

# ANNUAL REPORT

# 2020



**Union of Medical Care and Relief Organizations**  
UOSSM International - Turkey Mission

**2020**







## **Union of Medical Care and Relief Organizations (UOSSM)**

A coalition of medical, humanitarian, non-governmental organizations licensed in the United States, Canada, United Kingdom, Switzerland, and Turkey. UOSSM was established in 2012 in Paris, by eight doctors from around the world. Member organizations gather and coordinate resources to provide independent, impartial humanitarian medical care and relief to those affected by crises, and operate under a unified strategic framework to increase effectiveness for the humanitarian response. UOSSM has become one of the largest providers of medical relief services in Syria. UOSSM provides humanitarian and medical aid to all victims of crises, regardless of ethnicity, race, religion, or political affiliation.

## OUR VISION

We believe in a world in which everyone has the right to life, health and well-being.

## OUR MISSION

To achieve our vision, we strive to raise funds and implement or fund projects that support the health-related needs and well-being of communities affected by crises and their aftermath, regardless of nationality, ethnicity, gender, religion or political affiliation.

## OUR VALUES

**ACCOUNTABILITY.** We recognize our moral duty and responsibility to use our resources efficiently to achieve measurable results. As such, we are transparent and accountable to our supporters, partners, and above all, the people.

**INTEGRITY.** We take good care of the resources with which we are entrusted and strive to the highest standards of personal honesty, ethical behavior, and fairness in everything we do. We lead by example and always act in the best interest of the people.

**NEUTRALITY.** We commit to the medical ethics of neutrality and impartiality in our work for the people. We assist everyone in need irrespective of nationality, ethnicity, gender, religion or political affiliation.

**TRUST.** We respect each other and believe in essential human values. We value the trust we have accomplished in our relationships and we strive to continue doing our best to maintain this trust with the people.

**AMBITION.** We commit to provide the highest quality of care we are capable of, guided by our medical profession and the international principles and humanitarian standards.

# Where We Operate



Turkey

Syria

Jordan

## Member Organizations



## Where We Are



# 2020 in Numbers

**38,026**

Obstetrics and gynecology consultations



**794**

Cesarean deliveries

**2,359**

Natural childbirth

**55,926**

Beneficiaries of Protection Services



**27,825**

beneficiaries of community child protection services



**835,295**

Services Provided in the Primary Health Care Program



**94,387**

Services Provided

by **14** Mobile Clinics



**2,436**

Total Employees



Males



**1,600**

Females



**836**

**34,653**

People Received Mental Health and Psychosocial Support Care



**32,606**

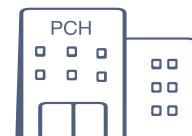
Mental Health Consultations



**737,870**

Services Provided

in **17** Primary Health Care Centers



**305,564**

Beneficiaries from Secondary and Tertiary Health Care



**\$20,928,983**

Total UOSSM Activities

**\$18,395,150**

Monetary Activities

**\$2,533,833**

Admin Expenditure

**126,953**

Beneficiaries of Nutrition Services



**603,669**

Community Health Consultations



**196,165**

Outpatient Consultations



**144,921**

Radiography and ultrasound services



**140,956**

Laboratory tests





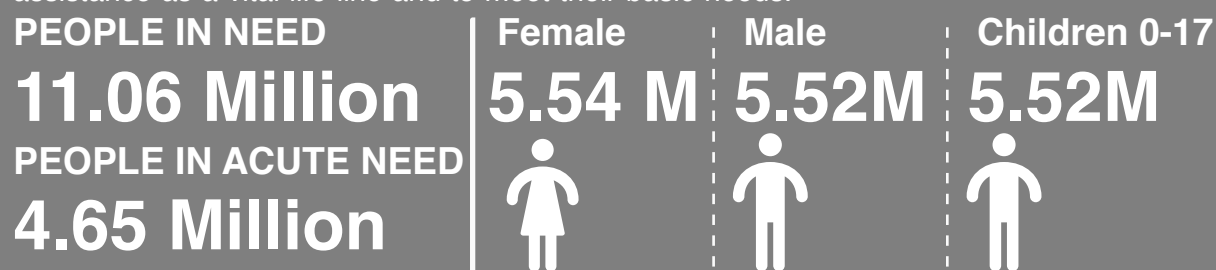
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## A Glimpse into the Humanitarian Situation in Syria 2020

The humanitarian consequences for people suffering the crisis in Syria are wide-ranging and profound. Overall, 11.06 million people are in need of some form of humanitarian assistance in 2020. This includes 4.65 million people estimated to be in acute need.<sup>1</sup> As the crisis enters its tenth year, 6.1 million people remain internally displaced.<sup>5,6</sup> 2 million people have fled their homes, the vast majority to neighbouring countries, with limited prospects for return due to ongoing hostilities in some locations, concerns regarding safety, and the lack of adequate housing, basic services and employment opportunities.<sup>3</sup> In 2019, over 1.8 million population movements inside Syria were reported.<sup>4</sup> Crucial civilian infrastructure such as schools, water supply systems, health facilities, and housing infrastructure has sustained extensive damage and much of it remains unrestored or in disrepair. In areas where hostilities have subsided, life remains a daily struggle due to limited access to basic services and livelihood opportunities, increasing financial hardship and an eroding capacity to cope. Around ninety per cent of the population is estimated to live under the poverty line.<sup>5</sup> Recent economic shocks stand to further set back the recovery of the Syrian people and render many more vulnerable. Millions of women, children and men continue to rely on humanitarian assistance as a vital life-line and to meet their basic needs.



Humanitarian Consequences related to Living Standards Years of crisis have exacerbated living conditions for most Syrians due to significant reductions in the availability of, and access to essential services, destructions of housing infrastructure, loss of livelihoods and reduced purchasing power as a result of economic decline. Amongst others, only 53 per cent of hospitals and 51 per cent of primary healthcare centres (PHCs) across Syria are estimated to be fully functional.<sup>23</sup> Over eight million people have to rely on alternative and often unsafe water sources to meet or complement their water needs, increasing public health risk, with indicators on water availability and quality being worst for IDPs in north-west and north-east Syria.<sup>24</sup> The number of people requiring shelter assistance has increased by 20 per cent, from 4.7 million in 2019 to over 5.5 million in 2020. This rise is driven by loss of capital, the destruction of housing infrastructure and the deterioration of shelter conditions in 238 out of 272 sub-districts, and compounded by the scale of new displacement in 2019, protracted displacement, return movements and a very limited shelter response.<sup>25</sup> Over half of all IDPs have now been displaced for over five years,<sup>26</sup> many requiring sustained basic service delivery and livelihood support. A deteriorating economic situation, caused chiefly by the protracted crisis and hostility-induced loss of economic assets, underinvestment, pressure resulting from unilateral coercive measures, and exacerbated by the fiscal crisis in neighbouring Lebanon, has contributed to the continued loss of livelihoods and reduction in household purchasing power.<sup>27</sup> The ongoing devaluation of the Syrian Pound (SYP), which since October 2019 has lost over half of its value on the informal market and reached a low of 1,250 SYP per US dollar (US\$) in January 2020, has further reduced families' purchasing power. These factors combined have contributed, amongst others, to the increase in the number of food insecure people and are likely to lead to further increases in poverty, inflation and price levels for basic food and non-food items in 2020

# Introduction

During 2020, UOSSM continued to provide various services through its programs to those affected by the humanitarian crisis in Syria and neighboring countries. UOSSM ensured that those projects were in accordance with the SDG's (Sustainable Development Goals) set internationally by the UNDP in 2015.

The main objective of the SDG's is to alleviate poverty and to preserve the environment. In total, there are 17 main SDG's (Sustainable Development Goals) that are down into 169 sub-goals. The Development Goals are interconnected goals that focus on maintaining long-term (for up-to the year 2030) development standards.

Here are some of the main SDG's that UOSSM has worked towards:

## 1- Good Health and Well-being:

This goal is achieved by UOSSM's work within the hospitals and clinics that it administers. In addition to that, UOSSM's work to support referral systems and Mobile Clinics has helped in achieving this SDG. Also, as part of its effort to ensure the preservation of medical expertise, good health and well being, UOSSM offers medical training services that incorporate international protocols at the highest medical quality standards.

## 2- Renewable Energy

UOSSM has contributed towards accomplishing this through its solar energy projects. The projects aimed to reduce dependence of hospitals in Northern Syria on fossil fuels by providing them with the capability of using solar energy. This ensures the smooth operation of hospitals and reduces the risk of power outages and reduces preventable deaths caused by power loss.

## 3- Local Community Governance and Stability

Since 2014, UOSSM has supported and empowered the health governance of regions that are not within the authority of the Syrian government. This support includes the training of medical staff and the development of policies and organizational structures. In addition, several projects that establish the governance of the health sector were supported by UOSSM in 2020.

## 4- Societal Responsibility:

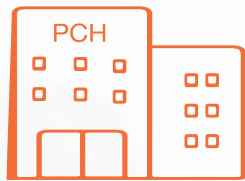
UOSSM's Social Responsibility system was developed in accordance with the IS2010:26000 0 quality standards. The system aims to support several causes, such as institutional governance, human rights, the environment, fair employment practices, and attention, and improvement within the community of affairs of beneficiaries and partners.

UOSSM regards itself as more than just an organization providing humanitarian projects; beneficiaries needs are attended to in order to alleviate the suffering and pain that they are experiencing. UOSSM also takes the long-term societal and environmental effects of its work into account. Therefore, UOSSM pays very close attention to the secondary effects of its work, such as the consumption of resources used to accomplish its short-term goals.

# 01 Primary Health Care



**14** Mobile Clinics



**17** Primary Health Care Centers

**835,295**  
Services



**582,105**  
Beneficiaries



**460,818**  
Medical  
Consultations





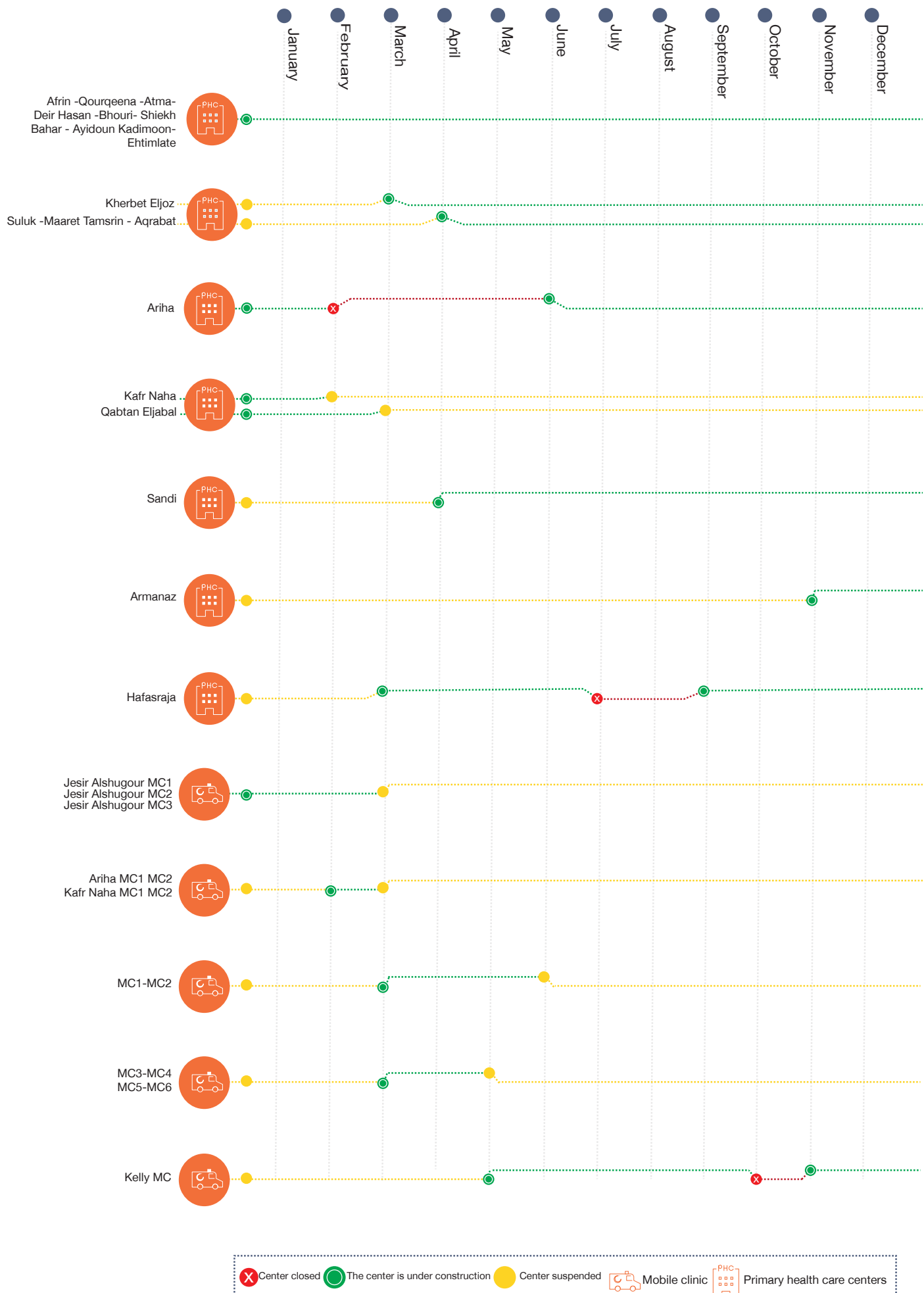
### introduction:

During 2020, UOSSM operated 17 primary health care centers (PHCs) and 14 mobile clinics. Some of them these facilities were either permanently or temporarily closed due to various reasons, including security.

As an emergency response, UOSSM worked had to meet the needs of the people and the massive waves of internally displaced persons (IDPs) by operating additional PHCs and mobile clinics.

UOSSM primary health care facilities were designed to meet the standards of essential health care services (EHSP), developed under the supervision of the World Health Organization.

UOSSM is involved in the primary health care field through first, second, third, and fourth primary health care levels.



## Services Provided at Primary Health Care Facilities:

Primary health care facilities offer a full package of services contingent on both needs and health care gaps in the area, and are provided according to the protocols of the essential health services package.

- Reproductive health services.
- Management of childhood illness.
- Dental health services.
- Mental health services and psychosocial support.
- Nutrition and community health services.
- Management of chronic diseases.
- Management of communicable diseases.
- Curative services.
- Diagnostic services.
- Referral services.

These services are provided according to the protocols of the essential health services package, which are the following:

- IMCI: Integrated management of childhood illness.
- RH: Reproductive health.
- NCD: Management of non-communicable diseases.
- CD: Management of communicable diseases.
- PSS: Psychosocial support.
- ICYF: Infant and Young Child Feeding.
- CMAM: Community-Based Management of Acute Malnutrition
- MH GAP: Mental Health Gap Action Program.

Health services were provided for the population in Idlib, Aleppo, and Al-Raqqah countryside.



## Capacity Building:

The primary health care workers have been trained according to the mentioned protocols. 129 staff trained in 2020 on the medical topics, 49% were females as shown in the graph below. This is a result of UOSSM's dedication to providing equal opportunities to men and women in recruitment and capacity-building.

## The topics of trainings in primary health care component:

- referral focal points
- Antenatal care and postnatal care
- COVID 19 prevention
- Detection and referral
- First Aid
- Family planning
- IMCI: integrated management of childhood illness.
- NCD: Management of non-communicable diseases.
- IPC: Infection prevention and control



## The beneficiaries:

The number of services provided at primary health care facilities increased in 2020. In 2020, in total 835,295 health services were provided to 582,105 beneficiaries. These health services include medical consultations by doctors in clinics, in addition to consultations from nutrition technicians, PSWs, and community health workers. Where 460,818 medical consultations were provided to 421,872 beneficiaries during 2020.

**835,295** Health Services 



**582,105** Beneficiaries

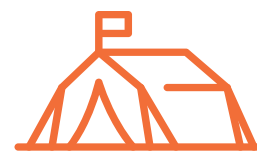


**%63**  
Female



**%37**  
Male

**%93**  
Displaced  
Persons



**%25**  
Under Age 5





In 2020, 93% of beneficiaries were displaced persons, 63% were females, and 25% were children under the age of five.

UOSSM provided free health care services equally to both males and females of all age groups, especially to the most vulnerable including women, children, and the elderly.

UOSSM covered around 61.5% of health needs in intervention areas.

A health gap remains, despite the fact that other medical organizations also conduct medical projects in these areas, showing the need for increased efforts and expansion to improve general public health in the community.



### Fixed Primary Health Care Facilities:

In 2020, UOSSM provided sustainable and high quality primary health care through its primary health care facilities.

737,870 services were provided at primary health care facilities with 419,967 medical consultations by doctors at different clinics including general medicine, reproductive health, pediatric, internal medicine, MH-Gap, bandaging, and dental clinics.



# 737,870

Services in  
Primary Care  
Facilities



# 419,967

Medical Consultations

### Natural Birth Department (Maternity center):

During 2020, UOSSM supported and operated one maternity center in Ariha sub-district of governorate, in which 2646 women were provided care by qualified and trained medical staff.

This has helped the rate of medical error and dangerous practices for mothers and newborn children that may occur with inexperienced staff in home deliveries.

These departments provided different services related to reproductive health, such as antenatal care, postpartum care, as well as treatment of various gynecological diseases.

No maternal deaths were recorded where high-risk pregnant women were referred to nearby hospitals in coordination with the referral network to ensure safe transportation.



# 2,646

Services Provided to  
Women



## Mobile Clinics:

In response to internal displacement, UOSSM offered emergency medical interventions, and primary health care services by operating mobile clinics in 2020.

Mobile clinics ensure flexibility and efficiency needed in areas of displacement, to individuals suffering from a lack of financial means to access appropriate medical care. Mobile clinics provided health care services to 94,387 people in 2020.

**Each mobile clinic is staffed with a general practitioner, nurse, psychosocial support worker, nutrition technician, and two community health workers.**



## Coordination with Partners:

To ensure the best implementation of primary health care services, UOSSM coordinates with different partners in technical working groups (TWG), supervised by the World Health Organization and UNFPA. Some examples are, NCD TWG, reproductive health TWG, Syrian immunization group, and the COVID-19 task force.

These technical groups play a pivotal role in the development of basic health packages, primary health protocols, and the development of monitoring and evaluation tools. They organize trainings for staff in Syria, guarantee the best application of protocols, and execute the sharing of ideas and challenges that partners face. This partnership operates through organized meetings and various workshops.

UOSSM is an active member of these TWGs and partners in implementing many related projects like the integrated MH-gap/NCD project, referral networks, capacity building for CHWs and vaccination projects.

## Response to COVID 19:

To prevent the spread of COVID-19 UOSSM has taken all necessary measures to ensure health services are provided in a safe environment for both patients and health providers.

To prevent overcrowding in facilities and long wait times, the phone/online pre-booking appointment service was activated.

To protect the most vulnerable patients from COVID-19 such as patients with chronic disease, online consultations were also activated.

To sort through suspected COVID-19 cases all patients and visitors must first visit the triage center. A patient's temperature is taken and is required to respond to the standardized COVID-19 infection questionnaire.

If a patient does not have a high temperature and does not display symptoms of the coronavirus, he/she is able to receive medical services in the center.

If a patient has a fever and meets the criteria for a COVID-19 infection, he/she is referred to the clinical examination tent for an examination by a doctor. If the doctor confirms a suspected COVID-19 case, the patient will be referred to the PCR laboratory. Transportation is provided by referral network vehicles.

In 2020, COVID-19 triage services were provided to 223,738 visitors and 1348 suspected cases were referred to the PCR laboratory.



# 02 Secondary and Tertiary Health Care



**305,564**

Beneficiaries



**196,165**

Outpatient Consultations



**38,026**

Obstetrics and gynecology consultations

**794**

Cesarean deliveries

**2,359**

Natural childbirth



## introduction:

UOSSM first paid attention to secondary and tertiary care, as it paid wide attention to developing services

UOSSM facilities are also characterized by free service and good dealing with beneficiaries in addition to a high level of coordination between all departments within the facilities.

Whereas, during 2020, UOSSM supported 12 facilities divided into 7 hospitals and 5 specialized centers, 4 of them continued, while support for TB center stopped at the end of June,

secondary and tertiary health care centers are located in the most needy and high populated areas.

## First: Secondary health care facilities with a simple explanation for the most important services provided and statistics during 2020

### Al-Hekma Hospital:

This hospital is the most important facility in northwestern of Syria, being the only facility that provides free quality services in ophthalmology and otolaryngology over a 24/24

#### ophthalmic department:

- Ophthalmic clinic
- Optometry clinic
- Elective and emergency surgeries
- admission ward
- Investigation ward :This department has the best and most qualitative equipment in field of eye surgery

#### otolaryngology department :

- ENT clinic
- Auditory Brainstem Response(ABR) clinic
- Elective and emergency surgeries
- Admission ward
- Speech therapy clinic

#### paramedic and pandage department:

- all over 24 hours/ day

#### Pharmacy service:

- provides free medicines over 24hrs



### Aqrabat hospital :

This hospital provides orthopedic surgery and reconstructive surgery service , It performs most orthopedic surgeries (interventions on the skeletal system such as fractures and trauma), and considered the only one who offering such services in this area

#### Pharmacy:

where provides free and quality medicines

#### Laboratory:

Performes analyzes that required for for clinics or befor and after surgeries

#### Oxygen department:

It is considered one of the most important departments, as it supplies oxygen cylinders around the clock to hospital departments and most hospitals in the region

#### admission department

It consists of four wards :

- Men's ward
- Children's ward
- women's ward
- Joint Operations ward

This department is equipped with sufficient beds and the necessary equipment and is fully committed to sterilization and infection prevention control protocols

#### Radiology department :

This department works to provide radiology services to all patients

#### Reconstructive surgery department:

includes

- reconstructive clinic
- operating room : permanent equipped and sterile in addition to a hospitalization ward

#### Orthopedic Department :

iincludes

- Four orthopedic clinics
- major operating admission ward
- minor operating admission ward

#### paramedic Department:

It receives emergency cases around the clock with high efficiency under direct supervision of doctors and with help of nurses

## Abin Samaan hospital:

Providing comprehensive obstetric and neonatal care services (CeMONC), where this hospital is equipped to care for mothers and newborns around the clock 7/24 in order to perform cesarean deliveries and natural births and manage obstetric complications

This hospital considered a central hospital where receive cases transferred from primary care centers and neighboring hospitals, as it provides its services to beneficiaries through all departments. It is also considered one of the most important centers that take care of pediatric diseases, gynecology and obstetrics.

### Laboratory:

Performs analyzes that required 24hrs /day

### Pharmacy:

where provides free and quality medicines

### paramedic department:

works all over the day

### Gynecology Department:

It includes

- Gynecology clinic
- Obstetric clinic(BeMONC)
- labor section(CeMONC)
- and the hospitalization ward,
- and surgeries are carried out in an equipped and sterile room.

### pediatric department:

Includes

- pediatric clinic
- hospitalization ward
- Incubators section with six incubators and two submarines supervised by doctors and nursing staff



## Kiwan surgical specialist hospital:

This hospital is located in a high populated area (where there are many camps). This hospital receives patients and provide free services throughout the week, as the hospital has 3 operating rooms with two hospitalization wards. The hospital is also considered one of the advanced hospitals in field of laparoscopic surgery ....

### Pharmacy:

where provides free and quality medicines for all department

### Laboratory:

Performs free analyzes that required 24hrs /day

### Internal department:

it provides internal consultations for patients in addition to consultations for surgical operations in the hospital and neighboring hospitals

### paramedic department :

works all over the day

### radiology Department:

provides free x-rays to patients in all departments, in addition to patients referred from other hospitals

### General Surgery Department include:

- General surgery clinic
- Major surgery operating room
- minor and emergency operations room
- Hospitalization ward

### Urology Department:

- Urology clinic
- Major surgeries ward
- Hospitalization ward



## Al-hawwash hospital for gynecology and pediatrics:

Specialized departments (laboratory - radiology - pharmacy)

### Paramedic and emergency department:

works around the clock under the supervision of resident doctors

### Gynecology Department:

It includes

- Gynecology clinic
- Obstetric clinic
- labor section
- and the hospitalization ward, and surgeries are carried out in an equipped and sterile room

### pediatric department:

Includes

- pediatric clinic
- hospitalization ward
- Incubators section with 3 incubators supervised by doctors and nursing staff

## Qalb Lozeh surgical specialist hosita:

- Paramedic and emergency department:
- radiology Department
- Laboratory
- Pharmacy:

### General Surgery Department include:

- General surgery clinic
- Major surgery operating room
- minor and emergency operations room
- Hospitalization ward

### otolaryngology department:

- ENT(ear- nose-throat ) clinic
- ENT surgeries
- admission ward

### pediatric department:

Includes

- pediatric clinic
- hospitalization ward
- Incubators section with 3 incubators supervised by doctors and nursing staff

### Gynecology Department:

It includes

- gynecology clinic
- obstetric clinic
- labor section
- and the hospitalization ward, and surgeries are carried out in and equipped and sterile room.

## The surgical unit at Jisr Al-Shughour :

surgical unit supported by UOSSM is located within Jisr Al-Shughour Hospital and it is an efficient and active unit, where it provides surgical and emergency services 24 hours a day.

### surgical unit Sections:

- emergency and ambulance department provides its services 24 hours a day under the supervision of the general surgeon on charge.
- Triage and Bandage Clinic.
- Surgical operating room.
- Surgical admission ward





The most important statistical figures in secondary care facilities during 2020



**261,927**

Beneficiaries in secondary care centers



**196,165**

Outpatient consultations



**44,252**

Pediatric's consultations



**77,134**

Laboratory tests



**121,418**

Radiography and ultrasound services



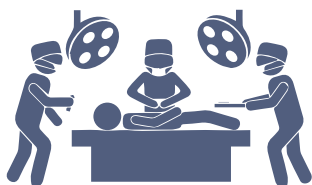
**20,491**

Admissions within hospital wards



**15,384**

Minor surgeries



**9,486**

Major surgeries



**45,267**

Trauma consultations



**38,026**

Obstetrics and gynecology consultations

**794**

Cesarean deliveries

**2,359**

Natural childbirth



## Second : tertiary health care facilities with a simple explanation for the most important services provided and statistics during 2020

### IBN Sena Center

is considered one of the most important specialized centers in northwestern Syria, as it works to provide hemodialysis sessions continuously around the clock under the supervision of a specialist doctor, as this service consider a distinct quality service . This department provides regular and emergency sessions by 20 dialysis devices. It also includes an internal clinic that evaluates patients and provides consultations.

### Blood Bank Center in Kelly :

- works to provide consultations for Thalassemia patients and blood
- blood collection through volunteer campaigns and transfusion operations for the beneficiaries,
- as there is a specialist internal doctor with a nursing staff who provides internal consultations
- and also provides blood analysis service
- and free insulin service for patients with diabetes.
- center for distributing infant formula

### Blood Bank Center in Kelly :

- works to provide consultations for Thalassemia patients and blood
- blood collection through volunteer campaigns and transfusion operations for the beneficiaries,
- as there is a specialist internal doctor with a nursing staff who provides internal consultations
- and also provides blood analysis service
- and free insulin service for patients with diabetes.
- center for distributing infant formula

### Thalassemia Center :

receives thalassemia patients to conduct consultations and exchange blood operations within an administrative time through:

- Thalassemia clinic: providing service to thalassemia patients, diagnosing the disease, treating , transfusing blood units and providing health education.
- Blood Transfusion Department
- Laboratory
- Pharmacy: Provides medicines according to availability

### Tuberculosis Center:

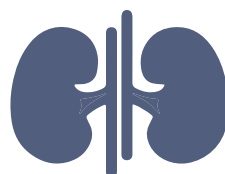
provides general consultations for TB patients, treatments , in addition to health awareness services, 6 days a week. ( closed at the end of June )

### The most important statistical figures in field of tertiary care during 2020



**42,242**

Beneficiaries of specialized centers



**13,307**

Hemodialysis sessions



**2,950**

Consultations provided to thalassemia patients



**23,503**

Number of radiography and CT scan services



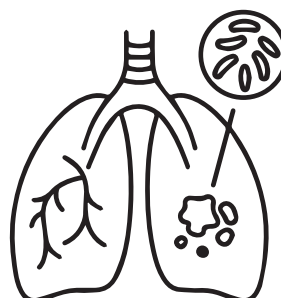
**3,702**

Recipients of blood units from the specialized centers



**25,471**

Laboratory tests at Blood Bank and Thalassemia Center



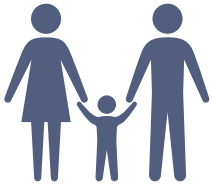
**1,491**

Visitors to the TB center within 6 months

## Dialysis center in Tal Abyad

It provides cold and emergency hemodialysis , as there are 4 dialysis machines available in the center

### The most important statistical figures at Tel Abyad Dialysis Center during 2020



**53**

Beneficiaries / 5 months



**349**

Hemodialysis sessions / 5 months



## Bladder Rehabilitation Unit in Sarmada

This Center provides urology consultations, as it includes the follows :

- Urology clinic
- Minor and major surgeries
- physical rehabilitation therapy after surgeries
- Admission ward
- Pathology Lab
- Diagnostic investigative services
- Laboratory

### The most important statistical figures in Bladder Rehabilitation Unit in Sarmada during 2020



**1,342**

Beneficiaries of specialized centers



**1,924**

Cystometrography consultations

**12,645**

Urology clinic consultations



**38,351**

Laboratory tests



**10,485**

Ultrasound consultations



**11,695**

Physical therapy consultations

# 03 Nutrition Program

**126,953**   
Beneficiaries

Community Health  
program

 **229,867**  
Beneficiaries

 **603,669**  
Consultations





## According HNO 2020

Chronic malnutrition is evident in most sub-districts throughout Syria – notably in the Northwest of Syria (Aleppo, Idlib) and North East Syria (Deir Ez Zor, Al-Raqqa and Hasakeh). Chronic malnutrition is also on the rise with almost half a million children stunted (low height for age) in 2020 and face losing their future due to hindered learning and physical developments, as well as early death<sup>1</sup>. While at least one out of eight children in Syria are chronically malnourished, this ratio is worse in areas affected by displacements, returns, and over-burdened communities such as North East Syria, Rural Damascus, Idlib (1 out of 5 children), and Aleppo (1 out of 4 children).<sup>2</sup> Stunting in Syria is largely caused by poor infant feeding practices, access to quality diversified diet, and repeated illnesses. To prevent chronic malnutrition, strengthening optimal infant feeding practices and maternal nutrition throughout the first 1,000 days of life is critical not only to the survival of children in Syria, but for their future.

Acute malnutrition remains relatively high among internally displaced children and mothers as well as population affected by conflict<sup>3</sup>. Throughout Syria,

about 240,000 children under the age of five years and over 50,000 pregnant and lactating mothers are in need for urgent lifesaving curative nutrition services<sup>4</sup>. At least 36,000 boys and 35,000 girls are acutely malnourished and are at increased risk of health complications, including death.<sup>5</sup> Furthermore, it is the youngest children that are the most vulnerable and affected, with higher numbers of acute malnutrition amongst infants under 6 months of age.

Anemia remains a challenge in Syria where at least one out of every three mothers and children are anemic<sup>7</sup>. Anemia among mothers and children is a multifaceted problem caused by limited access to health care, reduced quality meals (diverse diet) as well as negative coping mechanisms such as child marriage, which could lead to negative outcomes such as increased maternal mortality and morbidity, particularly in conflict-affected, overburdened, and underserved areas. Currently over one million children and over three million mothers in Syria are in a need of multi-sectoral support to treat and prevent anemia.<sup>8</sup> Without this support the cycle of chronic malnutrition in Syria will continue, over %90 of mothers will develop complications, and %5 of them could possibly die,

More than...

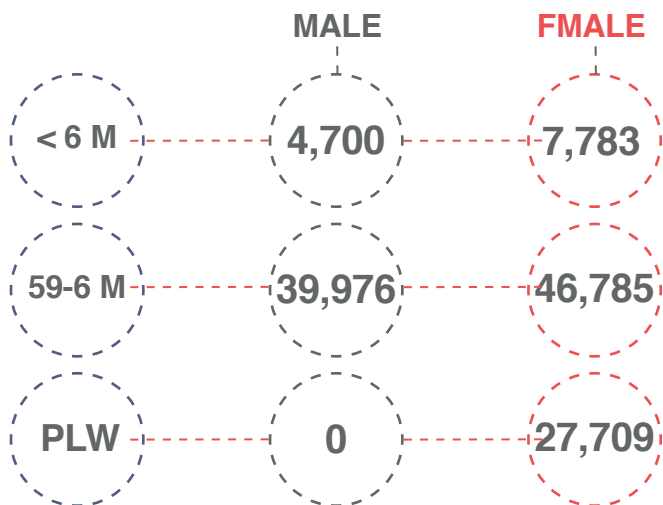
**240,000**  
children under the  
age of five years

**50,000**  
pregnant and lactating  
mothers

in need for urgent lifesaving  
curative nutrition services<sup>4</sup>

## UOSSM'S Team Response During 2020:

During 2020 total 126953 beneficiaries have received nutrition services through UOSSM' health facilities, Next table shows details of beneficiaries,



Whereas UOSSM has been a partner of UNICEF and the nutrition Cluster since 2012, The response to the nutritional need was in accordance with the strategy for UNICEF and the nutrition sector within COVID 19 epidemic, so our nutrition response has followed up a multi-sectoral approach to prevent and treat malnutrition and Intersectoral collaboration has been considered during nutrition assessments, resource mobilization, implementation, coordination, monitoring, and evaluation

All nutrition beneficiaries 126,953 have received raise awareness messages about corona epidemic In order to avoid catching the epidemic,

**126,953**  
Person

Receive awareness messages about 19-the COVID pandemic

## Nutrition centers supported by UOSSM during 2020



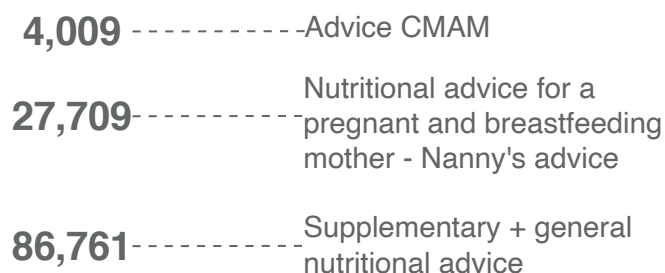
The response has targeted the most affected vulnerable population groups focusing on protecting and strengthening WHO recommended infant and young child feeding (IYCF) practices, age-appropriate micronutrient and anemia prevention interventions, and maternal nutrition through direct service delivery and integration with health sector through applying CMAM (Community Management of Acute Malnutrition) during treatment malnutrition cases



## During 2020 total



### IYCF MESSAGES



In addition, during response UOSSM teams have collaborated with the child protection program through identifying and refereeing GBV cases in to protection services (GBV case management) which results in strengthen the links between case management and nutrition services according WHO/ UNICEF recommended,

During 2020 total 54 cases among children under five years and pregnant and lactating women PLWs were referred to receive GBV services

WASH practices have been scalded up in the nutrition response through delivering hygiene massages side by side with IYCF (infant and young children feeding) to targeted beneficiaries PLWs (pregnant and lactating women) and care givers of children 59-0 months,

- All children 59-6 months and pregnant and lactating women(114490) have recived MUAC screening service
- 307 Malnutrition cases among children 59-6 months and 158 malnutrition cases among PLWs were treated,

## Community health program:

During 2020 UOSSM has resumed providing response to the health needs in Syria after ten years of war conditions, community health program services is It is one of the most important and influential health services at the community level during emergencies which is implemented through community health workers teams,

144 community health workers (72teams) linked to health facilities supported by UOSSM have delivered Community health services according to WHO's protocols,



### health facilities which includes community health teams during 2020:





All 144 community health workers have attended training according to the unified course of WHO and have delivered services according to six modules:

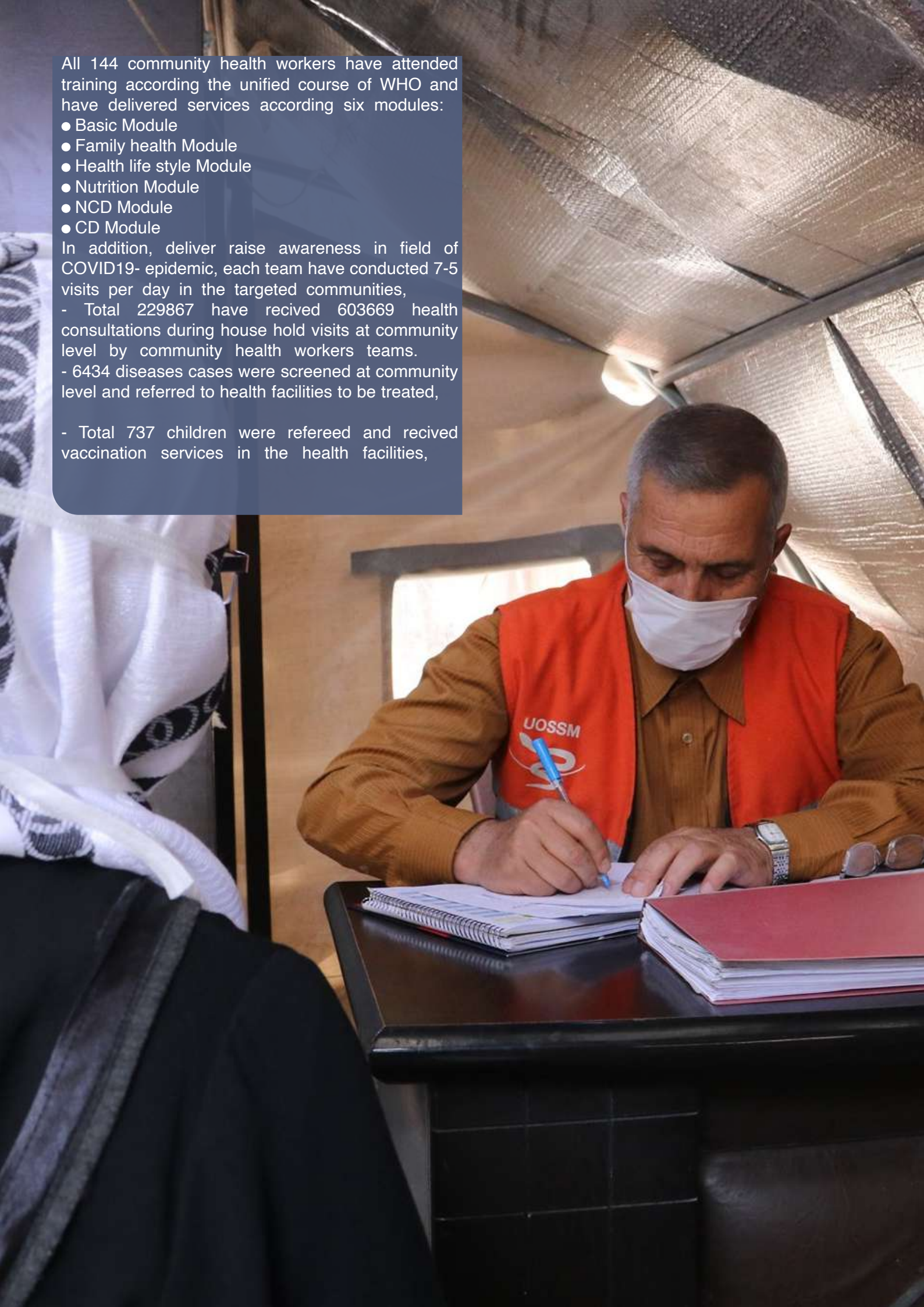
- Basic Module
- Family health Module
- Health life style Module
- Nutrition Module
- NCD Module
- CD Module

In addition, to deliver and raise awareness in the field of COVID-19 epidemic, each team has conducted 7-5 visits per day in the targeted communities,

- Total 229,867 have received 603,669 health consultations during household visits at the community level by community health worker teams.

- 6,434 disease cases were screened at the community level and referred to health facilities for treatment,

- Total 737 children were referred and received vaccination services in the health facilities,



# 04 Mental Health

**34,653**  
Beneficiaries



**32,606**  
MH  
Consultations



**3,146**  
MHPSS  
Activities





## introduction:

UOSSM, in line with the WHO, believes that mental health is an essential part of health services. UOSSM understands that people can be affected by war in different ways and began providing mental health and psychosocial support services (MHPSS) in 2013, seeking to provide a wide range of comprehensive services on all levels.

Over the past eight years, UOSSM operated MHPSS services by developing a variety of MHPSS response modules to assure coverage of the war-affected population needs according to the Inter Agencies Standing Committee (IASC) guidelines for MHPSS in emergency settings.

## UOSSM MHPSS services during 2020

UOSSM provides a variety of MHPSS services, at different intervention levels, for the war-affected population.

### 1. MH Specialized Services

Targets people in need of severe and acute mental health care by providing psychiatric care including psychotropic interventions, and hospitalization for acute cases, by 2 specialized psychiatrists and 27 psychiatric nurses.

	<p><b>27</b> Psychiatric Nurses</p>		<p><b>02</b> Specialized Psychiatrists</p>
--	---	---	--



### 2. MHPSS Focused Non-specialized Services

Targets people with other common mental health disorders and problems including:

- Mental Health Gap Action Program (mhGAP) services provided by 30 mhGAP trained doctors

- PSS services provided by 70 psychosocial support workers with:

- Individual MH services based on problem management plus (PM+) program.

- Psychosocial Support (PSS) activities for children based on PSS structured programs

- Raising mental health awareness in the community including MH awareness raising group sessions, distributing MH messages posters, home visits and MH awareness raising campaigns

- Individual psychoeducation for beneficiaries


- MH consultations provided remotely through MHPSS helpline service

- PSS recreational and interactive activities for adults

- Psychological first aid (PFA)

- Structured PSS activities for adults based on interpersonal therapy for groups (IPTG)

- Detection and referral

<p><b>30</b> Doctors</p>		<p>Provide MHGap Services</p>
<p><b>70</b> Psychosocial workers</p>		<p>PSS services provided by provided</p>

### 3. Creating active referral pathways with the other available humanitarian actors in the implementation areas by 12 social workers.

## UOSSM MHPSS Response in 2020:

### 1. Mental health centers with acute inpatient unit.

#### This module includes 2 units:

- One unit for acute cases in need of psychiatric care and temporary hospitalization
- Outpatient units that provide other complementary services of mhGAP, PM+ and psychoeducation. In 2020, UOSSM operated two mental health centers with inpatient units in Sarmada and Azaz.

### 2. Mental Health Centers:

This module focuses on providing a center and community-based MHPSS services of mhGAP and other PSS services by psychosocial workers. UOSSM operated two mental health centers in Al Bab and Al Karameh camp areas.

### 3. Integrated MHPSS Services in Health Facilities:

This module includes integrating MHPSS services in primary and secondary health facilities by providing mhGAP and other PSS activities provided by PSWs. UOSSM operated integrated MHPSS services in 18 different health facilities in Idlib.

### 4. MH Mobile Clinics:

Targets communities in camps, schools, and health facilities, who have no access to MHPSS services and provides mhGAP and other PSS complementary services.

## MHPSS Capacity Building:

UOSSM has high standards to provide high quality services by experienced and qualified staff. All UOSSM MHPSS staff receive a complete package of trainings in line with the inter-agency guidelines followed by ongoing/regular supervision mechanisms in the following:

1. mhGAP
2. Problems Management Plus PM+
3. Teaching recovery techniques TRT program
4. Group sessions facilitation skills
5. PFA
6. Detection and referral
7. Self-care staff

## Coordination Activities:

Since 2015, UOSSM has been an active member in the MHPSS technical working group TWG in WHO, which is the only platform and coordination body for all MHPSS actors in northern Syria. UOSSM, in collaboration with other members of the TWG, has contributed in the following activities:

- Preparing for PFA training materials in COVID-19 context, for frontline workers and community leaders
- Participating in TOT in Protection against sexual exploitation and abuse (PSEA) training, hosted by the WHO.
- Contributing to IEC materials on suicide prevention topics for distribution among community members in northern Syria.
- Preparing survey tool that screens suicide situation in northern Syria. The survey tool is applied by field workers.
- Sharing the 4Ws service mapping of MHPSS actors in northern Syria.
- Preparing and participating in the suicide prevention - conducted November 2020.
- Preparing for the next capacity building strategy for PSWs in northern Syria, which will focus on child mental health.





## Number of beneficiaries of psychosocial health program services

### Mental Health Awareness Raising-Adults

#### Group awareness sessions

**2,501**  
Beneficiaries



**399**  
Sessions



#### Home Visits

**330**  
Beneficiaries



**36**  
Sessions



#### Awareness Campaigns

**12,998**  
Beneficiaries



**1,379**  
Sessions



### PSS Activities for Children and Adolescents

**2,070**  
Beneficiaries



**290**  
Sessions



### PSS Activities for adults

**293**  
Beneficiaries



**980**  
sessions



### Problems management plus

**964**  
Beneficiaries



**4,418**  
Sessions



### Individual Psycho-education

**7,412**  
Beneficiaries



**10,448**  
sessions



### Help Line in Turkey and Northern Rural Aleppo

**306**  
Beneficiaries



**943**  
Sessions



### Help Line Idleb

**278**  
Beneficiaries



**894**  
sessions



### Psychological First Aid PFA

**539**  
Beneficiaries



**554**  
sessions



### Group Interpersonal Therapy (GIPT)

**12**  
Beneficiaries



**16**  
Sessions



### Teaching Recovery Techniques (TRT)

**120**  
Beneficiaries



**46**  
Sessions



### mhGAP

**5,424**  
Beneficiaries



**13,872**  
Sessions



### Acute MH Inpatients

**5,424**  
Beneficiaries



**13,872**  
Sessions



# 2020 In total



# 34,653

Beneficiaries



**17,798**



**16,855**

# 05 Protection



**55,926**

Beneficiaries of  
protection services

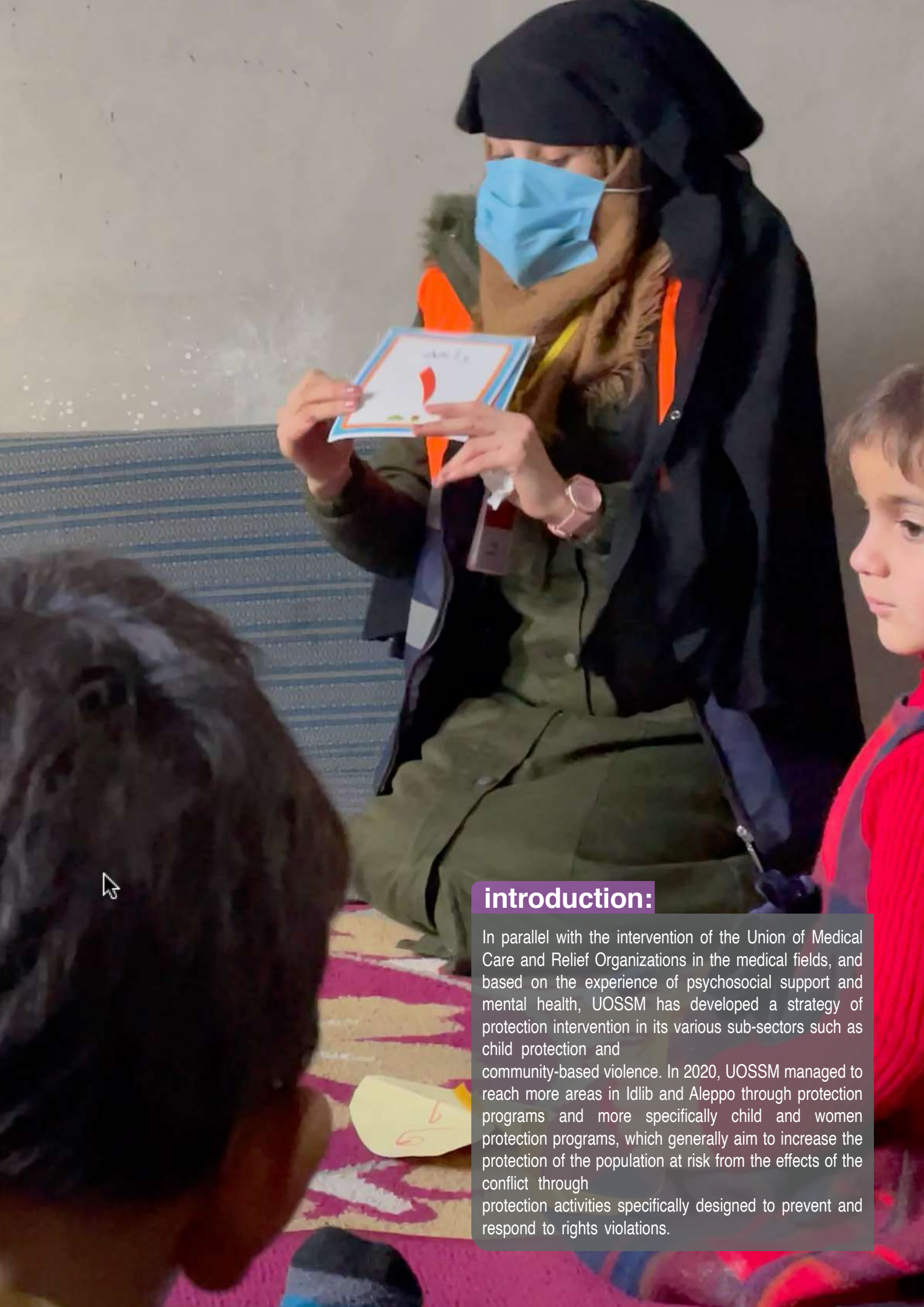


**27,825**

Beneficiaries of  
community child  
protection services







## introduction:

In parallel with the intervention of the Union of Medical Care and Relief Organizations in the medical fields, and based on the experience of psychosocial support and mental health, UOSSM has developed a strategy of protection intervention in its various sub-sectors such as child protection and community-based violence. In 2020, UOSSM managed to reach more areas in Idlib and Aleppo through protection programs and more specifically child and women protection programs, which generally aim to increase the protection of the population at risk from the effects of the conflict through protection activities specifically designed to prevent and respond to rights violations.

## First: Protection Facilities

UOSSM has developed several types of intervention for the implementation of activities related to the protection sector in accordance with the international recognized standards and guidelines of UNICEF, UNFPA, UNHCR and SOPs of the protection cluster and sub-cluster.

UOSSM also provides protection services through the following facilities:

1. Child Friendly Spaces (CFS): UOSSM founded and operated 3 child-friendly spaces in Harem and Atmah in the Idlib governorate, as well as a child-friendly space in Afrin, Aleppo.
2. Women Girl Safe Space (WGSS): Through 2 centers in both Atmah and Deir Hassan in the north of Idleb governorate
3. Men and Youth Club (MYC): through 2 Centers for men and adolescent boys in both Atmah and Deir Hassan in the north of Idleb governorate.

## Second: Protection Services

The services provided through the protection program can be divided into three main categories

### 1 Child Protection

- Structured and sustainable psychosocial support programs within child-friendly centers.
- Parenting skills programs.
- Recreational, not-structured and not-sustained psychosocial support programs based on child-friendly centers and based on community level through mobile teams.
- Early Childhood Development Program.
- Awareness campaigns on children's rights and protection concerns, and the establishment of community child protection committees trained in minimum standards for child protection and referral mechanisms.
- Specialized child protection services through case management.

### 2 Community protection

through psychosocial support, community awareness, sharing information about available services, and activating referral pathways in the targeted areas.

### 3 Empowering women and girls:

- Psychosocial support.
- Awareness of protection issues.
- Specialized services through case management.
- Distribution of dignity kits for women and girls.

## Third; Capacity Building:

Based on the standard for UOSSM to provide high quality services by expert and qualified staff, UOSSM has implemented an integrated package of training for protection in line with the inter-agency guidelines:



### 1. Child Protection:

- Psychological First Aid (PFA)
- Basic Principles of Psychosocial Support (PSSprinciples)
- Child Protection Case Management
- Reunification of the Family (FTR)
- Training Parenting Skills

### 2. Community Protection:

- Basic principles of community-based violence
- Minimum standards for child protection
- Monitoring of protection
- Basic principles of psychosocial support
- Stress management strategies
- Primary psychiatry

### 3. Empowerment of Women and Girls:

- Psychological First Aid
- Basic principles of community-based violence
- Improved problem processing (PM+)
- Communication skills
- Manage spaces that are girl-and-woman-friendly
- Minimum standards in psychosocial support
- Case management of gender-based violence (GBV case management)

#### Fourth: Coordination Activities:


With the importance of working in high coordination with all parties and institutions operating in the protection sector in mind, and to increase the actual humanitarian response, UOSSM participates in coordination with the protection sector, the child protection sub-sector, and the community-based violence sub-sector. Through periodic meetings, UOSSM coordinates with staff in these sectors to develop intervention strategies based on the needs and the capacities available in Northern Syria.


Additionally, by participating in the Protection Sector Working group in Northern Syria, UOSSM coordinates with staff to discuss challenges related to work as well as develop solutions and participate in emergency response plans for displacement movements that occurred last year.

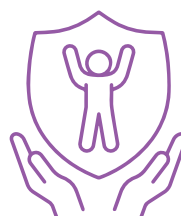
UOSSM participates with working groups of monitoring child protection, where in coordination with other partners, it contributes to monitoring and responding to needs.

UOSSM also participates in the working group of Child Protection Case Management, where UOSSM contributes, in coordination with other partners, to the development of SOPs in line with the Syrian context and child protection minimum standards at the same time.

#### Number of Beneficiaries:

 **55,926**  
beneficiaries of protection services

 18,642 male  37,284 female

 **27,825**  
beneficiaries of community child protection services

 11,795 male  16,030 female

Among them, **812** beneficiaries of specialized child protection services (case management),



# 28,101

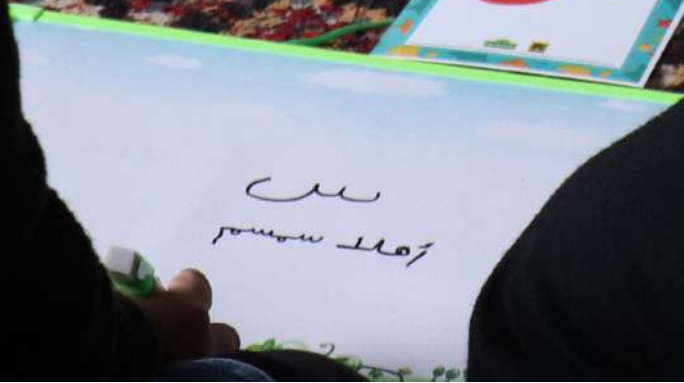
beneficiaries of empowering women and girls, GBV prevention and response services.

 2,332 male

 25,769 female

Among them, **765** beneficiaries of specialized protection services (GBV case management), 765 females





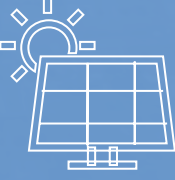


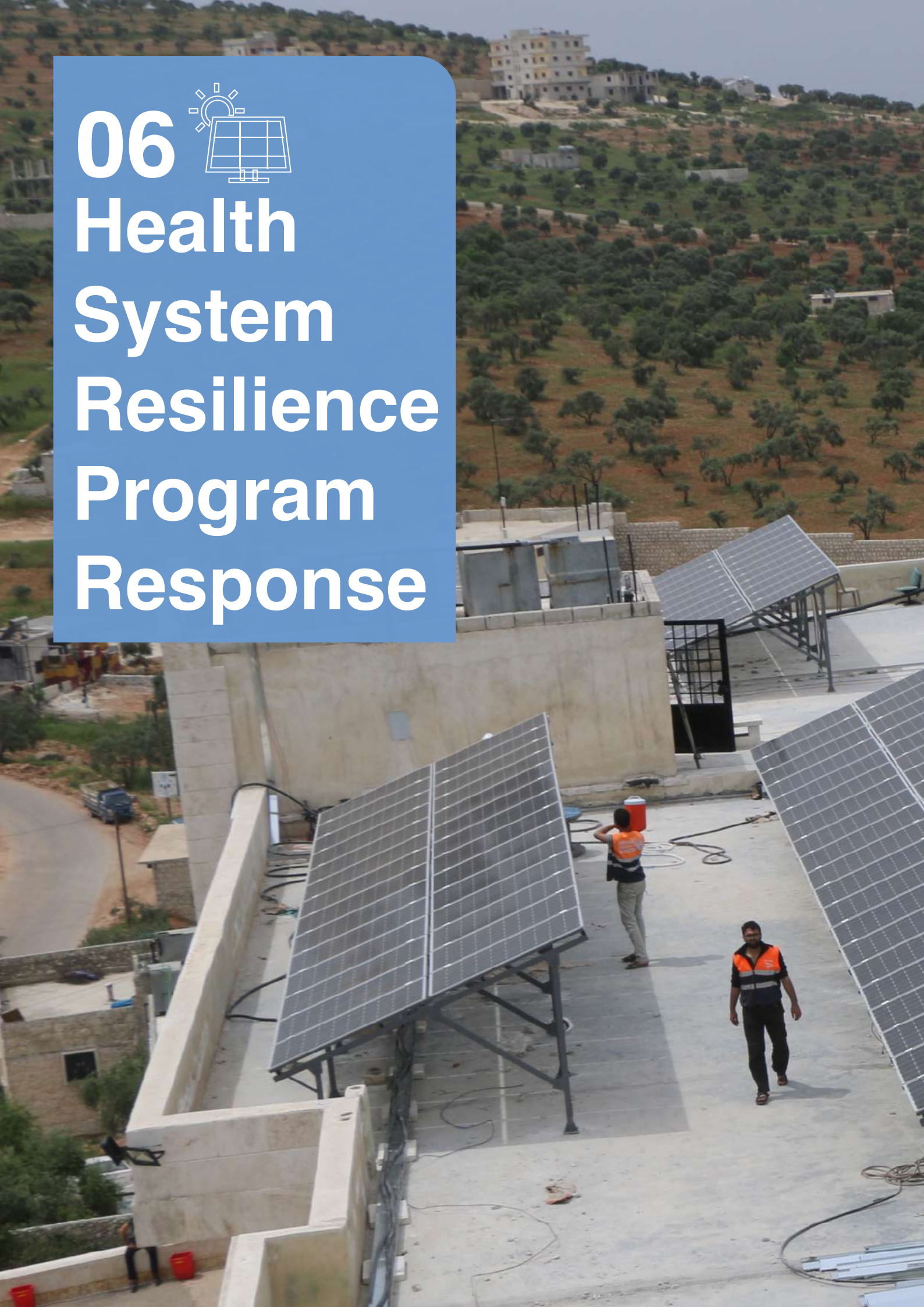
Usoor



جاء



06   
Health  
System  
Resilience  
Program  
Response



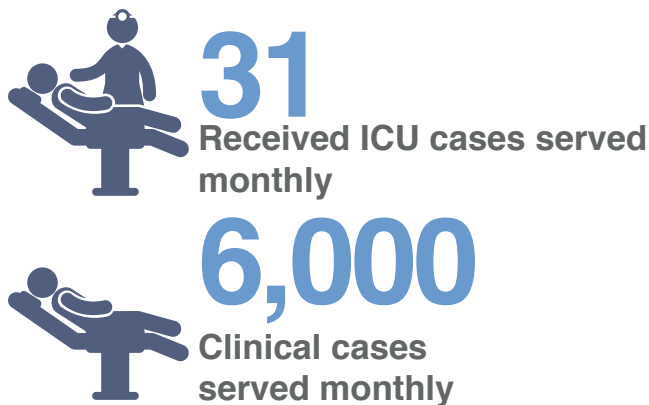


## Firstly: Renewable Energy (Solar Photo-Voltaic Systems)

There were several diverse activities serving the sustainability of solar systems, on the one hand, and on the other hand, working on designing new solar systems in conformity with the Syria Solar Initiative, in order to secure energy in the most vital hospitals in northwestern Syria.

The energy team has monitored the solar systems in the both (Bab Al-Hawa Hospital - Aqrabat Hospital) and took the necessary measures in terms of taking care of periodic maintenance and providing training to the maintenance team in the hospitals in order to maintain the high efficiency of these systems in providing the required energy and reducing dependence on fuel thus operating expenses Less.

On the other hand, the energy team continued to innovate in designing a new project under the Syria Solar Initiative, by focusing on the most vital hospitals in quality services in order to secure their energy needs through the solar system. Within this project, the biggest challenge was the lack of support for the Atma Hospital (Maternity and Children) to be included in the Syria Solar Initiative projects. Knowing that Atma Hospital provides many and varied services, we mention, for example:



**115** Cesarean deliveries (C-section) cases served monthly



**350** Normal deliveries cases served monthly



**70** Pediatric surgical cases served monthly



**400** Received pediatric cases served monthly



**95** Received incubators cases served monthly





**SUNNY PORTAL**  
powered by ennexOS

Talal Kanaan ▾

AOH PV System    Select Device

---

**Dashboard AOH PV System**

**STATUS**

- SN: 1901309912
- SN: 1901310180
- SN: 1901310281
- SN: 3002311945
- Data Manager

**ENERGY BALANCE**  
5 minutes ago

**41.35**  
kW

Generation

**28.04**  
kW

Consumption →

**BATTERY**  
5 minutes ago

**91** %  
Battery state of charge

**13.31** kW  
Charging power

**CO<sub>2</sub> AVOIDANCE**

**934** kg  
today

**104,84** kg  
Total

**BATTERY HISTORY**

63.47 kWh  
Charge  
60.12 kWh  
Discharge

3,055.26 kWh  
Charge  
3,976.37 kWh  
Discharge

23.93 MWh  
Charge  
20.81 MWh  
Discharge

**WEATHER**  
In Aqaba

**37** °C  
currently

Cloudless

**41** °C | **23** °C  
tomorrow

Cloudless

## Secondly: The Integrated System to Resilience the Health Infrastructure

The project, as designed, will integrate several systems in the context of humanitarian medical work, which will be concerned with the following points:

- Renewable energy (solar PV systems within medical health facilities);
- Transportation (electric vehicles for ambulance and vaccine transport); and
- Telemedicine (covering the shortage of medical human resources).

The integrated system can be summarized by looking for and creating a mechanism connecting the three elements so that the surplus power from the solar energy systems within the health facilities used to charge the battery with the electric vehicle (ambulance), and the telemedicine platform is available to provide medical consultations that will reduce the number of referral cases to patients and reduce the loads on other facilities.

The project aims primarily to publishing the knowledge resulting from the pilot period in the project within an electronic platform (open-source) available in different languages in order for workers in the humanitarian sector to benefit from it to develop and implement projects that go into these systems separately or in an integrated way.

## 1- Renewable Energy:

The technical team is constantly researching the mechanism for selecting the most vital medical facilities according to an advanced “Assessment Tool” that simulates (status quo) in order to work on intervention a new solar PV systems, in addition, to making use of installations by solar PV systems to install electric charging points to provide electric vehicle with the necessary energy to provide related services by transfer, whether for referral and/or vaccine transfer cases.

## 2- Transportation:

Within the year 2020, the project team analyzed the information that was provided by local NGOs working in the ambulance and referral systems in northwestern Syria, and after analyzing the data, the most appropriate electric vehicles were determined according to several technical parameters (engine power, capacity loads, kilometer range, battery capacity, and distance efficiency as well as other parameters), which achieves the required goal of supplying the first electric vehicle (%100) in addition, to knowing the energy required for charging, depend on the locations for the distribution and installation of the required charging points are chosen. Where we faced several logistical challenges in order to purchasing the electric vehicle from the global markets. More research will be conducted into the possibility of supplying the EV from the Turkish market if it is found in 2021, or looking for alternative options that guarantee us the purchase of the EV within the project period.



### 3- Telemedicine:

After analyzing the data received through the local NGOs working in the medical sector in northwestern Syria, several standards and parameters related to the medical and technical aspect of the medical facility were set before it was selected, as a pilot project to intervene in the telemedicine technology. The specialties that have been selected according to the parameters are:

Mental Health, Intensive Care Unit (ICU), and Pediatrics. Intervention will be made in 3 health facilities by fully equipping the infrastructure to be ready after designing the telemedicine platform, which is expected to enter service in the second quarter of 2021 after contracting with doctors who volunteer to provide their consulting services for the chosen specialties.

The team made frequent visits to the selected health facilities and met with the service providers for each department to find out the necessary infrastructure needs the civil, electrical, and communication works for telemedicine rooms (such as satellite internet, lighting, servers, and isolation), in addition, relying on the special forms for each department to be developed within the telemedicine platform.



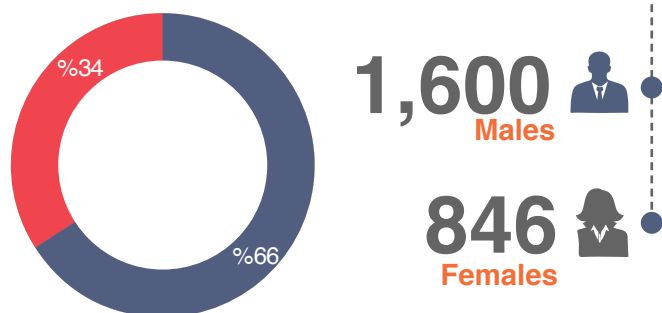
# Human Resources



Sometimes equipment looks nice and beneficial, but the most important quality is the person that makes it work well

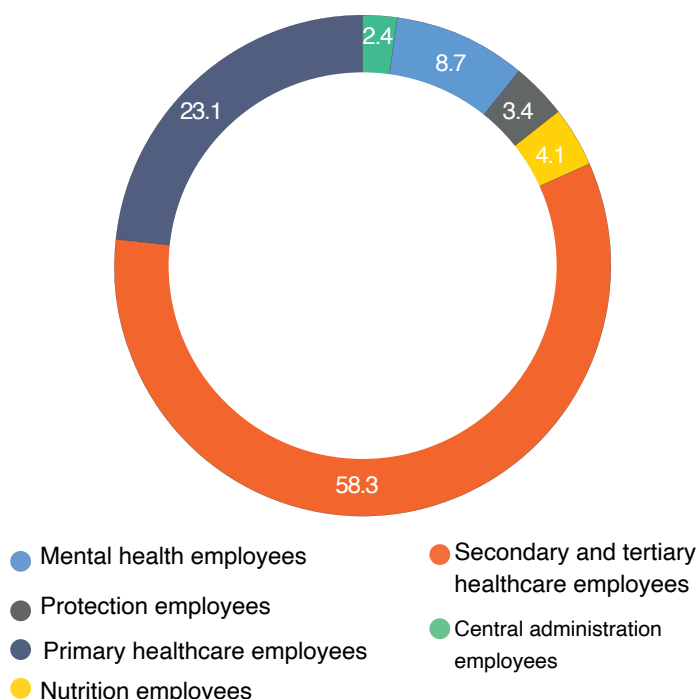
### Human Resources Statistics for UOSSM's Mission in Gaziantep/Turkey in 2020:

These numbers and statistics include UOSSM's mission only and does not include the staff of member organizations. By the end of 2020 UOSSM had 2,436 employees, 2,369 of which work inside Syria, and 64 work in Turkey.

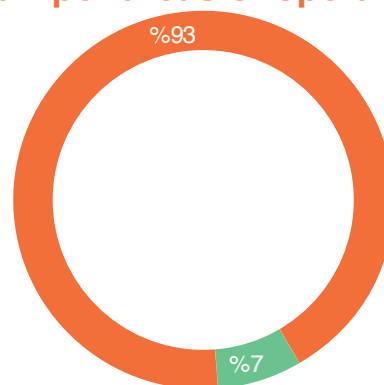


UOSSM's human resources are distributed based on the mission's activities. Employees of the primary, secondary, and tertiary healthcare sector make up 1420 of the mission's total employees. The employees of the primary healthcare sector are 560, and 213 employees work in the mental health and psychosocial support sector. The number of staff in the nutrition program reached 100 employees; the protection program had 84 employees; and the central administrative staff had 59 employees through 2020.

### The distribution of the mission's staff per program



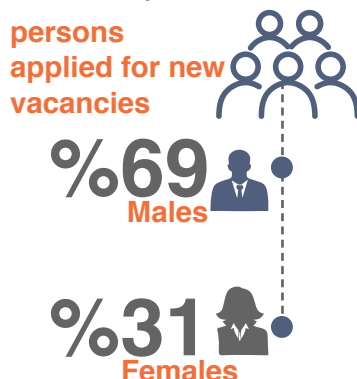
### Distribution of the mission's staff per areas of operation



● 2,396 employees in Syria ● 67 employees in Turkey

### The mission's recruitment statistics in 2021:

481 new vacancy announcements were published during 2020 through 6 different recruitment platforms. 67,039 people applied to these vacancies, 69% of them were males and 31% were females.



The mission contracted with 1,255 new employees during 2020. 60% or them were males while females percentage was 40%



New employees have been hired in 2020

# Financial Management Summary

**20,928,983 \$**

mission of Union of Medical Care and Relief Organizations in Gaziantep/Turkey

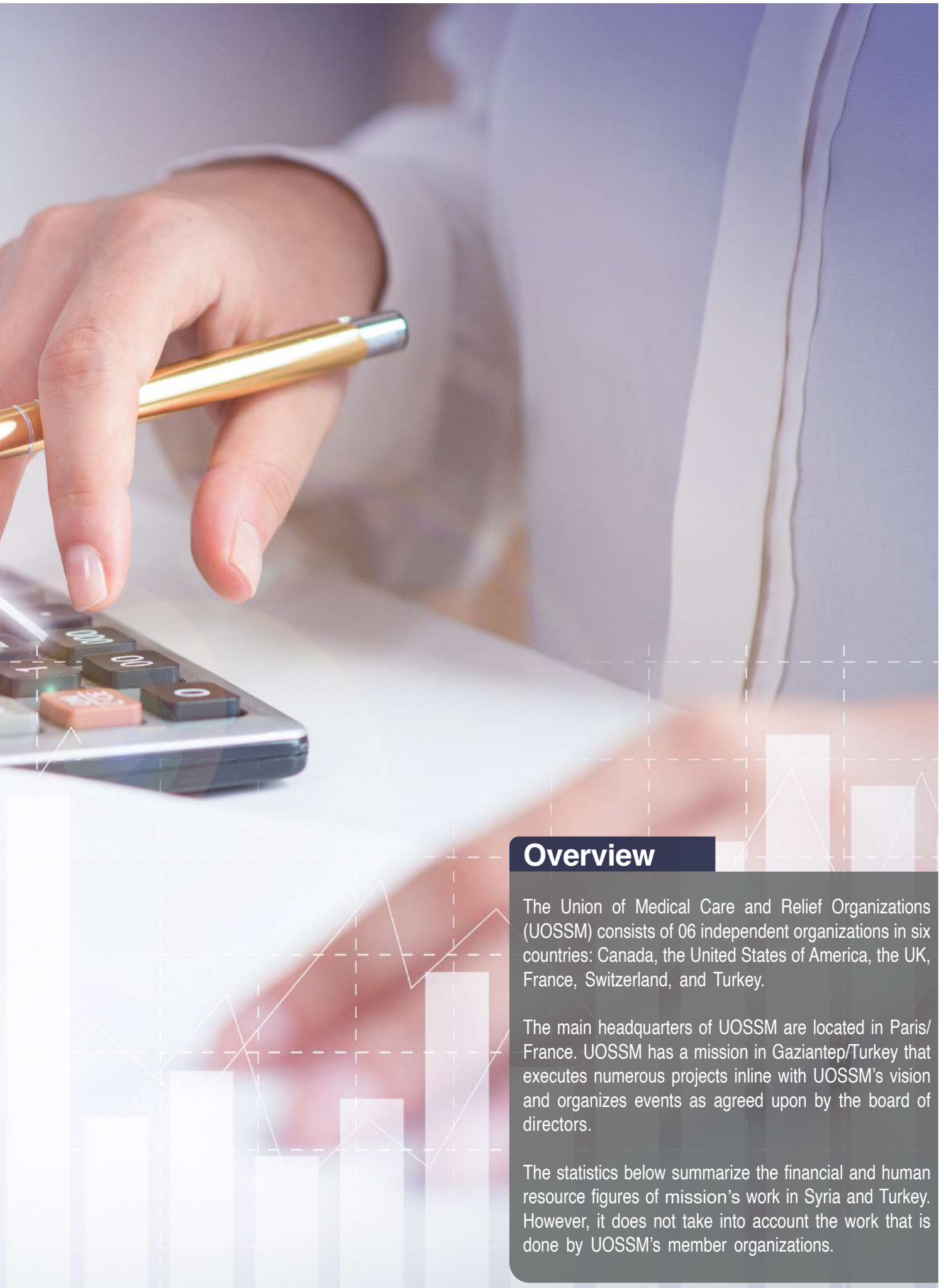
**18,395,150 \$** ●

Financial (fund raising) Events

**2,533,833 \$** ●

Admin Expenditure





## Overview

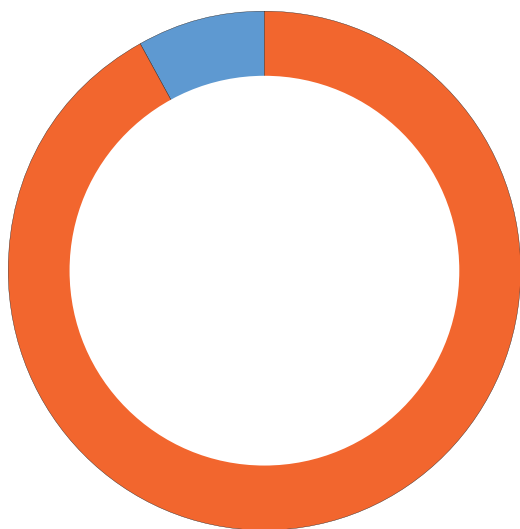
The Union of Medical Care and Relief Organizations (UOSSM) consists of 06 independent organizations in six countries: Canada, the United States of America, the UK, France, Switzerland, and Turkey.

The main headquarters of UOSSM are located in Paris/ France. UOSSM has a mission in Gaziantep/Turkey that executes numerous projects inline with UOSSM's vision and organizes events as agreed upon by the board of directors.

The statistics below summarize the financial and human resource figures of mission's work in Syria and Turkey. However, it does not take into account the work that is done by UOSSM's member organizations.

### How was the money spent?

In the year of 2020, the magnitude of mission's work in humanitarian and medical relief was **\$20,928,983** in total (expenses). The breakdown of this total is shown below:



■ Fundraising (financial) events **92%**

■ Admin Expenditure **8%**

#### In-kind Expenses:

Mission's in-kind expenses totaled \$2,533,833 (12% of the total expenses) in 2020. This budget was mainly allocated to primary, secondary and tertiary healthcare work.

#### Financial Events:

This comprises of the operational costs such as: costs of medicines and medical equipment, staff wages, and transportation costs.

The total magnitude of the financial events was \$18,395,148 which is 88% of the total work.



**92¢**  
Cents out of every dollar  
for beneficiaries through  
one of the Union's ac-  
tivities in the year  
**2020**



## Mission's costs per operation type



Administration Fund



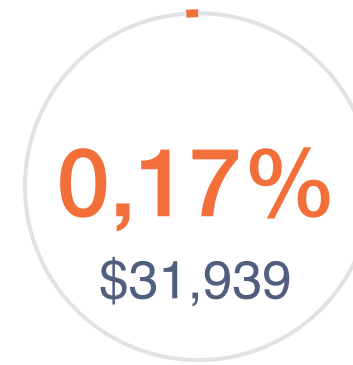
Mental Health  
Fund



PHC Fund



STHC  
Fund



Outsourcing



Health infra-  
structure Fund



Vaccination  
Fund

## Glossary:

ACU: Aid Coordination Unit  
CATT: Children's Accelerated Trauma Therapy  
CBT: Cognitive Behavioral Therapy  
CD: Communicable Diseases  
CDC: Center of Disease Control  
CHS: Core Humanitarian Standards  
CHW: Community Health Workers  
CMAM: Community Management for Acute Malnutrition  
CMR: Clinical Management for Rape  
COSV: Coordinating Committee of the Organization for Voluntary Service  
DQS: deutsche qualität societe - Deutsche Gesellschaft zur Zertifizierung von Managementsystemen  
EHSP: Essential Health Services Package  
ERCP: Endoscopic Retrograde Cholangiopancreatography  
FTR: Family Tracing and Reunification  
GAM: Global Acute Malnutrition  
GBV: Gender Based Violence  
GIZ: Gesellschaft für Internationale Zusammenarbeit  
HNO: Humanitarian Need Overview  
IASC: Inter agency standing committee  
IMCI: Integrated Management for Children Illnesses  
IQNET: The International Certification Network  
IRD: International Relief and Development  
IWRP: International Women's Rights Project  
IYCF: Infant and Young Children Feeding  
KWDC: Kilo Watt Direct Current  
MAM: Moderate Acute Malnutrition  
MH-GAP: Mental Health Gap Action Program  
NCD: Non-communicable Diseases  
PFA: Psychological First Aid  
PM+: Problem Management Plus  
PSS: Psycho-Social Support  
RH: Reproductive Health  
SAM: Severe Acute Malnutrition  
SAMS: Syrian American Medical Society  
UNFPA: United Nations fund for population Agency  
UNHCR: United Nations High Commissioner for Refugees  
WHO: World Health Organization

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