WHO-supported mobile medical teams work around the clock to provide essential health services to IDPs from Afrin hosted in Tal Refaat and surrounding areas.

**Photo: WHO Syria**

<table>
<thead>
<tr>
<th>137,070</th>
<th>80%</th>
<th>8</th>
<th>63,000</th>
<th>12,151</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated number of people displaced from Afrin</td>
<td>Of health staff have left Afrin district</td>
<td>WHO-supported mobile teams active in Nabul, Zahraa, Tal Refaat</td>
<td>Treatment courses delivered by WHO in April</td>
<td>Children vaccinated against polio and/or measles</td>
</tr>
</tbody>
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**SITUATION**

- An estimated 137,070 people remain displaced in the Tal Refaat area, Nabul and Zahraa, Fafin, and surrounding villages.
- According to reports from partners, all hospitals in Afrin are currently closed and there are no secondary health care services available in Afrin district. The health partners discussed the modalities of reopening the services with the local authorities. OCHA and WHO hub are following up this worrying situation.
- There continues to be a severe lack of health care workers to meet the immediate and long-term health needs of IDPs. An estimated 80% of health staff has left the district.
- Only sporadic returns to Afrin occur. Reportedly, IDPs are not able to cross check points on the streets leading to Afrin district.
- WHO faces a funding gap of $5.4 million for its Afrin response operations to provide lifesaving assistance and services to more than 240,000 people in need as a result of the ongoing conflict.
WHO RESPONSE

I. IMMEDIATE INTERVENTIONS

Coordination

- Daily coordination is in place with health authorities, SARC, NNGOs and UN sister agencies to facilitate the work of mobile medical teams in IDPs location and avoid any expected duplication.
- New map on current availability and functionality of public and supported health facilities Afrin IDPs location has been developed and shared with health sector partners.

Essential outreach services

- 8 WHO-supported and NGO-managed mobile medical teams are active in Nabul, Zahraa, Tall Refaat and surrounding villages. The teams, consisting of 40 health care workers, are working round the clock to respond to growing health care needs. 1499 medical consultations were provided by WHO-supported NGOs during the reporting period, with common conditions including acute diarrhoea, upper respiratory infections, and lice as the most reported communicable diseases among IDPs.
- 1 WHO-supported static health point is also operational in Nabul, with four specialist doctors, 3 nurses and 3 health workers providing primary health services to an estimated 30,000 IDPs accommodated in collective shelters and host communities. 364 medical consultations were provided during the reporting period.
- A WHO-supported and SARC-managed hemodialysis centre is active in Nabul (with a capacity of 4 devices). 33 registered kidney failure patients, of which 27 are from Tal Reafeat and its surrounding areas, have been registered at the centre and receive treatment on a regular bases.
- 2 shipments (2.3 tons) of WHO medical supplies and equipment were delivered to SARC during the reporting period. In total in April, 13 tons of health supplies were delivered by WHO, including medicines providing up to 63,000 treatment courses, and medical equipment including a portable X-ray machine, diagnostic ultrasound system, electrocardiograph, hemodialysis machines and laboratory devices.

Mental and psychosocial health support services

- 4 social workers are providing physiological first aid and basic psychosocial support services.
- 8 WHO mhGAP trained doctors have been deployed in mobile clinics to the IDP sites. WHO-trained counselors are also providing consultations in Nabul and Zahraa.
- 3 shipments of psychotropic medications were delivered to SARC and 2 NGOs, sufficient for up to 2383 treatment courses.

Immunization and communicable diseases

- DoH mobile teams are reaching IDPs in 12 locations in Azzaz health district for vaccination activities and active disease case finding (with operational costs covered by WHO).
- Routine immunization is active in 3 DoH fixed post in Nabul, Zahraa, Deir Jmal, Kafar Naya, and Meskan. 10,067 children have been vaccinated with oral polio vaccine (OPV), 634 with inactivated polio vaccine (IPV), and 1450 with measles as a rapid response to suspected measles cases in the area.

WASH:

- A survey of drinking water sources was conducted on 12 April in Fafin and Kafar Naya IDPs locations, in coordination with SARC. This survey will be repeated on regular basis. A total 14 water points were checked and the water quality was found to be acceptable.

II. HOSPITALIZATION OF CRITICAL CASES

- Coordination with DoH and SARC is ongoing to facilitate medical evacuations. Approval was received from MoFA to facilitate medical evacuations for IDPs who fled from Afrin and are currently in Nabul, Zahraa and surrounding villages to the city of Aleppo.
Supported by WHO, SARC facilitates the referral system to Zahraa local hospital through 4 active ambulances. To date, 33 patients have been supported though this system, including 21 obstetric deliveries.

III. CROSS BORDER

- Health partners provide primary health care in Afrin district, Afrin city and in the countryside where populations are dispersed. Partners are working in 5 fixed primary health care sites and in 5 mobile clinics.
- WHO has equipped 5 fixed primary health clinics and 4 mobile clinics with medicines and emergency supplies.