nurses (59%).

## Health Sector Action

### Health Sector Coordination and service delivery

During this month, two virtual health sector coordination meeting were held at Damascus and were attended by national Syrian NGOS, international NGOs, SARC and observers. The Health Working Group meetings were also held at hubs and in Al Hol Camp with special focus on COVID-19 Response and continuity of essential health care.

The health sector partners delivered health services and the cumulative monthly indicators (June) are summarized in the below table.

HRP Indicator 2020 (Per Month)		May	June
Medical procedures	1.1.1 Number of outpatient consultations provided	706,931	909,388
	1.1.2 Total number of trauma consultations supported	17,659	15,102
	1.1.3 Number of mental health consultations supported	22,675	34,309
	1.1.4 Number of physical rehabilitation sessions supported	2,870	2,162
	1.1.5 Number of vaginal deliveries attended by a skilled attendant	4,504	4,090
	1.1.6 Number of caesarean sections supported	3,901	3,506
	1.1.7 Number of cases referred for specialised treatment	1,262	1,081

## Child Health

**51, 226 children** were immunized in June as compared to 28, 922 children in May for Penta 3.

## Reproductive Health

Skilled birth attendants conducted **4,090 normal deliveries** while **3,506 mothers underwent caesarean** sections.

## Health Cluster Partners Updates

Health Cluster Partners continued supporting health service delivery across the country. Some of the highlights are;

### World Health Organization

WHO continued support with operational cost to sustain field activities of the four medical mobile teams run by DOH medical staff to cover basic PHC services for Al Rukban returnees towards eastern rural areas and Kuseir district in Homs; in addition to IDPs and returnees' movement from southeast Idlib towards rural Hama including Sanjar district. So far, total beneficiaries are 6010 for Homs and 10,100 for Hama.

Delivered to health partners in Aleppo and Al Hassakeh 2,600 trauma cases of 26 Trauma kit A & B and Surgical Kits

Delivered to health partners and public hospitals in Aleppo, Al Hasakeh, Ar-Raqqa and Homs 711,717 treatments of life saving medicines and IEHK medical kits.

1,402 people with disabilities benefited from assistive devices that were delivered to MOH, local NGOs and other health-partnered facilities in Aleppo, Ar-Raqqa, Damascus, Daraa, Hama and Rural Damascus.

225 health workers were trained on management of COVID 19 related topics in different governorates (Ar-Raqqa, Deir-ez-Zor, Daraa, As-Sweidaa, Lattakia, and Damascus).

WHO continued training on IPC and PPEs use and supported eight 1-day workshops targeting 136 trainees at 79 PHCs type B located in Damascus, Rural-Damascus and Deir-ez-Zor on

triage, IPC/PPE, case definition and referral pathways. In addition, a further 4 workshops for Ministry Of Higher Education university hospitals in Damascus (Al Assad, Gynecology, Al-Beirouni for oncology and Children's Hospitals); with 100 healthcare workers trained on triage, IPC/PPE measures and case management for SARI cases when COVID-19 is suspected.

WHO supported MHPSS partners with three online capacity-building activities in MHPSS Basic psychosocial skills, including key messages for MHPSS and coping with stress in the context of COVID-19, for 54 trained community workers. Continuous online technical supervision for mhGAP doctors, and MHPSS community workers

In Dier ez Zor, WHO supported two training workshops on COVID-19 protocols in level B PHCs, 50 HCWs from the city and rural health center have benefited from the training, which aimed to have PHCs prepared for ongoing outbreak

WHO has supported five days training workshop on nutrition surveillance clinics expansion and monthly reporting. 20 health workers from 11 PHC have been added to the nutrition surveillance network in Deir-ez-Zor governorate.

Dispatched 109 tons of medical, lab, WASH & nutritional supplies, as well as kits and printing

material covering 10 governorates. The recipients included 22 MoH facilities, 6 MoHE facilities, SARC, NGOs, camps and others

## **UNICEF**

UNICEF conducted C4D activities in Hameh and Jaramana , in Rural Damascus having around 23,192 children U5 years of age before SNID. The locations were chosen for the SNIDs because of its low coverage. The communities were engaged through several interventions, including outreach activities through health workers, community awareness sessions, mobilizing religious & local leaders, as well as establishing community volunteer networks to work with families in hard to reach areas. Awareness raising materials (stickers, Brushers...) were distributed. The C4D materials include banners in addition to using megaphones to announce the campaign. The C4D activities rated as good by the community.

UNICEF distributed 93 pediatric kits and 6 First Aid kits.



**UNICEF supported awareness raising session**

## **UNFPA**

On July 1, UNFPA Syria team visited the Juvenile center in Lattakia including male and female centers, who are aged between 14 and 18 years old.

UNFPA was able to provide comprehensive services to a very sensitive and in-need group who are victims. And through the Syrian Family planning Association (SFPA) mobile team, 100 hygiene kits were distributed in the centers, in addition to providing awareness-raising sessions about personal hygiene, GBV, and COVID-19

prevention measures. It is worth mentioning that UNFPA is the first and the only UN agency that was able and got approval to respond in juvenile centers and provide hygiene kits.

UNFPA Syria responded to the 9<sup>th</sup> and 12<sup>th</sup> Grade students during COVID-19 pandemic who are evacuated from Idlib in cooperation with the Syrian Ministry of Education and the support of Al-Bir association mobile in two accommodation centers in Hama city. On 12<sup>th</sup> of July, UNFPA team response was as follows: distributing 245 personal hygiene kits, which contain

(Toothpaste, toothbrush, Antiseptic Hand Soap, Towel, Wet Wipes, and Hand Sanitizing Gel), and distributing sanitary napkins for all female students.

Also a medical mobile team from Al Bir Hama NGO (UNFPA IP) was visiting the students' accommodation center to deliver reproductive health, internal health, and PSS to students.

Massyaf Charitable Association's mobile team, supported by UNFPA-SYRIA accomplished 11 field visits and reached 11 villages in rural Hama, i.e. in Massyaf and Alghab country sides between 26- 29 July .

They provided reproductive health services, pregnancy follow up, family planning methods, medical treatment, women's medical

### **International Medical Corps Syria**

International Medical Corps continued to provide primary health care for beneficiaries through three static clinics in Masaken Barzah clinic (Damascus), Jaramana clinic (Rural Damascus) and As-SanaJunn clinic (Dara'a), and seven Medical Mobile Clinics (MMCs) in Rural Damascus and Damascus. During Jul-2020, a total of 16,721 consultations were provided to 13,677 beneficiaries

In addition, IMC provided patients with advanced health care through referral system to International Medical Corps' contracted hospitals/ specialists. The advanced health care includes consultations in various specialities, surgeries, and providing hearing aid services to children with hearing impairments, this service covers audiometry tests, installing H.A devices, and speech therapies.

consultations, awareness sessions and health education targeting 357 beneficiaries. In addition to providing health awareness services about covid-19 pandemic and public health.



UNFPA supported Mobile Medical Team

Disability aids are provided continuously to people in needs as per IMC criteria. During July 52, patients received different types of disability aids including wheel chair, diapers, walkers, toilet seats, crutches, catheters and colostomy bags etc.

In addition, regarding COVID19 response, IMC provided health education in Clinics and MMTs as following:

2,066 Beneficiaries received health education sessions related to COVID19

1,689 Beneficiaries received COVID19 awareness sessions

341 Beneficiaries received Hand Washing sessions

### **Aga Khan Health Services**

AKHSS has provided PPEs to Salameih National Hospital, which included (Glove examination-

Medical Masks – Gloves Cleaning- Ethel Alcohol 95%- Mask particulate respirator, Surgical Masks- Disposable Shoe Cove- Head Cover- Cleaning supplies - Apron, heavy duty, reusable – Gowns)

Planned Procurement: On the other hand, there is a planned procurement for medical equipment, which included Lab equipment- Lab Reagents –Lab supplies –and PPEs. This will be donated to the Health Directorate in Hama.

Capacity Building:

During June and July, AKHSS has implemented training workshops targeted the health workers

in Hama and Salameih, about Infection prevention and control, and Case Management.

**In Hama 2111** health workers have participated in training workshops, (1854 ) of them have trained on infection prevention and control, and (257) of them have trained on case management.

**In Salameih (109)** health workers have participated in training workshops, (90) of them have trained on infection and control, and (19) of them have trained on case management.

### Plans for future response

Formation of Strategic and Technical Review Committee for SHF- Standard Allocation and review of the proposals

Finalizing inputs to UNDP on Socioeconomic Response plan for the sectors

Review of Operational COVID 19 Response plan and health sector budget needs..

### CONTACTS

Damascus national level	Aleppo sub-national level	Homs sub-national level	Lattakia/Tartous sub-national level	Qamishli (north-east Syria): sub-national level
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