



## Situation

- With the resumption of the offensive on the last ISIL-held enclave of Baghouz village, Deir-ez-Zour governorate on 10 March, the number of new arrivals to Al-Hol camp has significantly reduced, with only 30 families arriving in the past twenty-four hours. Overall, some 4,000 people have been brought to Al-Hol camp since 7 March. In total, the camp population is now 66,247 people (19,216 families), the vast majority of them women and children, including 23 per cent under the age of 5 and 8 per cent pregnant and nursing mothers.
- While the most recent influxes have placed additional stress on already over-stretched resources and space inside the camp, no families are currently staying out in the open, with the 13,750 newest-arrivals all being accommodated in either communal areas or big sized tents.
- Extensions to the camp are currently ongoing with negotiations to expand Phase 6 to host a further 4,000 families underway; a site survey is expected to be completed in the next three days. Additional land will need to be made available to rehouse any remaining caseloads residing in the communal areas and big-sized tents.
- Despite the massive relief effort mounted to date, and which continues to be scaled up, the most pressing needs remain shelter, health, protection, WASH – particularly sanitation and waste management – and education. As it stands, there are approximately 25,000 school-aged children now residing in the camp, all of whom are in need of essential learning opportunities.

## Humanitarian Impact

- The most recent arrivals to Al-Hol have been in a notably poorer physical state than those reaching the camp in previous weeks, with the number of reported deaths, either *en route*, shortly after arriving at the camp or after referral, 113 as of 9 March. Two-thirds of the deaths are children under the age of five and were mainly suffering from hypothermia, pneumonia, dehydration or malnutrition-related illnesses.
- Trauma triage and emergency health services have been particularly overwhelmed by the scale and scope of needs upon arrival with more than 75 emergency medical cases identified between March 7-11; 39 were referred to Al-Hikmah hospital, 10 to Al-Hayat hospital, while the rest were treated in Al Hol camp.
- Some 72 children are currently being treated in hospital for complications due to severe acute malnutrition, while ambulances are urgently required to support the transportation of the most critically ill to referral hospitals.
- Currently, 250 children have been identified as unaccompanied or separated, of which 45 have been reunited with their families or caregivers. A total of 54 unaccompanied/separated children are in interim care centers in the camp.

## Humanitarian Response

- 1,285 family sized tents arrived in the camp yesterday with distribution/installation ongoing. Overall, 166 big size tents and 7 rub-halls have now been installed in various sections of the camp; all are fully occupied with more expected to arrive in the next two days. There is a current need of 6,000 family-sized tents, which is sufficient to cover the existing caseload in the communal areas and big size tents, in addition to some 7,000 projected new arrivals. There are 5,100 tents in the pipeline with 4,400 expected to arrive at Al-Hol within the next two weeks. Thus, additional tents are required, especially in the event of further arrivals. The shelter sector is communicating with all possible actors to bridge the gap.
- Health supplies have been airlifted to the north-east for the response with more expected to arrive shortly; emergency health services are also being provided throughout the security and reception areas as well as in different phases of the camp. Some 2,044 pregnant and nursing mothers and children under the age of 15 have been reached with medical consultations and malnutrition screening to date.
- Water trucking is ongoing, while 160 toilets and 80 shower rooms are ready to use in phase 7, benefitting 8,000 people, and more than 50 water tanks and 30 waste bins have also been installed. Cleaning operations have commenced although sanitation management remains an issue and requires further scale up.
- Monthly food and NFI distributions in the camp started on March 11 after delays caused by the sudden influx of new arrivals. Humanitarian partners continue to provide new arrivals with a hot meal, NFI kits and winterization items, with 21,000 children under the age of 15 having received winter clothing to date. Distribution of the last round of fuel for heating also commenced on 10 March, along with 800 heaters; 500 more are to be distributed.
- To date, two mobile health teams and one outpatient clinic are providing nutrition screening services in the camp with a further three to be established over the coming weeks; 30 volunteers will also be trained to help detect and identify malnourished children. Mother Baby Areas are also urgently needed for nursing women to receive counselling on breastfeeding.
- A 24/7 emergency child protection team supports new arrivals in the reception/screening area while emergency

integrated protection teams are mobilised around the clock across the camp. Protection information desks are also operational in the newly established phases 5 and 7 of the camp as well as at the reception.

- Overall, a total of 8 classroom tents now accommodate up to 1,000 children and 994 children aged 6-19 have been identified for a self-learning program. Nevertheless, a significant scaling up of emergency education is urgently required to support the considerable population of school age in the camp.

### Resource Mobilization

- The Syria Humanitarian Fund has been mobilized with a \$4 million allocation to support the protection, shelter, NFIs and WASH sectors. This only partially covers the scale of needs. Humanitarian partners are re-directing existing resources to respond to the emergency. These will need to be replenished with more resources needed across all sectors.

*The next situation update will be issued once new information becomes available or is warranted by the situation on the ground. For more information, contact Hedinn Halldorsson, Public Information Officer, OCHA Syria, [hedinn.halldorsson@un.org](mailto:hedinn.halldorsson@un.org)*