

REGIONAL QUARTERLY UPDATE SEPTEMBER 2016



HIGHLIGHTS:

In Turkey, partners provided transportation assistance during the month to over 1,000 refugees in Adiyaman camp to enable them to access health facilities in Adiyaman's city centre, Adana and Gaziantep. This is a daily transportation service.

In Lebanon, in partnership with the Ministry of Public Health (MoPH), 11 trainings were conducted for nearly 300 health workers on the service delivery guidelines for reproductive health. Partners also conducted trainings on the rational use and management of medicines benefiting 178 health workers, while 30 community workers were trained on Integrated Young Child Feeding, routine immunization, and screening for acute malnutrition. Sixty-seven workers from 13 national health care centres were trained in mental health, in line with MoPH efforts to integrate mental health into primary health care. Some 170 evicted refugee families were provided with consultations and medications.

In Jordan, nearly 950 women of reproductive age both in camps and host communities were screened for anaemia and were provided with supplements and nutrition education sessions. Additionally, 553 children under five years (U5) in Azraq camp and 334 U5 children in Zaatari camp were screened for malnutrition and those identified with moderate acute or severe acute malnutrition were provided with necessary treatment.

In Iraq, over 25,000 consultations were conducted in primary health care facilities in camps while more than 1,000 patients were referred to secondary and tertiary hospitals for further investigations and/or hospitalization. Mental Health Gap Action Programme training was conducted in Erbil Governorate in collaboration with the Ministry of Health. Four camps in Erbil continue to be supported with medications including antibiotics, analgesics and chronic disease medications.

In Egypt, a health advocacy event was organized in the 6th October city to provide Syrian refugees with information on healthcare services provided by the Partners in the different governorates.

NEEDS ANALYSIS:

The Syria crisis continues to place a huge strain on public health infrastructure across the five countries and has resulted in overwhelming patient caseloads, overworked health staff and shortages of medicines and equipment. Support by 3RP partners for the construction, expansion, and rehabilitation of health facilities needs to be further scaled up.

Vulnerable populations continue to be at heightened risk of communicable diseases due to overcrowding, substandard housing, limited access to safe water and sanitation, and varying degrees of access to primary health care (PHC) services. Management of non-communicable diseases also remain a major challenge. With the conflict now in its sixth year, the need to enhance mental health care services is becoming increasingly critical.

Access to reproductive health care services remains a key concern across the region with around four million women and girls of reproductive age assessed to be in need of special attention. Among children, improvement of health care services for newborns and need for routine immunization against vaccine-preventable illness remains a priority. The need for health and hygiene messaging is also a key focus area.



Taking vital signs in the triage room, Gawilan camp Primary Health Centre, Iraq

35%

100%

56%

Sector Response Summary:



Health Sector Funding status:



USD 300 million required in 2016 USD 169 million received in 2016

PARTNERS SCALE UP SUPPORT TO PUBLIC HEALTH FACILITIES IN 3RP COUNTRIES

HEALTH &

NUTRITION

The Syria crisis continues to place a huge strain on the public health infrastructure of the refugee hosting countries. Health Partners have scaled up their support for the construction, expansion and rehabilitation of the health facilities, including capacity building of health care staff.

In Turkey, partners in collaboration of the Ministry of Health, have established three new women and girls safe spaces (WGSS) bringing the total number of WGSS to 23. Spread across 13 cities, these spaces provide women and girls (both from refugee and host communities) with sexual and reproductive health services – including family planning, counselling, income-generation training, language classes, and legal guidance.

In Lebanon, to strengthen the country's cold chain system, partners provided 22 walk-in cold rooms along with 16 voltage regulators to the Ministry of Public Health (MoPH) and 12 solar fridges to Social Development Centres run by the Ministry of Social Affairs (MoSA). Training was provided to the staff of MoPH and MoSA on nutrition screening and management of acute malnutrition. Partners also provided medical equipment and first aid kits to MoPH to support the primary health care services.

In Jordan, an inter-agency nutrition survey amongst Syrian refugees was carried out by the partners under the supervision of Ministry of Health (MoH). Partners together with the MoH are in the process of updating the reproductive health protocols to ensure evidence based guidelines with focus on anemia detection and management.

In Iraq, partners supported 10 primary health care centres in Erbil with furniture and supplies to improve provision of quality health care services for about 100,000 refugees and host community members.

In Egypt, Health Partners worked closely with the Ministry of Health and Population to identify the needs of the public health units located in areas that are densely populated by Syrian refugees, and to finalize the procurement of 10 neonatal incubators to enhance the capacity of two main hospitals in Giza Governorate.

REGIONAL RESPONSE INDICATORS: JANUARY - SEPTEMBER 2016

	Progress	Planned Response, by end-2016
1,895,191 consultations for target population in primary health care services	45%	4,229,784
143,168 referrals of target population to secondary or tertiary healthcare services	46%	308,100
303 health facilities supported	85%	358
5,153 health care staff trained	98%	5,241

These dashboards reflect the achievements of the more than 200 partners, including governments, UN Agencies, and NGOs, involved in the 3RP response in Egypt, Iraq, Jordan, Lebanon and Turkey. Progress and targets may change in line with data revisions. All data on this Dashboard is current as at 30 September 2016