



**94,817** acute/chronic Primary Health Care consultations for girls, women, boys and men since the beginning of 2015

### DECEMBER HIGHLIGHTS:

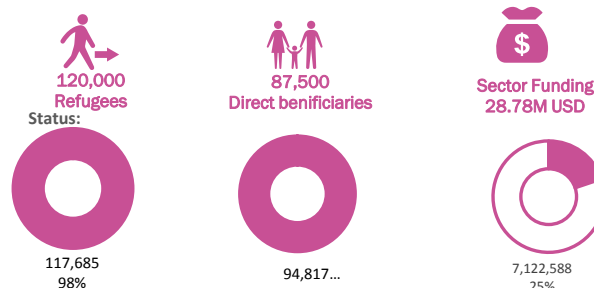
- The delivery of diagnostic medical equipment for 20 Ministry of Health primary health facilities and Ministry of Health (MOH) directorates' administrative offices was completed in Cairo, Alexandria, Damietta and other remote border Governorates namely Marsa Matrouh and the Red Sea .
- As part of the National Stop TB Partnership in Egypt initiated by MOH National TB Program, and in line with Egypt success in reducing TB annual incidence as well as prevalence rates, seven campaigns for active case detection of TB among migrants, POCs and host communities were conducted over 3 days in refugees residing areas. During the campaigns, the detected TB cases were referred to MoH chest clinics and Refuge Egypt clinics. The campaigns were coordinated by UNHCR in partnership with Refuge Egypt and Caritas.



Primary and specialized health care provision through a variety of primary care clinics and specialized referral hospitals. Egypt - Cairo, S.Nelson/UNHCR

### Key Figures:

#### Planned Sector Response:



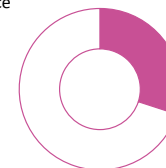
### 2014 Health Benchmarks:

- During 2014 implementation of the Regional Response plan (RRP6), there were at least 115,040 consultations in primary health care service representing on average 4 out of 5 Syrian refugees had received a consultation from primary health care services.



4 out of 5 Syrian refugees on average had received consultation from primary health care services during 2014

- During 2014 implementation of the Regional Response plan (RRP6), there were at least 45,238 referrals to secondary and tertiary health care service representing on average 3 out of 10 Syrian refugees were referred to secondary and tertiary health care service



3 out of 10 Syrian refugees on average were referred to secondary and tertiary health care service during 2014.

### NEEDS ANALYSIS:

- Syrian refugees are largely urbanized and predominantly integrated within the host communities of five governorates: Giza, Greater Cairo, Alexandria, Damietta and Qalyubia.
- They are scattered in some 24 governorates in some 230 districts but mostly residing in greater Cairo, Alexandria and Damietta.
- Syrian refugees living scattered in urban Egypt, imply operational challenges for the health sector, such as: inequitable distribution of health facilities; lack of standardized diagnosis and treatment protocols; lack of prioritized and needs-based referrals and varying health services costs especially within the private sector .
- Refugees living in Egypt suffer therefore a 'dual burden' to their health as a result of their concentration in urban areas. This is linked to the increased risk of diseases associated with overcrowding, poor sanitation and hygiene as well as a result of a dietary transition.
- Access to healthcare remains therefore a challenge because of distance and cost. Moreover, referral to secondary and tertiary health care suffers resources limitations to manage lifesaving ailments.
- Monitoring referrals, and ensuring a cost-effective secondary and tertiary health care in the refugees areas of residence remains a challenge and the sector objective is to keep improving access, quality and coverage to health services for Syrian refugee in Egypt by supporting the Ministry of Health facilities, strengthening UNHCR's health providers' capacity and awareness raising among Syrians through community health outreach program.

### REGIONAL RESPONSE INDICATORS: DECEMBER 2015

94,817 Acute/chronic PHC consultations for girls, women, boys and men

598 Trained PHC staff both gender

72 Supported health facilities in impacted communities

43,400 Referrals to secondary and tertiary level of care

15,469,098 children receiving polio vaccination

