



The number of health workers assisted with training by sector partners across the region has now reached almost 3,000 in 2014

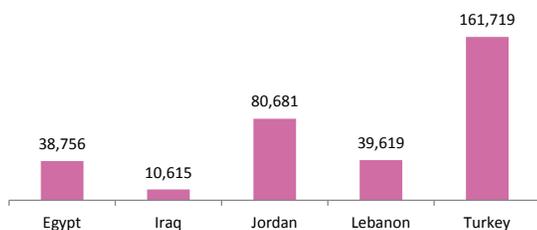
## AUGUST HIGHLIGHTS:

**Polio vaccination** continues to be provided to children across the region. In Jordan, a sub-national polio immunization campaign for hard-to-reach areas was successfully conducted in August, with the total number of vaccinated Syrian children inside and outside the camps being 68,274. In Iraq, a subnational mass polio vaccination was conducted in 13 high risk governorates over five days in August, reaching a total of 3.73 million children under 5 years, representing 94 per cent of the targeted children.

In Egypt, health partners are supporting a project aimed at helping the Ministry of Health (MoH) to mainstream Syrian refugee families and households along with nationals in MoH **primary health care** facilities. Information flyers have been disseminated to Syrians residing in Alexandria and Damietta to raise their awareness on free or subsidized family medicine, maternal and child health care services along with birth registration, immunization and other essential primary care services. Across Iraq, more than 21,000 refugees utilized primary, secondary and tertiary health care services provided by the Directorate of Health (DoH) and NGO partners with the support of UN agencies during August.

In Lebanon, there has been a concerted effort on strengthening the screening and management of **acute malnutrition** at primary and secondary health care levels by partners and UN agencies in collaboration with the government. This includes screening for malnutrition at community level including health promotion on optimal Infant and Young Child (IYCF) practices. Whilst the nutritional status of refugees in Lebanon is not considered alarming at present, it requires ongoing surveillance. In Turkey, sector partners conducted a joint training on the preparation for the "Nutrition Survey for Syrians inside Turkey" in Ankara. In Jordan, almost 850 children between 6 months and 5 years were screened at the border for malnutrition during August, with the global acute malnutrition rate remaining low among new arrivals at 0.6 per cent.

Referrals of Syrian refugees to secondary or tertiary healthcare services in 2014



Lebanon/Syrian refugees/ A Syrian child assisted in a primary health center supported by partners of the Public Health sector

## SYRIAN REFUGEES IN THE REGION:

2,986,008

Refugee Population, end-August 2014

3,590,000

Refugee Population Planning figure, end-2014

## NEEDS ANALYSIS:

Syrian refugees outside camps have free access to national health care systems in all RRP countries aside from Lebanon. For refugees in camps in Iraq and Turkey, free access to primary health care is provided by national health systems (and in the case of Iraq through humanitarian partners), whereas in Jordan, refugees accommodated in camps have their primary health care needs met by RRP partners. RRP actors support an estimated 75 per cent of the cost of primary health care services for Syrian refugees.

RRP partners provide access, and cover costs, for secondary and tertiary health care for the most vulnerable refugees in all countries in the region through targeted, and means-tested, processes with the exception of Turkey. RRP partners report that national health care systems are strained to meet the increased health needs of refugees. Mental health needs are growing, exceeding service providers' capacity to respond to the needs, including for survivors of torture, violence and post-traumatic stress syndrome.

The utilization by women of ante-natal services is low, and there are higher than regional rates of caesarean deliveries, leading to higher costs and greater risks to mothers and infants. In addition, ensuring that women have access to normal delivery services is an ongoing necessity. Assessments indicate the need for prevention services to avert deterioration of acute malnutrition and also a need for micronutrient intervention. Infant and young child feeding indicators show poor feeding practices.

Given the incidence of polio and measles and the higher risks of outbreaks of other vaccine-preventable diseases, additional support is required to promote and provide immunization services to refugees and host communities.

## REGIONAL RESPONSE INDICATORS:

2,592,049 consultations for Syrian refugees in primary health care services

2,592,049

Planned Response, by end-2014

3,717,000

331,390 referrals of Syrian refugees to secondary or tertiary healthcare services

331,390

717,000

69,604 antenatal consultations for Syrian refugees

69,604

423,000

2,984 health workers trained

2,984

11,300

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Planned response based on full funding of RRP6 for an expected population of 3.59 million Syrian refugees in the region by end-2014. As at end-August 2014, there were 2.98 million refugees in the region and the overall RRP6 appeal was 44% funded.