



WHO provided trainings as per the new mhGAP guidelines to health care specialists on MHPSS as well as trauma training for first responders including Syrian doctors and nurses some of whom were selected to be trained as certified trainers.

HIGHLIGHTS OF THE MONTH:

UNFPA ** SOPs on SGBV are finalized and ready to be distributed among UN Agencies, I/NGOs and National Authorities within the month of January, 2017. SOPs on WGSS are finalized and ready to be distributed among the Implementing Partners within the month of January, 2017. The trainings/workshops on both SOPs will be provided throughout the first quarter of 2017. Consultation Meeting on Child Marriage, organized by UNICEF, took place within the month of December and the comments on SOP on Child Marriage were provided.

** UNFPA and Hacettepe University Institute of Population Studies organized , the first course of the Demography Training Series on 19-23 December in Ankara. The programme has been implemented in the context of our IP agreement with the Institute. The first beneficiary of the training was the experts and assistant experts of the Ministry of Development. During the training, basic components of population such as age and sex distribution, fertility, mortality and migration, and other subjects related to reproductive health and rights were addressed within the framework of population policies in Turkey and SDGs.

**SGBV Working Group meeting took place in Ankara on the 19th of December with the participation of Ministry of Family and Social Policies, UNHCR, UNFPA, UNW and AFAD (The Disaster and Emergency Management Authority). Future cooperation on data management and data sharing was discussed as well as the membership of the SGBV Working Group in 2017. The SOP on SGBV is almost finalized pending a few response from Ministry of Family and Social Policies.

** Protection and Health Working Group meetings have been attended and SGBV Sub-working Group meeting co-chaired by UNFPA in Gaziantep. Inter-Sector and Agency Working Group meetings took place in Gaziantep to identify the gaps and common understanding of the challenges faced both from sectoral and from inter-agency perspective including Protection, NFI and Health Working Group for the West Coast coordination in Izmir, Turkey.



BUHASDER, Kit Distribution, Izmir, December, credited to Gözde Köse

Sector Response Summary:



436,000 Refugees & Local Community Members targeted for assistance by end of 2016 277,760 assisted in 2016



Syrian Refugees in Turkey:



3,000,000 Syrian Refugees expected by end-2016 2,814,600 currently registered



3RP Overall Funding Status:



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



IOM Support of health clinics

In December, IOM provided 4,403 primary health care consultations to refugees and vulnerable migrants at a primary health clinic in Fatih, Istanbul. Of the total number of beneficiaries, female patients comprised about 60 per cent (n=2,637) and children under 18 years old accounted for about 33 per cent (n=1,448). The clinic provided consultation services in five medical domains: namely, General Practice and Consultation, Paediatrics, Gynaecology, Internal Diseases, and General Surgery. DWWT also provided the beneficiaries with medical laboratory and free pharmacy services.

During the reporting period, IOM Turkey conducted exit interviews with 120 beneficiaries at the clinic in Fatih, Istanbul. A majority of beneficiaries (88%) considered the overall services of the clinic is satisfactory and the beneficiaries reported a high level of satisfaction with the presence of Arabic-speaking doctors. Compared to the previous exit interviews conducted in September 2016, a higher percentage of people expressed their willingness to revisit the clinic in the future and a significantly increased percentage of people attended the clinic to receive consultations.

Transportation assistance to health facilities

IOM continued to provide transportation assistance for 1,196 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 December, 714 patients and 380 escorts were assisted with transportation to health facilities in the Adiyaman city centre. Also, 102 people - patients with chronic and/or severe illness and their escorts - were transported to the hospitals in Gaziantep.

WHO*

The adaptation and training of trainers and supervisors (ToTS) on the new mhGAP was provided by WHO CO, aimed to ensure proper MHPSS integration into the Primary health Care system and facilitate the use of the new mhGAP by Turkish Family Physicians and registered Syrian doctors. Turkey was the first country globally who has used the new mhGAP manual after the release in October 2016.

The second prehospital training course for trauma first responders working in north Syria was conducted FOR 19 Health care specialists WHO received front line life saver course, international trauma life support course, and medical management of chemical weapon course. After passing the course final exam all attendees were supported by CLS bags & SKED litter and the best 4 candidates were selected to be further trained as trainers (TOT)....

* excerpts from the WHO monthly bulletin

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.

TURKEY RESPONSE INDICATORS: JANUARY - DECEMBER 2016

