

SITUATION OVERVIEW

- As of 20 March, 70,480 people reside in Al Hol camp, the majority of whom are women and children. A further 2,000 people, many of them in markedly poor health, arrived late on 20 March, 12 of whom died either *en route* or shortly after arriving in the camp. Several hundred people also arrived on 21 March.

- Most new arrivals show signs of distress and suffer from malnutrition, fatigue, medical conditions and war injuries caused by months of hostilities and lack of access to food, medical assistance or basic services. Their poor condition is further exacerbated by inadequate transport conditions from Baghouz to the camp, particularly for severely injured people, pregnant women and children.

- The main causes of death, 16 of which occurred since the last flash update, are the result of complications related to severe acute malnutrition; pneumonia; dehydration and diarrhea.

- The camp has significantly exceeded its capacity and there is an urgent need for additional plots to accommodate those currently being hosted in communal spaces/big size tents and the anticipated arrivals.

- The sudden and large influx of people since 4 December is putting a huge strain on WASH facilities and services, including latrines and access to clean water, with the scaling up of sanitation a key priority.

- The health referral systems remain overstretched, with limited hospital capacity in Hassakeh Governorate to accommodate all those that require specialized healthcare.

90%

Women and children

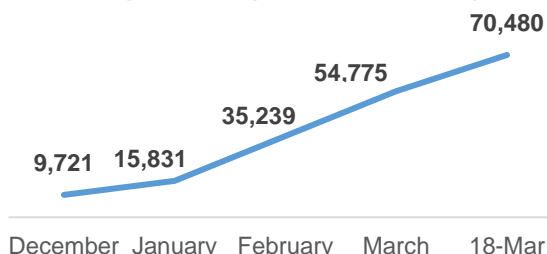
558

Patients referred to hospitals in Al-Hasakeh

16

Deaths since the last update (14 March)

Population (4 Dec-20 March)



40-50 patients are estimated to require immediate hospitalization.

- Many of the displaced face many health and protection challenges, with numerous cases of unaccompanied minors and elderly, pregnant women and adolescent girls requiring sustained maternal health services including emergency obstetric care, and people with disabilities who require specialized services.
- Regular and sustained access to third country nationals is a challenge, especially for those providing health and protection services requiring regular engagement and care provision to the displaced.
- With most people being transported directly from Al Baghouz to Al Hol, discussions are underway to close the Al Suwar transit site, with the available resources, such as BSTs, WASH facilities and 2 health tents, moved to Al Hol camp.
- Humanitarian partners are revising their planning figures, now estimating the arrival of an additional 15,000 people.

HUMANITARIAN RESPONSE



Credit: UNHCR

- Food Security:** Humanitarian partners continue to provide new arrivals with a fresh meal and to conduct regular food deliveries. Food partners indicate that the food pipeline break will be in June, and with a four-month lead time to import food in to the country, more funds are needed.
- Protection:** There are serious gaps in protection services in newly created areas of the camp. There is a need for at least six additional child-friendly space (CFSs), five women and girls safe spaces (WGSSs) and comprehensive services for elderly and people with disabilities in all areas of the camp. Additionally, WASH facilities need extensive protection features improvement (30% of toilets have no locks, low gender segregation and bathing space coverage, especially in new phases of the camp). One WGSS and four GBV mobile teams, six CFS and two CP mobile teams are operational. Approximately 12,000 children are receiving child protection services. Child Protection partners continue to prioritize family tracking and reunification of unaccompanied and separated children. As of 19 March, 320 unaccompanied and separated children have been identified in the camp. 53 (23 separated and 30 unaccompanied) of them have been reunified with their families and care givers. A total of 77 unaccompanied children are being taken care by case workers in Interim Care Centers.
- Shelter:** 1,000 family tents have been delivered to the camp, 200 of which will be allocated to phase 7. An estimated 10,000 people who are residing in the big-size tents of phase 7 are exposed to potential health risks and the need is pressing to move them to family tents. There are enough tents in the pipeline, including for the estimated new arrivals, but some may take up to a month to arrive. Camp administration granted additional spaces to set up phase 8 of the camp. The installation of big size tents is ongoing.
- Non-Food Items:** Partners continued distributing clothes kits to 24,000 children and 5,000 solar lamps are in the pipeline. Partners are also distributing 24,000 blankets. Current gaps include: plastic sheets (approximately 3,000), mosquito nets, children summer clothes, solar fans and at least 3,500 solar lamps to address the needs of the current population.
- Health:** The two referral hospitals in the Governorate, Al Hikma and Al Hayat, are working at full capacity and being dedicated to address the needs of the displaced in Al Hol camp. Additional capacity is urgently needed and the establishment of a 20-50 bed field hospital is in progress. In addition, health partners have delivered medicines, supplies and equipment to those operating health care services in the camp. The supplies (enough for 67,700 treatments) include trauma kits, diarrheal disease kits, antibiotics and medicines to treat communicable and non-communicable diseases. Equipment includes defibrillators and monitors, portable X-ray machines and blood glucose meters. Some of these supplies were delivered through cross-border operations. A health partner started to operate a fixed health facility inside the annex and are planning to

expand the service together with another partner to establish a Primary Health Center starting from next week. A vaccination campaign started on 20 March targeting the entire camp.

- **Water, sanitation and hygiene:** In Phase 7, there are 188 toilets, 30% of which require minor repair (door welding, locks); partners have committed to install an additional 256 latrines (gap of 14 latrines remain) and 39 water tanks. In annex 3, partners have committed to build an additional 132 latrines out of 228 latrines needed (gap of 96 remains to reach emergency ratio (1 toilet for 50 persons)). An additional 312 latrines are needed to reach second response phase standards (1 toilet for 20 person). In the meantime, partners are also installing latrines and water tanks in phase 5 extension and are preparing the new phase 8, which has a capacity for 425 latrines. A hygiene awareness campaign, water trucking as well as latrine cleaning and garbage collection are ongoing in the camp; vector control cleaning activities stopped in mid-March, pending a new partner to take them over.
- **Nutrition:** The sector is working on expanding the teams conducting malnutrition screening by training field workers on MUAC screening for children under 5 and Pregnant and Lactating Women and referrals to specialized facilities. Children under 6 months old are considered particularly vulnerable and breastfeeding counselling services are planned to be scaled up in the entire camp. 15 SAM cases were identified this week from the new arrivals, all were transferred to Al-Hikma hospital. Lack of nutrition actors in the camp and in CMAM remains the biggest gap.
- **Adolescents Development and Participation:** The teams are expanding and reaching new arrivals with hygiene promotion and awareness sessions, life skills activities, especially for adolescent girls and boys. In addition, the teams also conduct sport for development activities to assess their social cohesion and civic engagement ability. There is a need to establish Adolescent's Friendly Spaces in the newly established phases (7 and 8) to support adolescents and youth through structured activities.
- **Cash-for-work:** several cash-for-work activities are being planned, including tent repair services, solid waste management, fumigation and spraying for sand flies and vocational training through local community centres.
- Given the level of vulnerability of those arriving at the camp, partners are carrying out additional sensitization on Sexual Exploitation and Abuse measures

RESOURCE MOBILIZATION

- UN agencies supporting the population in the camp are appealing for an additional US\$ 27 million to support the needs of the current population; scale up availability of shelter and assistance to new potential arrivals and be able to sustain assistance efforts to meet the nutritional, health, wash, protection – including child protection, GBV - and food needs of the camp population for the coming months. Northeast Syria NGOs are also reaching out to donors to request additional funding as well as continued flexibility to redirect existing funds.
- The Syria Humanitarian Fund (SHF) has been mobilized with a \$4 million allocation to support the protection, shelter, NFIs and WASH sectors. The SHF is further planning an additional allocation to respond to the emergency. Given limited funding available, this will only partially cover 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 flash update will be issued once new information becomes available or is warranted by the situation on the ground. For more information, contact Samir Elhawary, Deputy Head of Office, OCHA Syria, elhawary@un.org