



**HEALTH SECTOR BULLETIN  
OCTOBER 2020**

SYRIAN ARAB REPUBLIC  
Emergency type: Level 3 Emergency  
Reporting period: 01-10-2020 to 31-10-2020



**HIGHLIGHTS**

- As of 31 October 2020, the Ministry of Health reported COVID-19 cases in Syria has reached 5728, including 288 deaths and 1976 recoveries\*. The first confirmed case was declared on 22 March and first death on 29 March.
- WHO and UNICEF supported MOH to implement National Immunization days (NIDs) from October 11-15. 2,559,438 of 2,804,279 (91%) children under five years of age were vaccinated with Polio vaccine in all governorates.
- To date, health sector partners has delivered more than 14 million COVID supplies including more than 8.5 million delivered by WHO. The COVID supplies includes PPEs, diagnostics, biomedical equipment's etc.
- IDPs departure from Al Hol to A-Raqqa, has taken place on 28 Oct. The number of IDP families who left the camp was 35 families /117 individuals.
- UNHCR assisted 20,262 IDPs, and 2191 refugees & asylum seekers with basic package of primary health care services.

\* Currently there are 7154 confirmed cases of COVID-19 including 372 associated deaths as of 21 November, 2020

**HEALTH SECTOR**

**61** HEALTH SECTOR PARTNERS

**KITS DELIVERED TO HEALTH FACILITIES/PARTNERS**

**75** IEHK BASIC & SUPPLEMENTARY KITS  
**03** FISRT AID KITS  
**08** NCD KITS

**SUPPORTED MOBILE HEALTH UNITS**

**138** MOBILE HEALTH UNITS/TEAMS

**HEALTH ACTION**

**997,369** MEDICAL PROCEDURES  
**387,396** TREATMENT COURSES  
**18,352** TRAUMA CASES

**VACCINATION**

**29,270** PENTA 3

**EWARS**

**1,353** REPORTING SITES

**FUNDING \$US**

**443.2 M** REQUESTED WOS  
**132 M** FUNDED (29% ONLY)

## 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% (56) were reported fully functioning, 26% (30) hospitals were reported partially functioning (i.e., shortage of staff, equipment, medicines or damage of the building in some cases), while 24% (27) were reported non-functioning. 47% (842) were reported fully functioning, 21% (373) partially functioning, 32% (575) 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 October, health authorities announced 1528 confirmed COVID 19 cases as compared to 1435 in September 1954 in August 320 in July, 157 confirmed cases in June and 79 confirmed cases in May 2020. All indicators point out that the disease occurrence across the communities in the country.

The health sector 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; supporting case management and safeguarding the public health care system.

## National Immunization Days 11-15 October

WHO and UNICEF supported MOH to implement National Immunization days (NIDs) from October 11-15.

The campaign targeted 2,559,438 children under age of five years with Polio vaccine in all the governorates. The campaign coverage was 91%.

Vitamin A supplement to 933,195 children (2-5 years of age) was also provided.

Fixed health centers and mobile teams were used to deliver vaccine to the children. Almost 9745 health workers participated in NIDs. 4223 of them were provided the service through fixed health centers, 4642 health workers through mobile teams. There were 880 supervisors & supply officers. 1805 communication officers worked in awareness raising campaign (C4D activities). 1023 cars used for transportation of vaccines & mobile teams.

The health workers used PPEs and ensured protection from COVID 19 during the NIDs.

## 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, WHO and humanitarian partners continue to assist people in need where access is possible with focus on vulnerable people by delivering essential health services and supporting referrals.

**The first confirmed case of COVID-19 announced on 22 March.** As of 31 October 2020, the number of reported cases in Syria has reached 5,728, including 288 deaths and 1976 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 and response more challenging.

The populations of concern are all groups 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 **six** laboratories in **Damascus, Rural Damascus, Aleppo, Homs and Lattakia** governorates. One Gene Xpert machine is functioning at health centre at Syria-Lebanese border, mostly for returnees.

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.

#### [EWARS and epidemiological updates at national level \(week 41-44\)](#)

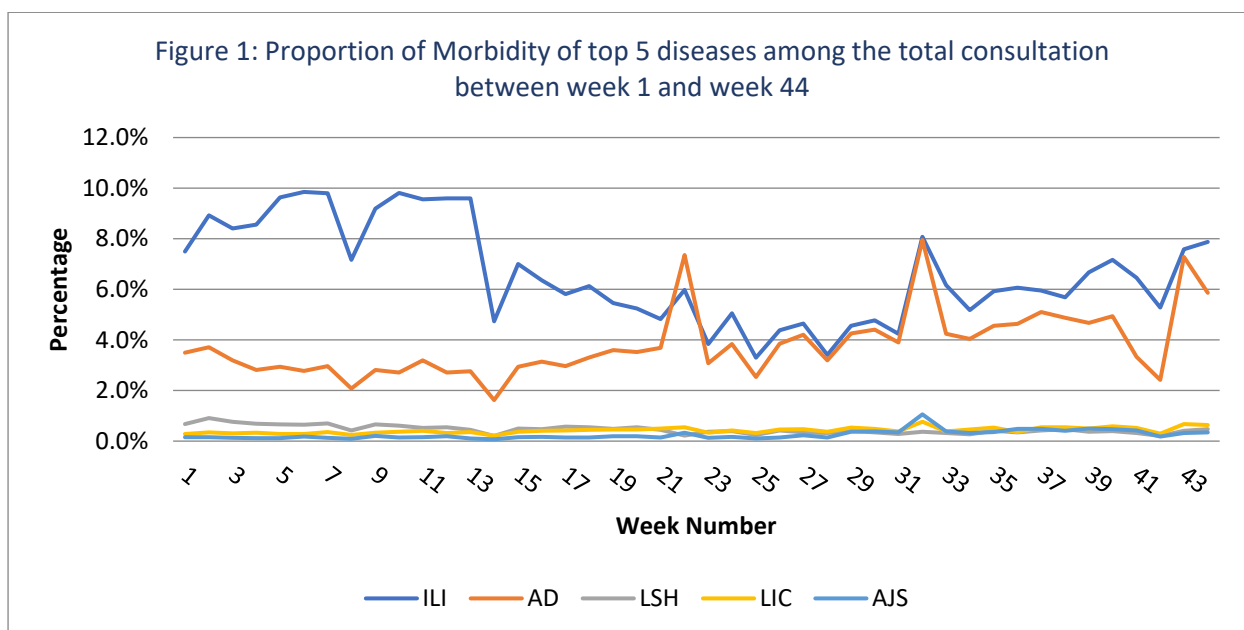
##### *Surveillance performance*

- A total of 1163 out of 1353 active reporting sites (85.8%) in all 14 governorates of Syria reported through early warning alert and response system (EWARS) with 89% of timeliness.
- Total number of consultations was 928,799. A decrease by 6.4% than the previous month.
- Out of the 928,799 total consultations, a total of 125,311 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): 61,803 accounting for 49.3% of total cases. Most cases reported from Aleppo, Deir-ez-Zor, and Tartous, the average number of ILI case per week was 15,451.
- Acute diarrhoea (AD): 42,366 (33.8 % of total cases), most reported from Rural Damascus, Deir-ez-Zor, and Idleb.
- Severe acute respiratory infection (SARI): 535 case were reported, which decreased by 31.8% compared to the number of SARI during the previous month (785). The average of weekly number of reporting was 134.
- Acute jaundice syndrome (AJS): 2,790 most reported from Ar-Raqqa, Deir-ez-Zor, and Hama.
- Suspected measles (SM): 50, most reported from Idleb, Aleppo, and Rural Damascus.
- Acute flaccid paralysis (AFP): 4, reported from Homs, Hama, Aleppo, and Tartous.
- Suspected COVID-19: 4,386. Most reported from Idleb, Hama and Aleppo.
- For the "other diseases" category 12,800 cases were reported, with the most reported cases is Lice of cases (4,737), leishmaniaiasis (3,133), and typhoid (1,508).



### EWARS and epidemiological situation in Al-Hol camp (week 41-44)

#### Surveillance performance:

- Total number of reporting site is 25.
- Average completeness of reporting 100%, and average timelines is 100.0%.
- Total number of consultations were 19,144, Out of the 19,144 total consultations, 2,666 EWARS notifiable cases were reported.
- 55.6% of the cases were among females, and 48.4% were distributed among children under 5 years.

#### Morbidity:

- The leading causes of morbidity among all age groups were acute diarrhoea (45.5%/1,213), then influenza-like illnesses (44.1%/1,176).
- No suspected measles cases were reported.
- Zero cases of AFP reported.
- 4 Suspected COVID-19

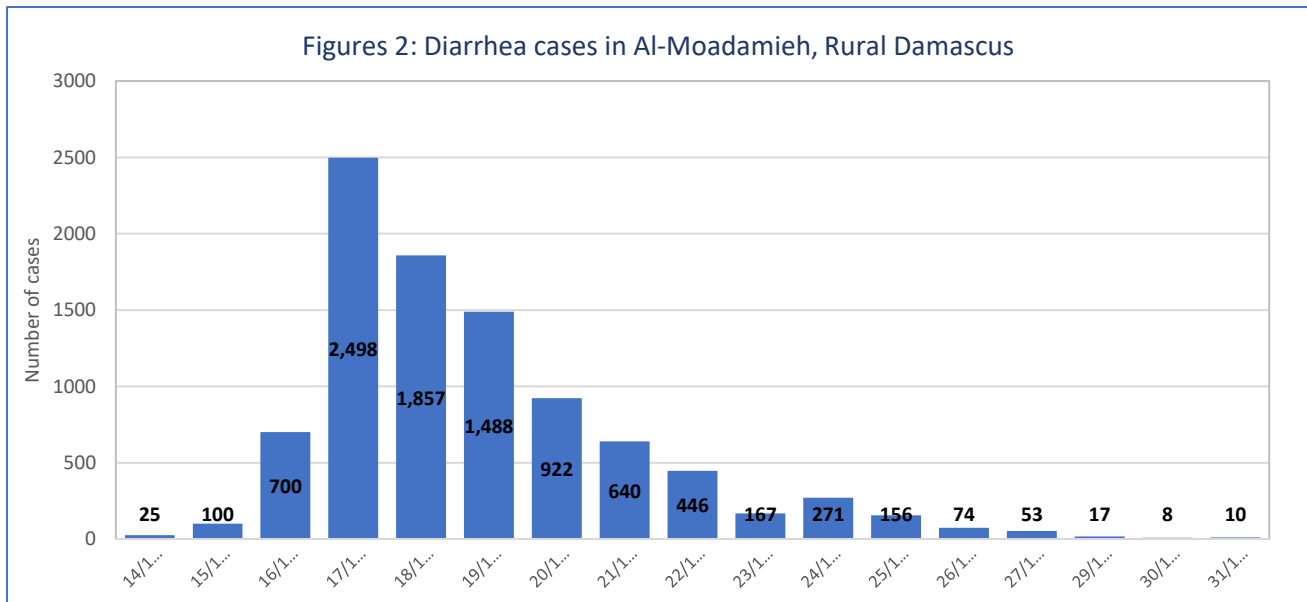
### Diarrhoea outbreak in Al-Moadamieh in Rural Damascus

- On 14 October, DoH in Rural Damascus was informed of a cluster of cases of acute diarrhea from Al-Moadamieh area in Rural Damascus,
- As of 31 October, 9,432 cases including one death was reported, predominantly among young children (figure 2).
- Cases presented with acute diarrhea, fever, nausea, vomiting, and abdominal pain
- Most cases have mild and moderate symptoms and 32 cases had dehydration and were admitted to hospitals, all cases recovered and discharged from hospitals.
- Cases according to age groups are- 420 (5%) are under 1 years old, 2110 (22%) between 1 to 5 years, 5830 (62%) were above 5 years, and 1072 (11%) the age has not been identified.
- Based on lab tests conducted for 10 stool samples, Escherichia Coli is the causative organism. In addition, one case tested positive for Shigella Sonnei, and one tested positive for Shigella Boydii.

- Laboratory water analysis indicated that water is contaminated with levels of E. coli above accepted standards. The water contamination was attributed to damage in water network and the water found not fit for human consumption. In addition to no presence of chlorine residual.
- A remarkable decline in number of diarrhea cases has been observed (figure 1). The drop in the number of diarrhea cases might be attributed to interventions conducted by MoH and ministry of water resources to improve the quality of drinking water.

**Response actions:**

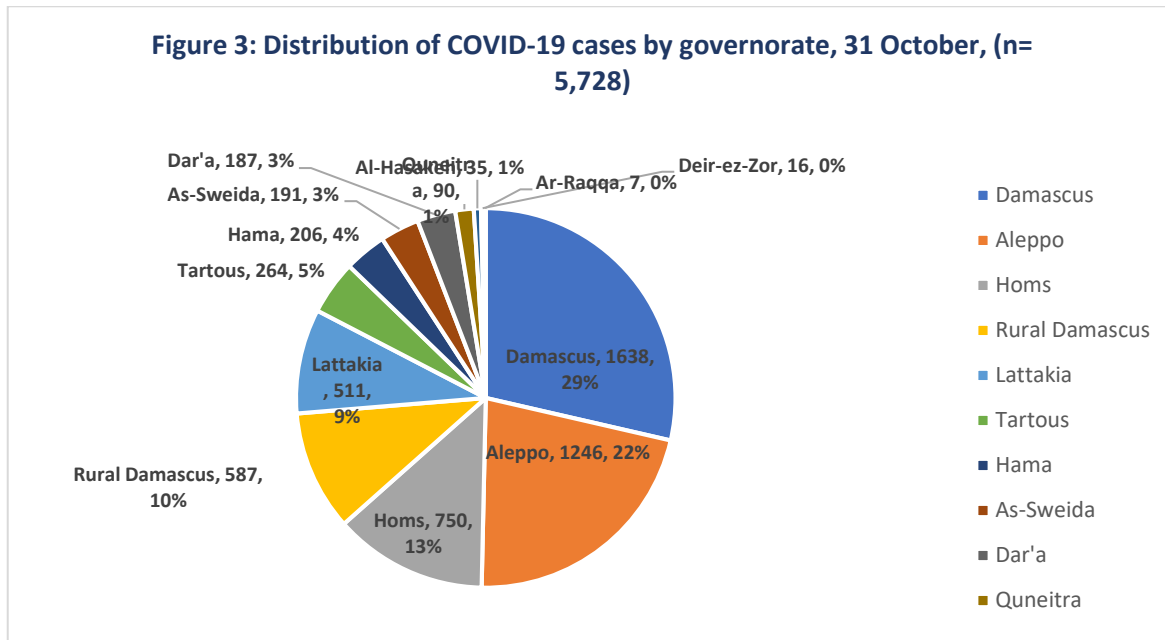
- DoH Rapid Response team was deployed on Thursday 15 of October, and 5 water samples were collected and sent to Central Public Health Laboratory. The results indicated coliform and E.coli contamination in all samples and no chlorine residual were found in all samples.
- Water institution temporarily cut water supply though the network and many water trucks were mobilized for providing potable water for the residents of the area.
- The water institution has replaced the water source and added high concentration of chlorine in the water network
- Aquatabs were distributed to households and messages were provided to keep water taps open for at least 15 minutes before using the water.
- On 18 October 5 samples from water network were collected to check the water quality after the disinfection of the pipes of the network and increasing the concentration of chlorine. Again, the lab results showed incompatible results in two samples.
- DoH has issued risk communication messages to the villagers on precautions for drinking water.
- Rural Damascus governorate has established multi-sectoral committee consists of health sector, water authority, and environmental sector. The committee conducted further investigation to identify the source of contamination.
- DoH deployed three mobile clinics and activated the provision of health services 24 hours through the health center of Al-Moadamieh.
- WHO has dispatched cholera kits to health facilities in the affected area in coordination with DoH (15 community kits, 5 periphery kits, and 2 central kits)



## COVID-19 updates 31 October:

### Situation:

- The first case of COVID-19 – 22<sup>nd</sup> of March 2020 in Damascus, imported from USA; no positive cases through contact tracing
- As of 31 of October 2020, 5,728 cases - in 13 governorates as figure two.

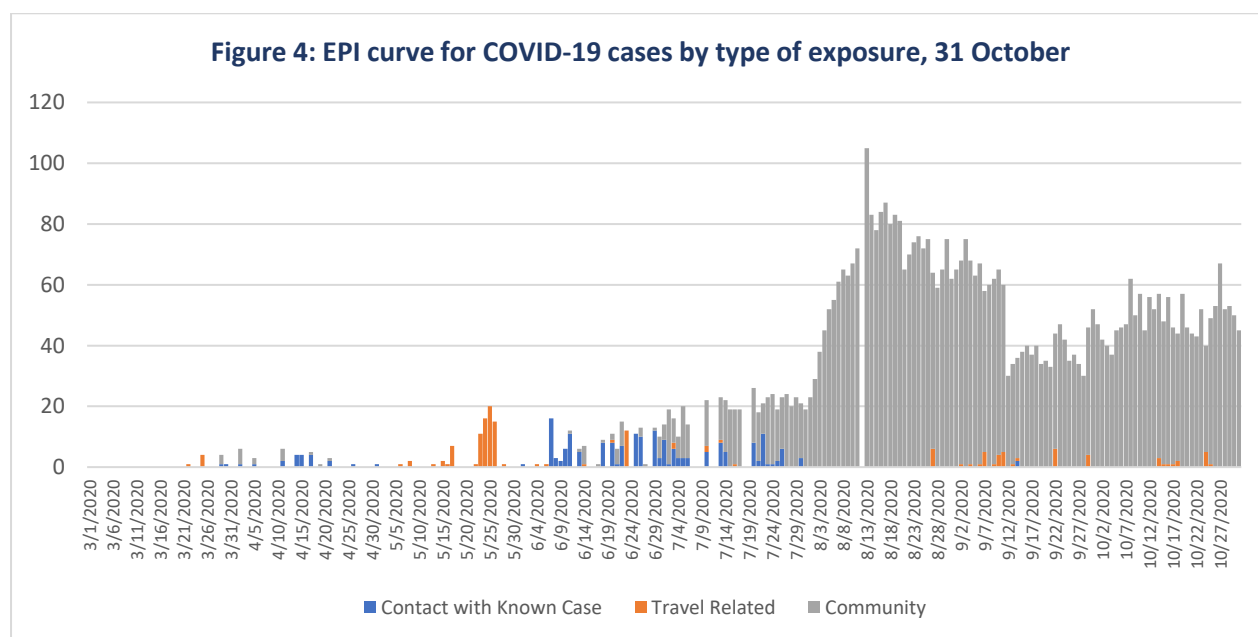


- Number of COVID-19 deaths is 288 and CFR= 5%. COVID-19 deaths were distributed as follow: 113 (39.2%) in Damascus, 61 (21.2%) in Homs, 39 (13.5%) in Aleppo, 15 (5.2%) in Rural Damascus, 14 (4.9%) in Lattakia, 12 (4.2%) in Hama, 12 (4.2%) in Tartous, 10 (3.5%) in As-Swieda, 4 (1.4%) in Deir-ez-Zor, 4 (.14%) in Quneitra, 2 (1%) in Al-Hasakeh, and 2 in Daraa (2%).
- 141 cases (3.4%) are travel related cases, 205 cases (4.9%) are contacts of confirmed cases, and 3854 cases (91.8%) are community infection (Figure 3).
- Clinical presentation of cases: 665 of cases (11.6%) were asymptomatic, 1379 (24.1%) had moderate symptoms, 3432 (59.9%) were severe, and 252 (4.4%) have not reported yet.
- 57.7% are male and 42.2% are female. The average age is 52 (ranging from 1 to 98).
- An increase of COVID-19 cases by 6.4% in October with 1528 cases compare with cases reported on September 1435 cases. Figure 6.
- The current transmission is presented as "community"
- The number of confirmed COVID-19 cases among health workers increased to 211 in mainly in Damascus hospitals, Lattakia, and Aleppo and As-Swieda. 11 HWs deaths were reported among positive COVID-19 cases (6 Damascus, 2 Rural Damascus and 2 in Aleppo and 1 in Homs)
- Total number of 33,711 lab tests were performed in public health laboratories in five governorates Damascus, Aleppo, Homs, Lattakia, and Rural Damascus. The current testing rate is 165 tests per 100,000, and positivity rate is 17%.

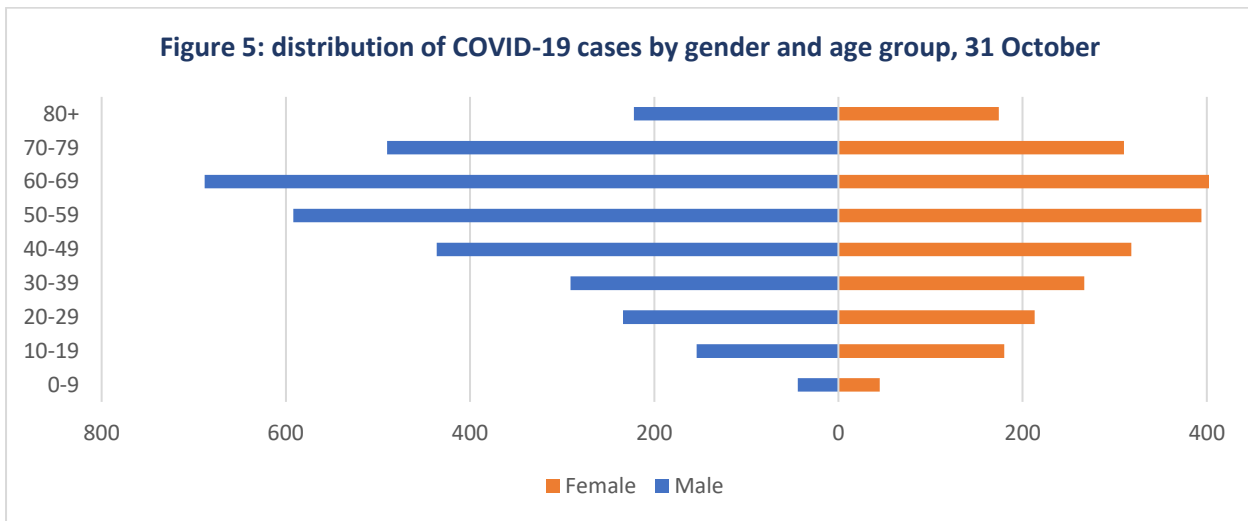
**Table 1:** The number of confirmed cases by governorate

Governorate	Population size	Test done	Testing rate / 100,000	Number positive	Positivity rate	Incidence / 100,000	Deaths	CFR
Damascus	1,835,380	11,423	622	1638	14.34%	89.2	113	6.90%
Rural Damascus	3,160,454	4,701	149	587	12.49%	18.6	15	2.56%
Homs	1,451,058	1,798	124	750	41.71%	51.7	61	8.13%
As-Sweida	379,170	625	165	191	30.56%	50.4	10	5.24%
Al-Hasakeh	1,060,341	257	24	35	13.62%	3.3	2	5.71%
Dar'a	1,015,275	1,161	114	187	16.11%	18.4	2	1.07%
Lattakia	1,186,494	7,423	626	511	6.88%	43.1	14	2.74%
Aleppo	3,933,168	3,854	98	1246	32.33%	31.7	39	3.13%
Ar-Raqqa	690,801	15	2	7	46.67%	1.0	0	0.00%
Deir-ez-Zor	741,249	62	8	16	25.81%	2.2	4	25.00%
Hama	1,342,187	810	60	206	25.43%	15.3	12	5.83%
Quneitra	103,269	814	788	90	11.06%	87.2	4	4.44%
Tartous	906,362	768	85	264	34.38%	29.1	12	4.55%
Idleb	2,588,454	0	0	0	0.00%	0.0	0	0.00%
<b>Total</b>	<b>20,393,662</b>	<b>33,711</b>	<b>165</b>	<b>5,728</b>	<b>16.99%</b>	<b>28.1</b>	<b>288</b>	<b>5.0%</b>

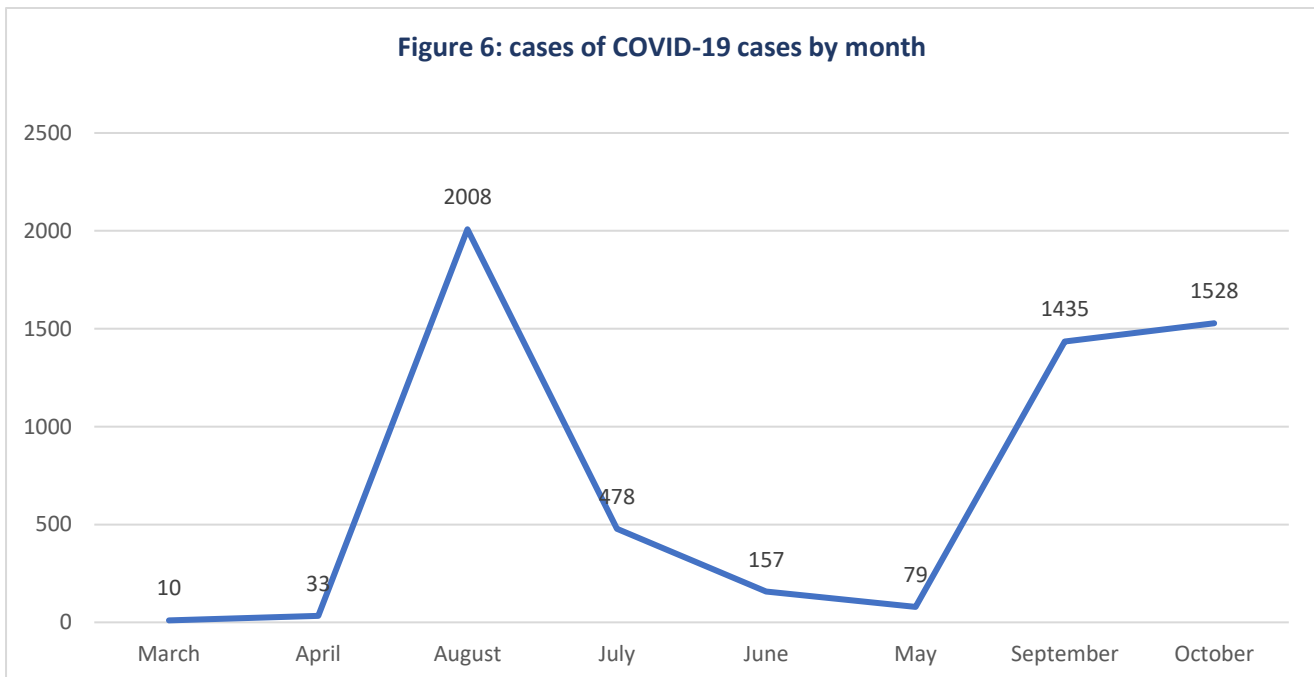
**Figure 4: EPI curve for COVID-19 cases by type of exposure, 31 October**



**Figure 5: distribution of COVID-19 cases by gender and age group, 31 October**



**Figure 6: cases of COVID-19 cases by month**



**Response activities**

- During 1<sup>st</sup> week of October, WHO supported building the capacity of 37 personnel of Rapid Response teams in 14 governorates. The training was provided through WHO EMRO technical support. The aim of the training was to enhance the investigation and response measures to diseases alerts, and with focusing on COVID-19 investigation and response. Since the start of COVID-19 pandemic WHO supported building the capacity of 470 RRTs personnel on COVID-19 investigation and response measures.
- WHO continues to provide needed support for the Rapid response teams (RRTs) to undertake investigation and response of COVID-19 alerts by facilitating the transportation of RRTs, samples collection and transporting to designated laboratory in five governorates. During the reporting period more than 7037 suspected COVID-19 cases

were investigated properly within 24 hours, in addition WHO supported the transporting of 1082 specimens of COVID-19 suspected cases to the central laboratories in four governorates.

## Health facility Functionality

### Public Hospitals

By the end of June 2020, out of the 113 assessed public hospitals [MoH & MoHE], 50% (56) were reported fully functioning, 26% (30) hospitals were reported partially functioning (i.e., shortage of staff, equipment, medicines or damage of the building in some cases), while 24% (27) were reported non-functioning.

79% (89) hospitals were reported accessible, 8% (9) hard-to-access, and 13% (15) 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 (0.6%), pharmacists (0.7%), midwives (4.7%), laboratory (5.1%), specialists (12.6%), resident doctors (23.5%), and nurses (52.4%).

### Public Health centres

By end of June 2020 and out of 1,790 assessed public health centers, 47% (842) were reported fully functioning, 21% (373) partially functioning, 32% (575) non-functioning (completely out of service).

82% (1,473) health centres were reported accessible, 3% (59) hard-to-access, and 14% (251) were inaccessible, while the accessibility status of 0.4% (7) health centres were unknown.

The resident doctors represented (2%) of total health staff at centers' level, along with pharmacists (1%) followed by general practitioners (4%); laboratory (6%); Specialist (7%); dentists (9%); midwives (11 %); and nurses (60%).

## 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 (September) are summarized in the below table.

HRP Indicator 2020 (Per Month)		August	September
Medical procedures	1.1.1 Number of outpatient consultations provided	741,224	951,017
	1.1.2 Total number of trauma consultations supported	16,215	18,352
	1.1.3 Number of mental health consultations supported	16,150	17,493
	1.1.4 Number of physical rehabilitation sessions supported	6,322	1,550
	1.1.5 Number of vaginal deliveries attended by a skilled attendant	4,522	4,357
	1.1.6 Number of caesarean sections supported	3,965	3,753
	1.1.7 Number of cases referred for specialised treatment	88	847

## Child Health

**29,270 children** were immunized in September as compared to 30,036 children in August for Penta 3.

## Reproductive Health

Skilled birth attendants conducted **4,357 normal deliveries** while **3,753 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 has scaled up the testing capacity in Syria since the onset of COVID-19 through:

- Establishing and rehabilitating a designated laboratory for COVID-19 at the Central Public Health Laboratory in Damascus, including conducting intensive training of the laboratory workforce
- Establishing laboratories in Aleppo, Homs, Latakia and Rural Damascus
- Supplying testing technology (equipment, supplies and necessary reagents.);
  - ✓ 5 PCRs and 2 automated extraction machines
  - ✓ Testing kits, enzymes, extraction kits and supplies to perform 46000+ reactions
  - ✓ Related swabs and viral transport medium for sample collection

WHO supported DoHs in **Latakia and Tartous** with 9.8 tons of emergency health supplies (6.7 tons for Latakia, 3.1 tons for Tartous). In addition, WHO supported DOH with 200 oxygen cylinders, 10 nebulizers and 10 ECG machine.

- ✓ WHO is supporting the most affected districts and communities in Latakia with MMTs and MHPSS mobile teams mainly AL-Haffeh, Qurdaha, Shamieh and Jaleh districts
- ✓ WHO through its partners conducted awareness campaign on COVID-19 in both Latakia and Tartous. The most affected areas from the fire are targeted in addition to the schools in these areas.
- ✓ WHO conducted an assessment visits to the affected health facilities particularly in Al Qardaha hospital and Al Haffa hospital in addition to several PHCs to assess the health situation and identify the health needs.
- ✓ WHO supported extra 10 vaccination mobile teams in the rural areas of Latakia to ensure the desired health coverage



How to take blood pressure reading at home - Photo by WHO

## UNICEF

C4D campaigns related to polio were conducted in the governorates of Hassakeh and Arraqqa for three days before NIDs . The campaign reached 21,052 people through community engagement activities such as awareness sessions, community leaders meetings, cars with microphone, and IEC materials distribution.



Awareness Campaign – Photo by UNICEF

## UNHCR

During October an estimated 20,262 IDPs, and 2191 refugees & asylum seekers assisted to access basic package of primary health care services through 14 PHCs supported by UNHCR in Damascus, rural Damascus, Homs, Hama, Aleppo and Al Hasakeh. Services included medical consultations, investigations.

253 refugees & asylum seekers received secondary health care in UNHCR partners' university hospitals. 17,950 PoCs reached by community based health activities in 24 health points in Hassakeh & rural, Aleppo, rural Aleppo, rural Hama, rural Homs, Tartous, rural Tartous, Rural Qunaitra, rural Daraa and rural Damascus, in details 2530 received basic Medical consultation, While 15,420 PoC benefited from health promotion and disease prevention activities.

Treatment courses were provided to 8173 IDPs and 516 refugees & asylum seekers.

200,000 surgical masks delivered to MoH and MoHE (100,000 masks delivered to each ministry) to support health facilities in COVID-19 response.

UNHCR participated in the support to MoH contingency plan for COVID-19 aiming at establishing field hospitals in the sport halls in sports cities initially in Damascus, with a plan to replicate in Aleppo, Latakia and Hama. The field hospitals will assist in reducing the load on hospitals through providing oxygenation and IV treatment for COVID-19 patients with moderate to severe cases who are not in need for

critical care. The support included the delivery of the following items that started late October:

- 225 beds with accessories (pillows, linen and blankets)
- 225 IV poles
- 1000 oxygen cylinders (40 Liters)
- 8 water coolers.

GeneXpert machine with accessories and 100 kits delivered to MoH and installed in Jdaidet Yabous PHC center (Syrian- Lebanese border), to assist vulnerable returnees who have no PCR tests. 200 Pulse Oximeters delivered to Ministry of Higher Education to support university hospitals in the identification and case management of COVID-19 cases.

Breast Cancer Awareness Month: 13 awareness sessions and recreational activities reached out 354 women. The sessions aimed to clarify the importance of early detection and self-examination.



Beds with accessories and Oxygen Cylinders (40 Liters) delivered to Al Fayhaa – Photo by UNHCR

## UNFPA

Provision of psychosocial support services to vulnerable groups in the collective shelters and new displacement locations in the Lattakia through 4 medical mobile teams to provide general health, reproductive health, and family planning in cooperation with Mosaic. UNFPA local partner, Mosaic Human Relief and Development - mobile team, (including 2 doctors & 2 midwives) in rural Lattakia, (Al-Sarkasie village & Beit Hamad farm) distributed 400 hygiene kits and delivered reproductive health services to 173 women.



Essential health services: Photo by UNFPA

## MEDAIR

EDAIR Syria is implementing the following intervention, mainly in the following governorates, Deir el Zor, Aleppo, Hama, South Idlib, Quneitra, Daraa: health facilities rehabilitation and re-equipping, Capacity building and supporting Health Workers and Community Health workers (including malnutrition management trainings and support), support of People Living with Mobility Impairment with the distribution of appropriate assistive devices and Special Hygiene Kits.

MEDAIR Covid Specific Intervention: RCCE in the communities of Medair's Areas of intervention, PPE procurement and distribution, capacity building of staff on COVID awareness, and equipping, rehabilitation of the only isolation centre in Deir Ez Zour City.

During October MEDAIR distributed assistive devices in Quneitra governorate for 105 beneficiaries (58 F,47 M).

The total distributed items were 220 assistive devices, 40 special hygiene kit.

MEDAIR is in the assessment phase to choose clinics for the next cycle intervention in various governorates.



Distribution of assistive device – Photo by Medair

## Syrian Society for Social Development

SSSD conducted home visits to a number of older persons in coordination with UNHCR. The purpose was to check on their health and conduct several check-ups such as diabetes, pressure and temperature measurement. Furthermore, these visits were implemented in Altoun al-Jurd, Baniyas.

15 women were trained on making detergents in coordination with UNFPA in Talkalakh, Homs. These detergents were then distributed among these women.

Disinfection campaigns were implemented in Rural Damascus (Mojammaa Shabaa, Harasta, and Qudsaia), in coordination with OCHA. These campaigns included disinfecting 14 schools, four mosques, two kindergartens, two dispensaries, three public ovens, one educational institute, as well as two Reformatories for Juvenile Delinquents (Khalid Ibn al-Waleed and Al-Ghazali).

SSSD implemented two disinfection campaigns in Damascus, one at the Institute of Education for Delinquent Girls, and another at the Dar Karama for Elderly. Breast cancer awareness campaign were implemented in several governorates, including Rural Damascus, Idlib, Tartous and Hama. The latter is done on the "Pink Month" in collaboration with Syrian Family Planning Association.



## A Human-interest Story

Mrs. Fawza, 38 year old, mother of six children, and pregnant in her ninth month, from Al Hader village.

Fawza visited the WHO-supported Altaaluf clinic in Al Hader to be examined in the gynecology clinic. During the examination by the specialist doctor, it was found that she has a history of surgery and need caesarean. She was referred to the hospital where the birth took place free of charge and without any complications. The patient was provided with the health advice to be followed for her safety.

Afterward, the lady visited the clinic for health checkups on her and for her newborn child. The mother was provided with the vitamins necessary for her health and the health of her child.

While Fawza was in the center, the psychological support specialist noticed the effects of fatigue and exhaustion on Fawza's face, and by talking to her, it was found that she was in a state of tension and nervousness because of her inability to accomplish her household tasks. The specialist focused on the importance of time management in proportion to her current circumstances.

Fawza felt relieved and thanked the entire team for the services and care she received in the clinics and the hospital, and expressed this by saying:

**"I was afraid of the operation, but all praise be to Allah, it was successful. In addition, the treatment and service are excellent. They took great care of my child and me. May God bless you and many thanks."**



MHPSS session with a patient: Photo by Al-Ta'alouf

## WHO provided a lifesaving support to people affected by fire

10 years of Syrian conflict has left many people suffering from economic, social, and health distress, people became much more vulnerable to drastic factors and disasters. Specially now with the spread of COVID-19 and the implications of curfew, left people suffered even more both socioeconomically and mentally. People in rural Latakia are mostly farmers and mainly rely on their lands to make a living. Grazing animals and harvesting plants is a necessity to feed their families and make a small business.

**8<sup>th</sup> of October 2020** was a black day for many accommodating in north, east and west sides of Latakia rural areas. More than 140 huge fires broke out, causing a damage over 190,958 acres of green lands and farms, 6,930 beehives were burned, 3,125 poultry farms were destroyed, More than 300 head of cattle mainly cows were deceased, more than 40,000 families were directly affected by the fire and around 100,000 people were evacuated.

Oula is a 47-year-old mother living in AL-Qurdha village with her husband and 4 children (Ali 14y, Mohamad 11y, Haidara 9y, and Yousef 4y). "On Thursday around 11:00 p.m. the children were asleep, and we were in the living room when we heard the news on TV that there are some fires in Latakia but we assumed we are far from the incidents," she said. "30 min later we could smell the fire and the smoke entered our house suddenly, we opened the windows, and we saw a huge flame of fires reaching up the mountain towards our house burning everything in the way"

Quickly Oula and her husband ran to wake their children, collect their personal belongings and escape from the house. The family at some point separated, Yousef their youngest child froze and broke into tears. Oula had to carry him in hands in addition to some of her stuff and ran outside, while the father with his three children went to the back yard to free their cow and chickens "as its their only fortune" they said.

Unfortunately while running outside their house among the fire into a safer place, a burning tree

branch fell off on Oula and Yousef and they got stuck under the tree. Oula's husband freed them and took them by their neighbor's vehicle to Al-Qurdaha hospital (which was later evacuated as well due to the fire) and they were relocated to Jableh hospital. Oula suffered from third degree burns in her arms, legs, neck and face while Yousef who was protected in his mother's arms suffered from second degree burns in his legs.

**WHO immediately responded to the fire outbreak, 5 WHO mobile clinics were deployed in the area,** WHO supported Latakia DOH with nearly 8 tons of emergency health supplies, and supported Latakia DOH ambulances with 200 oxygen cylinders, defibrillators, nebulizers and other emergency and trauma devices. Oula and Yousef received treatment in AL-Qurdaha and Jableh hospital. Both hospitals received burn kits from WHO which played a major role in their treatment.

**Plans for next month**

Coordination with WoS for development of health sector HNO 2021

Mapping COVID 19 supplies to identify needs and gaps

Mapping health services in Al Hol Camp and COVID 19 treatment facility

After 20 days from the incidence, WHO conducted a field visit to Oula's family, to check on their progress of treatment. Thankfully, their condition is stable, their house astonishingly survived the fire as the fire fighters came in the right time. WHO supported Oula and her family with a first aid kit containing different types of bandages, gauzes, and cotton in addition to burn ointments and emergency and NCDs medicines. WHO conducted a basic life-support training and helped Oula to self-change her bandages and teaches them how to carry on essential first aid treatments when needed. PSS support to Oula and Youssef and health tips on COVID-19 was also provided to Oula and her family.



First Aid support to a family – Photo by WH

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