

### Epidemiological Overview

Between 25 August and 21 January, 84,607 suspected cases have been reported from all 14 governorates, including 101 attributed deaths to date at a case fatality rate of 0.12%. While the reported number of suspected cholera cases in some areas has slightly decreased, the total number of reported cases has increased.

To date, 4,008 stool samples have been cultured, of which 933 have tested positive for Vibrio Cholera. The positivity rate is 23.27%. Further to that, a total of 4,517 samples were tested with rapid diagnostic tests, with 1,911 of them testing positive. The overall proportion of RDT-positive cases is 42.3%.

In week 3, 2023 a slight decrease of AWD cases (n= 2,750 cases) was observed by 2% compared with week 2 AWD cases, while in some areas of NWS (Idelb and north of Aleppo), there was an increase of cases in some of the sub-districts (Dana, Maarat Masrin, Idleb, Azaz, and Jarablous).

The slight decrease in GoS and NES is most likely due to a combination of measures such as effective response interventions, the OCV campaign, and the winter season, which normally results in a decrease in waterborne illness each year, as well as reduced environmental exposure in winter compared to the summer season when outdoor activities are more common.

In camps, a total of 7,313 suspected cases and 7 associated deaths have been reported from IDP camps in NES and NWS.

The most affected governorates to date are: Idleb (24,124 cases, 28.51%), Deir Ez-Zor (20,671 cases, 24.43%), Aleppo (19,438, 22.97%), and Raqqa (16,366 cases, 19.34%)

- Suspected Cases**  
84,607
- Positive Cases**  
1,911
- Cholera Sus. Deaths**  
101
- Case Fatality (CFR)**  
0.12%
- Overall Attack Rate**  
0.4%
- Affected Governorates**  
14
- Grade**  
2

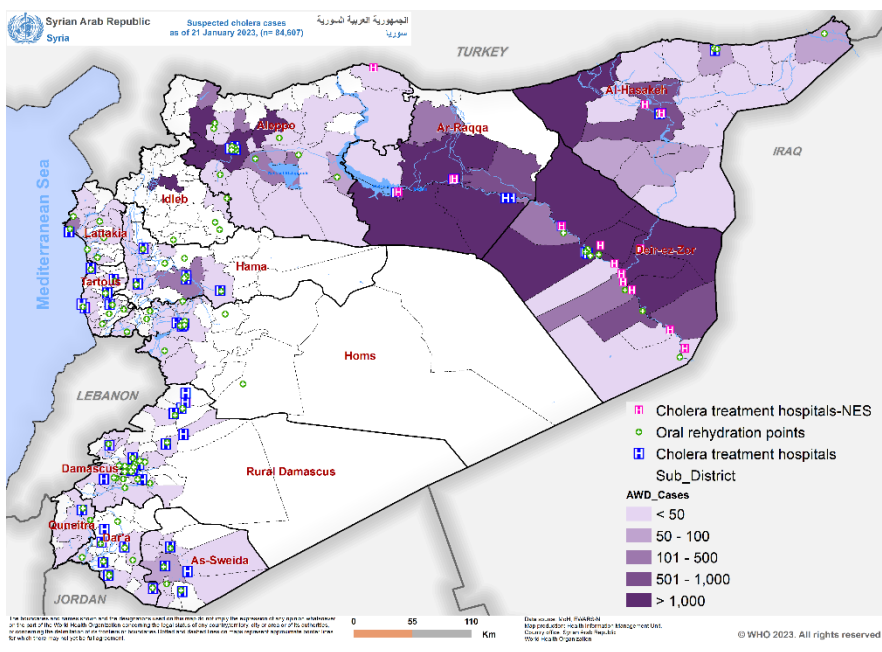


Figure 1 Distribution of suspected cholera cases by date of onset as of 21<sup>st</sup> Jan 2023

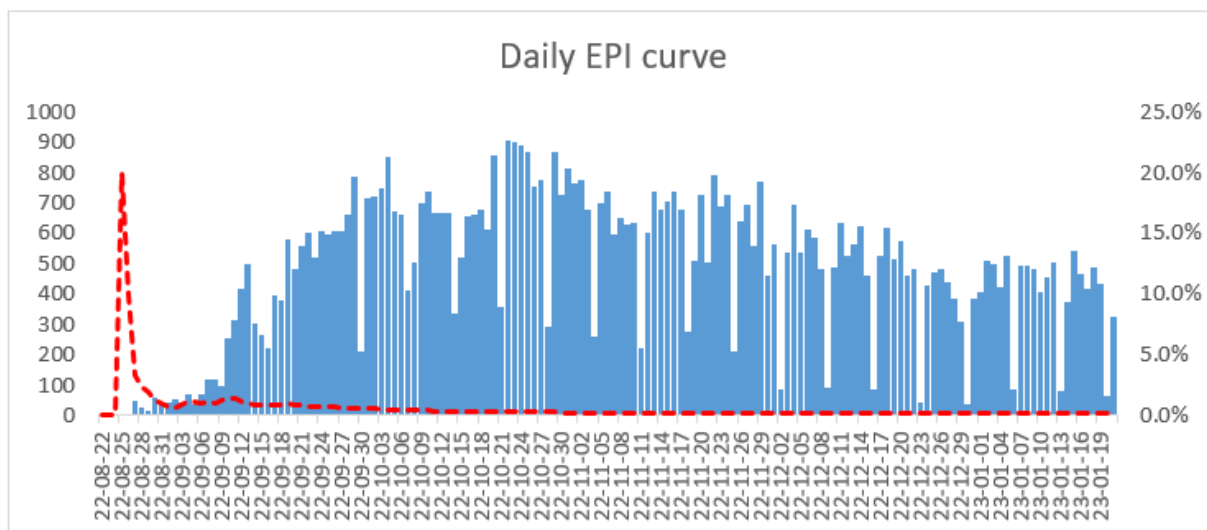
### Epidemiological Data

Table 1 provides a breakdown of reported suspected cholera cases and deaths, as well as the number and type of tests performed in Syria's governorates.

Table 1: Epidemiological data, as of 21 January 2023

	Suspected Cases (AWD)	Attack Rate (%)	RDTs	Positive RDTs	Culture + Tests	Attributed Deaths	CFR%
Aleppo	19,438	0.47	2,015	1,032	244	46	0.2%
Al-Hasakeh	3,282	0.28	619	115	23	4	0.2%
Ar-Raqqa	16,366	2.13	349	74	100	10	0.1%
As-Sweida	81	0.02	83	26	2	0	0.0%
Damascus	46	0.00	99	20	10	1	0.0%
Dar'a	22	0.00	18	5	0	0	0.0%
Deir-ez-Zor	20,671	2.65	703	419	100	24	0.1%
Hama	180	0.01	160	52	48	1	0.6%
Homs	58	0.00	55	31	25	1	0.0%
Idleb	24,124	0.85	148	8	344	14	0.1%
Lattakia	184	0.01	162	98	31	0	0.0%
Quneitra	17	0.02	23	4	1	0	0.0%
Rural Damascus	110	0.00	55	17	3	0	0.0%
Tartous	28	0.00	28	10	2	0	0.0%
<b>Total</b>	<b>84,607</b>	<b>0.40</b>	<b>4,517</b>	<b>1,911</b>	<b>933</b>	<b>101</b>	<b>0.12%</b>

Table 2 Distribution of suspected cholera cases by date of onset, as of 21 January 2023



## Cholera Outbreak Response

### Health

#### Leadership and Coordination

- WHO continues to coordinate the overall cholera response and Health and WASH clusters are jointly coordinating the overall cholera response, at WoS and Hubs levels. WHO, UNICEF, and OCHA are working together to ensure the leadership of the different response pillar
- WoS Cholera Response Plan Jan – June 2023 draft is being finalized including lessons learned from the last three months' response operations. The plan will be released end of January 2023.
- Bi-weekly situation reports on the cholera outbreak continue to be published /produced
- Joint monitoring activities under the M&E framework outlined in the Response Plan are ongoing.
- GZT Cholera taskforce has initiated a review of the response in NWS and will produce recommendations to improve the quality of response during the next few months and inform future outbreak preparedness and response.

#### Surveillance and Laboratory

- Integrated EPI analysis of case distribution every week is produced
- Cholera tests continue to be performed by health partners, particularly RDTs and stool specimens for culture. The culture sensitivity tests are still being carried out.

#### Case Management

- Health partners are maintaining support for the designated CTCs/ CTUs to function across Syria.
- Cascade/refresher training of health care personnel on cholera case definition and case management are ongoing.

#### Oral Cholera Response (OCV)

- The OCV campaign was conducted in the most affected areas – Al Hasakeh, Deir-Ez-Zor, Ar-Raqqqa, and Aleppo with more than 60% of these doses delivered in crossline areas.
- According to the final administrative data reported, 1,944,807 million people above one year of age were vaccinated in the targeted governorates which represent 98% of the targeted population.
- The reported wastage rate of the vaccine was 2.4% only, and no vaccines are left at any level.
- No cases of Serious Adverse Events Following Immunization were reported during or after the campaign.
- The Post Campaign Assessment was concluded in 3 of 4 governorates with Al-Hasakeh still in progress. Data to be shared once finalized.
- In NWS, WHO is in the process of contracting implementing partners to carry out OCV campaign in NWS focusing on the most impacted districts in a blanket approach.
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### Water Sanitation and Hygiene (WASH)

#### WASH Rapid Response:

- WHO provided 3.5 million aquatabs to the Department of Health (DoH) for wider distribution to governorates.
- 12,268 cases have received assistance by the mobile teams deployed by NES WASH NGOs.

#### Access to Safe Water:

- In GoS, combined WHO and UNICEF water safety plan in drafting process.
- **In NES:**
  - **Chlorination and water quality control** at 81 Euphrates filling stations (-> 211,000 m3 of water – this will continue till end of March) and checkpoints around Al Hasakeh, 80,463 trucks -> 920,000 m3 of water being chlorinated
  - **Support to Water stations:**
    - 36 WS received light support to improve treatment system. 33 WS ongoing.
    - 96 Tons of chlorine HTH were provided
  - **Water quality surveillance system:**
    - 76 WS/piping systems are being tested on regular basis.
    - 9% tests showed no chlorination at WS (FRC=0)
    - 13% tests showed no chlorination at HH/piped level
  - **WASH in schools:**
    - 46 schools have received support with HP and soap distribution and it is going on in 45 schools.
- **In NWS:**
  - The WASH cluster field facilitators have completed the first round of surveillance covering the whole NWS area. In total 1,373 camps and 773 communities were assessed in 35 sub-districts and the following are the key results:
    - **In camps**, 24% of the samples tested were at 0 FRC level
    - 41% of the samples were between 0.1 – 0.3 mg/l FRC
    - 8% indicated a sign of over chlorination with over 0.7 mg/l FRC
    - The WASH cluster field facilitators treated water in 3,203 water storage tanks and jerry cans where the FRC was found to be 0 mg/l
    - Most of the population who receive water every three days and more, are purchasing from private untreated sources even if they get the full planned quantities of the three days.
    - **In communities**, 87% of the samples tested were at 0 FRC level
    - 10% of the samples were between 0.1 – 0.3 mg/l FRC
    - The WASH cluster field facilitators treated water in 5,673 water storage tanks and jerry cans where the FRC was found to be 0 mg/l

### Risk Communication and Community Engagement (RCCE)

- **In NES:** the total number of individuals who received awareness sessions about cholera prevention and control in all NES are 394,000 individuals by NES RCCE.
- There are 302 community workers support and provide RCCE cholera awareness sessions across NES.
- **In NWS,** overall, 18 RCCE partners reported their RCCE activities, reaching a total of 97, 445 beneficiaries in NW Syria through cholera prevention awareness sessions. Breakdown of activities below:
  - 15,750 households catering to 51,509 beneficiaries were reached with awareness sessions on cholera.
  - 13,651 views on social media (Facebook, telegram, YouTube, websites, WhatsApp, etc.).
  - 9,096 individual awareness sessions were held catering to 10,710 beneficiaries.
  - 7,924 mothers and caregivers of children were reached through awareness sessions
  - 362 community leaders and 97 religious leaders were reached with cholera awareness messages.
  - 12 awareness-raising group sessions were held at schools catering to 29 teachers and 818 students.

### Logistics, Equipment, and Supplies

- In NWS, lab kits to test for Adeno virus and Rota virus have been procured and will be used to test for causes of OAD among under 5 year old children. 1000 Rapid Diagnostic Tests for cholera have been distributed to all functional CTCs/CTUs and the 3 operational labs. 1000 more tests are in stock in Turkiye, and will be delivered inside NWS in February, and 4000 tests are in the pipeline, expected to arrive in Turkiye at the end of February. This enables GZT hub to roll out the use of RDTs in a steady manner. The cholera Task Force is preparing the roll out and monitoring plan for all these tests.

### Challenges / Gaps

- Lack of funding is posing an imminent risk of discontinuation and projects ended in December 2022 for the case management (CTCs/CTUs and ORPs). Many CTCs and ORPs were closed.
- **In NES:** Out of the 6 current WASH partners active in the response, 3 of them are stopping or reducing significantly their response by 31st January
- Similarly, in NWS, Because of the cessation of services in some camps, a flood of septic tanks was noticed
- New security developments across northern Syria may change the dynamics of response if escalated, particularly the OCV campaign roll-out.
- Short term extension of cross-border mandate prevents long term robust planning
- Limited lab capacity to test for Other Acute Diarrhea.

- Lack of funding for sewer networks, including rehabilitation, maintenance, covering open sewage lines, and establishing new sewage treatment plants. In NWS, since September 2022, 63 camps showed a sign of open defecation and in-site open sewer lines
- Most wastewater is untreated and discharged without proper management.
- Most irrigation is done using raw sewage water.
- Refusal of people to chlorinate water remains an issue.
- Difficulty accessing some camps, especially those built on agricultural lands where the roads are cut off when it rains
- Alouk water station is still not operational.

### Key Priorities

- Sustain the functionality of existing CTCs/CTUs and re-scale up ORPs
- Ensure conducting second cascade training for frontline clinicians
- Address the alarming issues of WASH in schools.
- Provision of cholera-specific hygiene kits (jerrycans, soap, aquatabs) especially to those camps which haven't received any before.
- Urgent advocacy for Funding and action to support installing solar energy systems to secure energy for the operation of water pumping stations and improve water and sanitation systems in schools
- Continue to work on strengthening the surveillance system and lab capacities

#### For inquiries, please contact

Dr. Abdihamid I Ahmed  
Whole of Syria Health Sector Coordinator  
WHO EMRO– Amman  
Email: [abdihamidi@who.int](mailto:abdihamidi@who.int)

Giuliaserena Gagliardini  
Whole of Syria WASH Cluster Coordination  
UNICEF MENA – Amman  
Email: [ggagliardini@unicef.org](mailto:ggagliardini@unicef.org)

Laura Sunnen  
OCHA Regional Office for Syria  
Email: [laura.sunnen@un.org](mailto:laura.sunnen@un.org)