



**WHO delivered 45 medical devices to fully equip the hospital in Suruc Refugee Camp, which currently accommodated around 28 thousand people. IOM continues with its support to DWWT – Primary Health**

### JUNE HIGHLIGHTS:

#### UNFPA

The contract for ECHO Project 2017 has been signed. With the project 20 WGSS centers will be supported next year. We are preparing for the establishment of National SRH/FP working Group. In this respect a training will be held in Ankara on 3-4 August. The MISP Training for service providers will be organized by UNFPA in Adana on 8-10 August 2016. Health Working Group meeting has been attended and the updates on UNFPA's activities have been provided. Security Coordination meeting has been attended where the current updates on the security issues have been discussed.

#### IOM Support of health clinics

In July, IOM provided health assistance for 2,688 refugees at a primary health clinic in Istanbul through the partnership with Doctors Worldwide Turkey (DWWT). Female patients consisted more than 63% (n=1,704) of the total number of beneficiaries. Of the total beneficiaries, 51 third country nationals from Afghanistan, Egypt, Iraq and Yemen also benefited from the health assistance. The clinic provided consultation services in five medical domains: namely, General Practitce and Consultation, Paediatrics, Gynaecology, Internal Diseases, and General Surgery. DWWT also provided the beneficiaries medical laboratory and free pharmacy services.

### NEEDS ANALYSIS:

- Syrian refugees, especially those living in local communities are exposed to vaccine-preventable diseases such as measles and pertussis.
- Though not a general challenge at the moment, malnutrition is expected to become a challenge among newly arriving refugees.
- There are major concerns for the increasing mental and psychosocial problems of Syrian refugees.
- Surgical trauma and intensive care of large number of severely injured patients from the conflict areas and their long term post-operation rehabilitation require enormous inputs of human and financial resources and equipment.
- The large population of women in the reproductive age and life-threatening reproductive health risks are a matter of priority.
- Continued and expanded support to partners to participate in the healthcare provision of Syrians to enable equitable access, specifically to primary and chronic disease healthcare service is needed.
- Focusing on the primary healthcare provision is needed to be continued so that the patient load on secondary and tertiary healthcare and respective costs can be reduced.
- The role of the family and community healthcare centres as primary care providers for Syrian refugees needs to be strengthened, including mental health for the impacted communities.
- For better planning, Health Information System of the family and community health centres to register and report on Syrian refugees needs to be expanded.

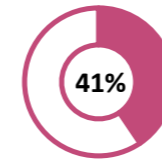


A consultation service at the DWWT Clinic in Istanbul (photo by IOM)

#### Sector Response Summary:



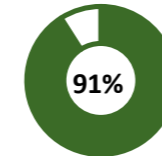
**436,000 Refugees & Local Community Members targeted for assistance by end of 2016**  
**176,730 assisted in 2016**



#### Syrian Refugees in Turkey:



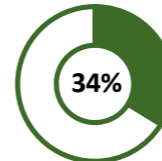
**3,000,000 Syrian Refugees expected by end-2016**  
**2,729,000 currently registered**



#### 3RP Overall Funding Status:



**USD 34 million required in 2016**  
**USD 11.4 million received in 2016**



#### Transportation assistance to health facilities

IOM provided transportation assistance for 865 refugees in Adiyaman Camp to enable them to access to health facilities in Adiyaman's city centre and Gaziantep. The transportation runs between the Camp and hospitals in Adiyaman's city centre every day on a regular basis. In July, 515 patients with 350 escorts were assisted with transportation to health facilities in the city centre. Thirty-five patients with chronic and/or severe illness were transported to the hospitals in Adana, Gaziantep and Malatya with 39 escorts.

#### WHO\*

The Ministry of Health of Turkey plans to expand Migrant Health Centres around the country and six of these centres will be supported by WHO. A migrant health centre provides primary health care services to people under temporary protection with the supervision of the Ministry of Health. A variety of services can be accessed in these centres along with some screening programmes. So far, the Ministry of Health has established 64 Migrant Health Centres. The language barrier remains a key challenge in the delivery of health services for Syrian refugees in Turkey. Integration of Syrian health professionals into the Turkish health system to provide health services for Syrian patients can both help overcome the language barrier and alleviate the workload on Turkey's health personnel. The health profile and disease spectrum of the host population and Syrian refugees are very similar, with a high prevalence of noncommunicable diseases. Syrian refugees in non-camp settings live in crowded conditions in urban areas, increasing the risk of communicable and vaccine preventable diseases. The provision of mental health and psychosocial services are increasingly major concerns both due to language barriers and the limited number of facilities offering mental health services in comparison to increasing needs. In collaboration with the Ministry of Health of the Republic of Turkey, has developed a new model of collaboration to reinforce health services delivery to Syrian refugees in Turkey. This new model, named Migrant Health Centres, will be expanded to new cities hosting high numbers of refugees. WHO will be supporting six centres. 27 Syrian refugees, including medical professionals, completed a Basic Life Support Course conducted by WHO.

\*Extracts from the WHO bulletin, July 2016

### TURKEY RESPONSE INDICATORS: JANUARY - JULY 2016

