



Syrian Arab Republic Cholera Update

19 October 2022



Volunteers and facilitators, supported by UNICEF, conducting door-to-door visits, and sharing critical information on the causes, symptoms, and prevention of cholera with caregivers and parents during awareness-raising sessions in the Nashwa neighbourhood, Hasakah city, northeast Syria, on 26 September 2022. credit: UNICEF/UN0715232/Souleiman/

Current Situation

According to the latest Epi data from WHO Syria, 75 deaths (case fatality rate 0.37%) and 20,014 suspected cases of cholera have been reported between 25 August and 15 October, of these 26% are children under 5 years old. The number of confirmed and suspected cases continues to rise quickly. All 14 governorates have reported acute watery diarrhoea (AWD) cases, 12 of these positive by cholera rapid diagnostic testing. According to the last WASH assessment, the currently most affected Governorates¹ present also the lowest sewer connection rate and are strongly affected by water crisis.

Approximately 65 suspected cases have been detected in 10 internally displaced people's (IDP) camps and sites in NES, including two positive rapid diagnostic tests in Serykanie camp in Al Hasakeh, and 441 suspected cases were reported from camps in Jarablus, Afrin, A'zaz and Harim districts in NWS. Alouk water station continues to be out of operation, leaving almost half a million people in Al Hasakeh city and neighbouring areas reliant on alternative water sources, which are often unsafe and can lead to an alarming overexploitation of the limited reserves of existing fresh groundwater, contributing to future increased water scarcity risks.

Coordination and Response Strategy

To keep children and communities safe, UNICEF continues to invest in preventive measures and efforts to implement a rapid response at scale to curb the spread of the disease and limit its negative impacts. UNICEF and partners are actively coordinating the response, including key roles in the Incident Management teams in Amman for Whole of Syria (WoS), and in Damascus and Gaziantep. UNICEF leads the pillars for water, sanitation, and hygiene (WASH) and risk communication and community engagement (RCCE), as well as extensively contributing to the case management pillar and co-leads the Operations, Supply, Logistics pillar. UNICEF continues to coordinate the WASH response to cholera through the WASH cluster/sector with partners in Damascus at national level and across the affected governorates, including in NES and NWS.

Overall, UNICEF is working closely with WHO and other partners on the ground and seeks to reach 690,000 people with its WASH, Health and RCCE response over the coming three months. UNICEF's overall health response aims to provide critical services and respond to an estimated 161,000 cholera cases, including 40,000 expected severe cases. UNICEF's RCCE interventions aim to reach 345,000 people with cholera prevention and response messages including through engaging communities on dialogue on stopping the spread of acute watery diarrhoea (AWD) in the most affected areas. Cholera response and response planning is being undertaken for all areas of Syria, including Northwest Syria, Northeast Syria and access for Ras al Ain/Tel Abiad.

HEALTH

UNICEF Syria Country office has provided 120 AWD Drug Kits containing non-pharmaceutical supplies adequate for the treatment of 6,000 severe cases and 60 community drug kits with adequate quantities for the treatment of mild to

¹ The most affected governorates to date are Deir-ez-Zor (10,960 cases, 54.8%), Ar Raqqa (4,519 cases, 22.6%), Aleppo (3,091 cases, 15.4%) and Al-Hasakeh (1,017 cases, 5.1%), accounting for almost 98% of all reported cases.

moderate cases of AWD in newly established cholera treatment centres (CTCs) serving so far 51 Cholera Treatment Centres (CTCs), and 98 Oral Rehydration Points. These lifesaving supplies will be delivered in the coming week to Deir Er Zor, Ar Raqqa, Al Hasakeh, Lattakia, Sweida, Darra, Quinetra and Tartous

In Northwest Syria (NWS), UNICEF procured cholera kits to treat 6,000 cases and AWD Community and Personal Protective Equipment (PPE) which have arrived in Turkey for onward movement to Northwest Syria (NWS) for distribution to implementing partners. The distribution plan will be coordinated with WHO according to the caseload UNICEF is finalizing the planning to support the transportation and management of supplies and the service delivery through 2 Cholera Treatment Centres (CTCs), and 5 Oral Rehydration Points.

WATER, SANITATION & HYGIENE (WASH)

In the past two weeks 500 m³ of water has been supplied via trucks to support 60,000 school children and community members. Children were reached in 47 schools and two communities in Rural Damascus. An additional 10,000 people were reached in the Southern rural Aleppo.

For the treatment of water **408** tons of sodium hypochlorite has been distributed to disinfect water in all water units in Damascus, Rural Damascus, Latakia, Tartus, Homs, Hama, DeirEz Zor and Aleppo, which will support 10 million people including in NES. Chlorine checkpoints have been established in Al Hasakeh to monitor the water quality of water provided by private sector trucks and provided disinfection of the trucks when required. UNICEF, in collaboration with SARC, continues daily monitoring of water quality in the common water networks and IDP camps in Aleppo city and northern rural areas.

UNICEF continues to support the conduct of water quality testing on a daily basis in governorate central laboratories to ensure that the water pumped via networks are safe in accordance with national standards. To enhance the technical capacity in terms of water quality, a three-day training on Water Safety Plans for 20 employees of 3 water establishments in Dara, Quneitra and Sweida districts was conducted.

In Northwest Syria, 26 Cholera Treatment Centres and Units (CTCs/CTUs) set up are being planned by NGOs under the overall guidance of the Health cluster. The Health and WASH clusters are working in collaboration to ensure the locations are safe and necessary hygiene and sanitary supplies are made available. UNICEF is working in coordination with WHO and partner organizations who are engaged in the establishment of CTCs/CTUs to supply safe water, adequate sanitary infrastructure, and Infection Prevention and Control (IPC)/ Personal Protective Equipment (PPE). UNICEF has dispatched WASH supplies including Aquatabs and jerrycans, which have so far reached 185,878 people. In addition, to ensure enhanced hygiene behaviour, the per capita water supply has been increased by 5 litres per day for 175,000 people living in informal settlements and camps. UNICEF has procured additional supplies such as Aquatabs, Sodium Hypochlorite, soap, cholera preventive communication materials, PPE and hygiene kits to support at least 500,000 people at highest risk. These supplies are due to arrive by November.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT

To prevent the spread of acute watery diarrhoea (AWD) in the most affected areas, UNICEF as Risk Communication and Community Engagement (RCCE) lead continues to scale up community engagement interventions through partners. Training of 438 health care workers and hygiene promotion teams, 62 religious leaders and 31 doctors was conducted on Interpersonal Communication (IPC) skills. The Social Behaviour Change (SBC) outreach teams have engaged 132,000 people (71,000 children) through community dialogues, while 29,700 people were reached via door-to-door visits with key messages and actions on cholera prevention. UNICEF disseminated life - saving messages through social media platforms, 91 WhatsApp groups, 29 Non-Governmental Organizations including Health, Education and WASH sector partners. UNICEF, Civil Society Organizations and NGOs launched a joint cholera prevention campaign in Al-Aresha camp and engaged 1,662 people through tent-to-tent visits and 10 dialogue sessions with influential leaders. In al Hasakeh 4,490 home visits were conducted and reached 14,348 individuals in eight neighbourhoods across four villages, while the national Measles-Rubella and Polio Campaign integrated cholera prevention messages reaching parents and caretakers of the children in the affected areas.

In Northwest Syria, RCCE training was provided for 60 members of WASH, Nutrition, and Education clusters to implement inter-sectoral RCCE activities. Close to 50 organizations under the RCCE task force group are conducting awareness sessions in communities. Approximately 5,000 teachers, community health workers, hygiene promoters and camp managers are being trained on the RCCE activities.

UNICEF generates a weekly social listening report on cholera prevention capturing all the discussion around cholera on social media platforms. Approximately 90,300 engagement activities were made on social media throughout the month of September across Syria. Users were receptive to awareness campaigns and information about preventative measures; however, many expressed concerns due to lack of availability of clean water and electricity, that prohibited them from implementing suggested hygiene and sanitation measures (e.g., boiling water, sanitizing).

OVERALL FUNDING GAP

As part of the [Syria Acute Watery Diarrhoea \(AWD\)/Cholera Response Plan \(September 2022\)](#), UNICEF urgently needs US\$11.64 million for the emergency cholera response in the areas of health, water, hygiene, sanitation (WASH) and social and behaviour change (SBC) for three months. Of the total funding requirement, UNICEF has received an emergency allocation of US\$500,000 of flexible resources from its [Global Humanitarian Thematic Funding](#) to complement regular programming resources which have been reprioritized to scale up the cholera response.

UNICEF is facing an immediate funding gap of about 11.14 million. It is critical that any additional support remains flexible for UNICEF and its partners to respond, based on needs alone, regardless of where the children are.

INDICATORS

Sector	2022 target	current round	Change since last report
Health			
Number of cholera treatment centres established (CTU hospitals)	53	51	31
Number of adults and children treated in cholera treatment centres	24,000	2,082	0
Number of primary health centres with ORT corners established in PHC centers	103	0	0
Number of adults and children treated in PHC ORT corners	98,000	0	0
WASH			
Number of people participated in hygiene promotion sessions	270,000	169,293	(48,450) ²
Number of people supported with access to essential WASH NFIs	370,000	869,241	140,613
Number of school children gaining access to gender-friendly WASH facilities and services	100000	7,381	7,381
Risk Communication and Community Engagement			
Number of people reached through messaging on prevention and access to services	500,000	131,472	(17,117) ²
Number of people participating in engagement actions for social and behavioural change	345,000	28,714	(42,633) ²

Who to contact for further information:

Ghada Kachachi
Deputy Representative
UNICEF Syria
gkachachi@unicef.org

Melinda Young
Senior Emergency Advisor
UNICEF Whole of Syria
meyoung@unicef.org

Eva Hinds
Chief of Communication
UNICEF Syria
ehinds@unicef.org

² Negative progress is due to data cleaning and validating the reported data through IM system.