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The
world is
sick,
only
together
we can
cure it.

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ACTIVITY REPORT 2016-2021



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Care Without Judgement



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SUMMARY

TOTAL VALUE OF MEDICINES & MEDICAL SUPPLY SHIPMENT PROVIDED BY DDD IN NWS (2018-2019-2021)	83
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SYRIA PROGRAMME IMPACT 2021

SYRIA PROGRAMME IMPACT 2021	94
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Indifference
is a disease.

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A MESSAGE FROM THE FOUNDER AND PRESIDENT

Since 2011, the Syrian crisis has been a bleeding wound for humanity. Although more than 10 years have passed since the beginning of the conflict, the crisis has deepened, become more unpredictable, and unfortunately continuous to deteriorate. The COVID-19 pandemic has claimed millions of lives, while the international community has failed to deliver vaccines to poor countries. Even if science has shown significant advances in vaccination and treatment process during the pandemic, unjust distribution of vaccines and patents over them are still significant challenges to end this health crisis.

In addition to all these, the effects of climate change are increasingly being felt. In 2021, climate change contributed to catastrophic floods in the north of Turkey killing 82 people in August in the affected areas of Kastamonu, Sinop and Bartın. At the same time, forest fires ravaged the south in the Aegean and Mediterranean regions devastating homes and wildlife. This situation was not unique to Turkey. The effects of climate change have also had a great impact on every corner of life all over the world and is contributing to migration trends.

Moreover, ongoing violations of fundamental human rights by governments and non-state actors continue to force people to flee in search of safety. These people often face new forms of violence and oppression as refugees and migrants, particularly women and children. This situation has not received the attention it requires by the international community to provide a comprehensive response.

The conditions since the Taliban seized power in Afghanistan have forced Afghan people, who have already been struggling to survive in the country for years, to migrate to Turkey and Europe via Pakistan and Iran. Under the current circumstances, our country is also having difficulties in dealing with the shock wave caused by an additional migration of Afghan refugees. Moreover, for Turkey, there is a potential risk of additional wave of migration of three million refugees at the border in Syria's Idlib region. All these things told above are just the tip of the iceberg.



In addition to health protection, and education needs of the refugees, the social integration efforts for the host communities in the countries they took refuge remain a challenge. Yet, there is insufficient capacity to respond to the psychosocial needs of displaced refugees and migrants who have trauma related to their experiences of war and migration, and challenges related to language and integration in host society. This necessitates ongoing assistance to address this gap.

Under these circumstances, the cooperation and coordination among public institutions, non-governmental organizations and local governments that to provide services to the 3,738,032 million officially registered Syrian refugees in Turkey play a very significant role in more efficient use of resources and in making interventions at the right place and at the right time. It seems obvious that we need a more planned and higher capacity, considering that the current refugee influx will increase, and the negative effects of climate crisis may last for centuries even with an optimistic estimation.

According to the Global Report on Internal Displacement, approximately 21.5 million people have migrated every year since 2008 mainly due to weather conditions and disasters such as floods, storms, hurricanes, and extreme droughts. It is reported that the number of climate and weather-related disasters have been on the rise since the 1960s, According to the Global Report on Internal Displacement, approximately 21.5 million people

have migrated every year since 2008 mainly due to weather conditions and disasters such as floods, storms, hurricanes, and extreme droughts. It has increased by 35% since the 1990s. Due to its geographical position on major migration routes, Turkey is one of the countries that may see an increase of climate change-related migration. In this context, it is a must that the international community urgently take the necessary steps to make appropriate preparations and investments to avoid climate migration that negatively impacts the people living in underdeveloped and developing countries most.

Furthermore, the impact of the COVID-19 pandemic has slowed production, disrupted supply chains, created economic crises and political tensions, which make the operations carried out by humanitarian aid actors extremely difficult.

The deep humanitarian crises that have emerged in recent years all around the world have almost made people forget the challenges faced by African countries struggling with hunger, drought, and poverty. The aid delivered to these regions has unfortunately decreased, while the impact of the pandemic and poverty increased the migration flow on the continent.

Dünya Doktorları (DDD)/Médecins du Monde (Mdm) Turkey continues to provide services with a total of 146 personnel, including 77 medical, 69 administrative and auxiliary staff, and 12 primary health care centres in Turkey and North West Syria (NWS). According to Early Warning Alert and Response Network (EWARN), NWS has a total of 72,689 confirmed cases of COVID-19 as of January 2021, with 1,100 deaths. While a total of 259,252 PCR tests were conducted in this region alone, the country experienced the most severe wave of the pandemic between August and October 2021, with a test positivity rate of up to 61% in the EPI W41.

Through primary health care, psychosocial support, protection services, and health promotion activities provided by our clinics and mobile units, 89,195 people accessed to health care services with 141,580 consultations in Syria between September 2020 and

September 2021 alone. Even these figures, reached by Dünya Doktorları/Médecins du Monde Turkey, who offered direct services to 1,367,000 people from 2017 to the end of 2020 within its programs in Syria and Turkey, providing 82,306,884,80 TRY worth of medicines and medical supplies, show how serious the crisis in the region is. It is a clear indication that the crisis is still ongoing and that more resources along with funding are needed to sustain humanitarian assistance carried out by local and international NGOs. Undoubtedly and unfortunately, what has been done in the region is insufficient in the face of current situation and circumstances.

When we focus on the issue as non-governmental organizations, we see that understanding what comes before the potential crises and taking preventative measures will be much more effective than the phase of humanitarian crisis intervention. In this sense, communication channels, coordination among relevant actors, information, and advocacy that will always be needed for immediate and effective intervention to both natural disasters and other humanitarian crises mentioned above.

I wish I could paint a rosy picture of the future period for humanity, but it seems that the test, which has already been very difficult for humanity, will become even more severe due to the ongoing wars in various parts of the world, increasing poverty, infectious diseases, and the impact of climate change.

We believe that the great efforts and work of humanitarian workers with an endless hope and passion will carry the world to a better future in all aspects. We, as Dünya Doktorları, are working harder to treat this sick world and build a much more beautiful one for all people in need, and we'll continue to do so.

Hakan Bilgin

*The Founder and President of
Dunya Doktorlari Dernegi*





GENERAL INFORMATION

WHO WE ARE

Dünya Doktorları Derneği (DDD) – Médecins du Monde Turkey/Doctors of the World Turkey works to ensure a world where barriers to health have been overcome and where the right to health has been achieved for all.

DDD is independent of all political, religious, financial authorities, or interests. We are the 16th member of the Doctors of the World / Médecins du Monde – International Network and are committed to meeting the physical and mental health needs of vulnerable people in our region. As a Turkish-based humanitarian non-governmental organization with over seven years of experience implementing primary healthcare services, we facilitate access to healthcare for populations affected by armed conflict, violence, natural disasters, disease, famine, poverty, and exclusion. To respond to the medical needs of vulnerable populations, our organization collaborates with partners and key stakeholders to implement projects that facilitate access to primary and secondary healthcare services and mental health and psychosocial support services.

We use our position and leverage DDD's expertise in healthcare to advocate on behalf of the most vulnerable. Since 2015, DDD has been implementing programs in Turkey providing refugees and undocumented migrants with free access to healthcare and MHPSS services. In 2018, DDD began operations in Turkish controlled areas of North West Syria (NWS). At the beginning of 2019, Médecins du Monde France handed over its NWS programming to DDD. DDD and partners are now providing Primary Health Care (PHC), Sexual and Reproductive Health (SRH) and Mental Health and Psychosocial Support (MHPSS) services across 14 health facilities, and one BEmONC center, directly reaching more than half-a-million individuals in NWS.

In April 2021, to fight the pandemic in the region, DDD has started to perform PCR tests in Syria's Afrin and Idlib, where COVID-19 testing opportunities and conditions are very difficult.

In addition to its Syria operations, in September 2021, DDD has started its new Turkey project in Istanbul (Zeytinburnu, Esenyurt and Fatih), Izmir (Konak and Torbali), and Manisa (Saruhanli and Turgutlu), providing health-focused mobile protection and health care services for refugees.

OUR MISSION, VALUES, AND VISION

DDD's mission is to provide lifesaving and life-sustaining medical care to those most in need by assisting populations in distress, victims of natural and man-made disasters or armed conflicts.

Since 2015, DDD implements programmes in both Turkey and Syria, offering free access to healthcare services to refugee and internally displaced populations. DDD works with a range of humanitarian professionals and technical experts to provide PHC, MHPSS as well as SRH services.

As DDD, our mission is to provide support to all people who are excluded from the health system, since at least half of the world's population, particularly children, women and refugees, lack access to essential health services and medical care due to global injustice and misuse of resources.

We believe in inclusive social justice as a vehicle for equal access to healthcare, respect for fundamental rights and collective solidarity. We provide gender-sensitive services to ensure the inclusion of women and girls, as well as other marginalized groups. With our partners, communities, and their representatives, we work to empower all culturally, socially, and physically vulnerable populations to act within their social environment, to become actors in their own health and to exercise their rights. We seek balance between national and international action, between emergency and long-term actions.







DDD's organizational values as reflected in our operations and staff are threefold:

01

A human-centred rights-based approach.

02

Accountability toward our donors and beneficiaries.

03

An inclusive approach regardless of gender, age, status, disability etc.







DDD TURKEY PROGRAMME IMPACT 2020



PHC & SRH



In 2020, over **4.000 seasonal agricultural workers** in Izmir (all Syrians), were provided with primary health care and SRH.

4.000 } **seasonal agricultural workers**



MHPSS



25.143 people (95% are Syrians) benefitted from MHPSS services provided by DDD and its partner UOSSM coordination with the Turkish Ministry of Health in Hatay, Izmir and Istanbul.

25.143 } **(95% are Syrians)**
people } **benefitted from MHPSS services**



Protection



Over **1000 vulnerable individuals (70% from the African continent)** benefitted from health support and protection through DDD's Istanbul Community Center.

1000 } **70% from the African continent**
vulnerable

Health needs are considerably high among the migrant and refugee populations in Turkey, particularly among Syrians. War-trauma compounded by the subsequent displacements and poor living conditions have led to increase Syrian refugees' vulnerability to health risks. Many suffer from chronic diseases, physical injuries and/or impairments as well as from mental health and psychosocial issues.

According to DDD's 2019 multi-sectoral needs assessment, 55% of the surveyed households have at least one member who regularly feel distressed, upset, sad, worried, scared, or angry. The conflict and its subsequent displacements combined with poor living conditions in Turkey have had serious consequences on refugees' psychological wellbeing, with a particularly adverse impact on women, elderly and children.

Migrants and refugees living in rural areas of Turkey face additional barriers and have little to no access to healthcare services due to distance, financial constraints and lack of information on available services.

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SYRIA

After nearly 10 years of conflict targeting both civilians and infrastructure, the humanitarian situation in Syria continues to be severe, impacting the physical and mental health of primarily women and children, as well as men, boys, elderly and people with disabilities. According to the United Nations, 11.6M people need humanitarian assistance and 6.1M people remain internally displaced in Syria.

The COVID-19 pandemic is occurring within the context of already dire health conditions following years of conflict and population displacements. Since October, reported cases have accelerated across the country.



The number of affected healthcare workers underscores – given Syria's fragile healthcare system with already insufficient qualified personnel – the potential for its overstretched healthcare capacity to be further compromised. Given the limited/insufficient testing across Syria, it is therefore likely that the actual number of cases far exceeds official figures, with significant numbers of asymptomatic and mild cases going undetected.

The insecurity in the region endangers the mental and physical health of civilian and affect basic infrastructures such as IDP camps, health centres and hospitals. Many people have been displaced several times already and finding safe shelter adds additional physical, emotional, and psychological distress to many. In December 2020 Idlib and Aleppo governorates, particularly Afrin district, were the top origin and arrival respectively for the newly displaced IDPs. Displaced people from Idlib are fleeing to Aleppo governorate and Afrin district in particular. Health service delivery and infrastructures in NWS remains fragile. Since 1 December 2019, over 80 health facilities temporarily or permanently suspended services in NWS due to the armed conflict. The high density of IDPs in Idlib districts like Harim, make these populations unduly dependent on service providers and vulnerable if one is removed. Thus, the health infrastructure and human resources available, epidemiological surveillance system and laboratory capacity are inadequate to respond.

Sanitation and water infrastructure are inadequate, particularly for IDP populations raising the risk of water-borne diseases. Overcrowded IDP areas and poor hygiene conditions are also high-risk factors for transmission within camps and to the host communities.



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DDD INTERVENTION

DDD focused on implementing activities that meet refugees and migrants' most pressing needs by providing mental health and psychosocial support as well as Primary Health Care (PHC) through Medical Mobile Units (MMUs) in Turkey's İstanbul, İzmir and Hatay between 2016-2020.

Through its MMUs in the rural areas of Bayraklı and Torbalı districts of İzmir and in Manisa, DDD provided PHC services, medical and SRH consultations, preventive screening sessions and supports referrals to its İzmir MHPSS Center and PHC facilities. In its Community Centre in Fatih (İstanbul), DDD aimed at promoting the integration of Sub-Saharan African refugees, migrants and asylum seekers into the host population and the public health services.

Within the context of its Syria Programme, DDD has ensured the provision of PHC, SRH and MHPSS services both to the displaced and host populations in Aleppo and Idlib governorates of Syria through direct implementation and implementing partners. DDD also provided awareness and health promotion group sessions.

In 2018, DDD began operations in Turkish-controlled areas of NWS. At the beginning of 2019, MDM-France handed over its North-West-Syria programming to DDD.

DDD and partners are now providing PHC, SRH and MHPSS services across 14 Health facilities, and one BEmONC center, directly reaching more than half-a-million individuals in NWS.



VALUES AND PRINCIPLES**CORE VALUES****NON-DISCRIMINATION**

DDD does not discriminate against people based on their nationality, race, religious belief, class or political stance in its services. It focuses on relieving human suffering by giving priority to the most urgent and essential needs, with the most effective measures based upon its capacity.

STRUGGLE FOR HUMAN DIGNITY

Our aim is to protect people's health against potential risk factors and to ensure that human dignity is respected. DDD supports mutual understanding, fraternity, friendship, cooperation, and peace among people in all its activities. DDD also strives to prevent and alleviate human suffering, wherever it may be, within its national and international capacity.

UNIVERSALISM

DDD aims to create a global organization that will struggle around the world to see issues on a universal scale to work on global scale and standards, adopting the principle of having a reputation.

CORE VALUES

COLLECTIVISM

DDD aims to create awareness at all levels from the social base to the representation, from the individual to the public institutions by organizing in every country where it operates, in all segments of the relevant society and in the field of life as it carries out social studies in this direction.

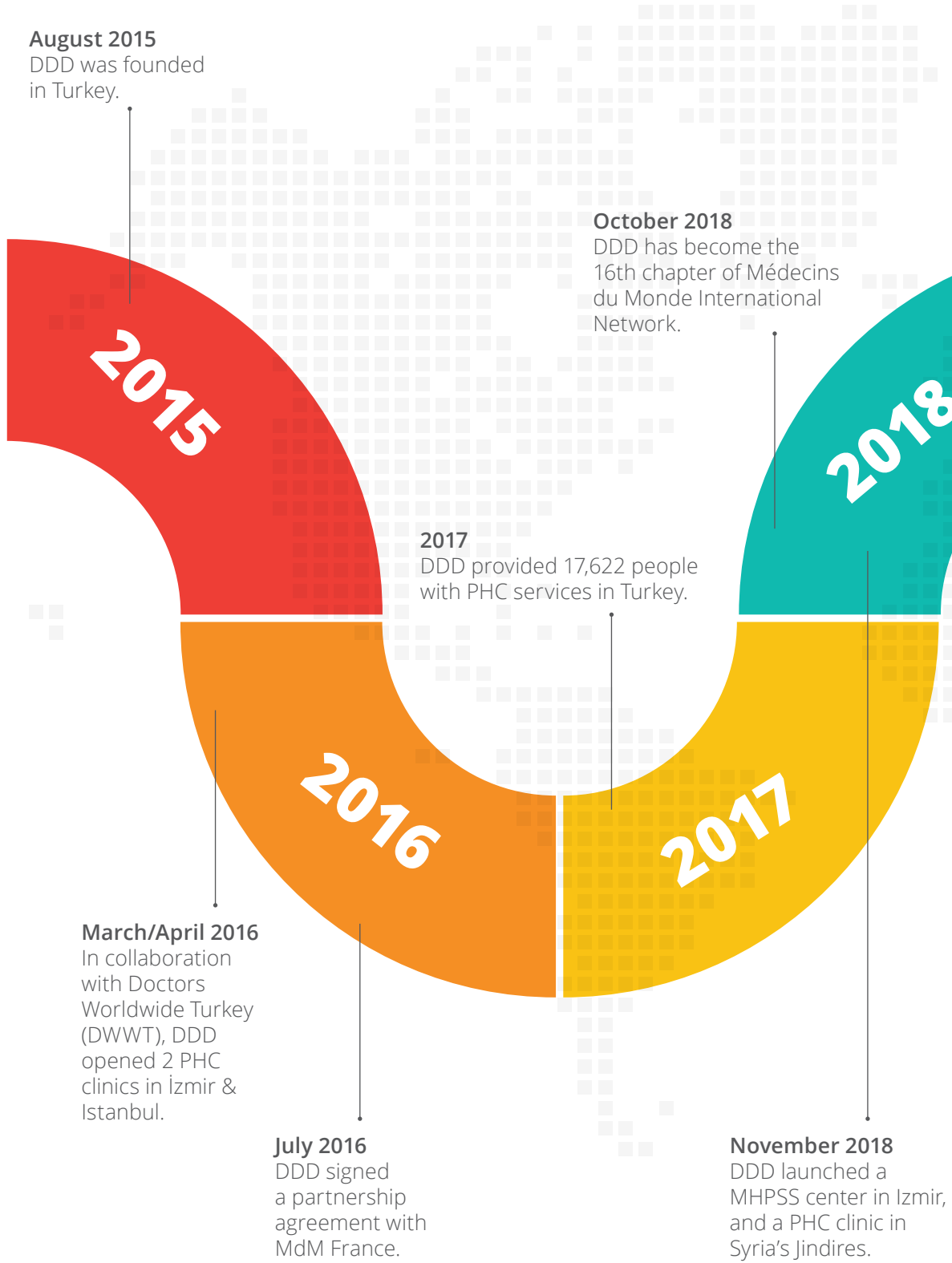
SCIENTIFIC APPROACH

DDD adopts an evidence-based research, analysis and intervention approach in behavioral change and/or reinforcement in the therapy and treatment phase.

INDEPENDENCE

DDD is an independent non-governmental organization. Our institution, as an auxiliary of public authorities in its humanitarian activities, is subject to international conventions and laws enacted by the State of Republic of Turkey. In this context, DDD has the autonomy to enter into international contracts, treaties and conventions related to its field of activity and to act in accordance with them.

OUR HISTORY



April 2019

Handover of Northwest Operations From MdM-France to DDD, and integration of Idlib and Afrin projects under DDD Syria Programme

May 2019

DDD opened a PHC clinic in Syria's Afrin as a strategic humanitarian intervention in response to internal displacements in Idlib.

July 2019

Opening of 2 MHPSS centers in Istanbul's Bağcılar and Sultangazi

September 2019

Opening of Yenikapı Community Center in Istanbul

July 2020

DDD launched PHC clinic in Syria's Jelmeh, providing basic emergency obstetric & newborn care (BEmONC) services.

April 2021

To fight the pandemic in the region, DDD started to perform PCR tests in Syria's Afrin and Idlib, where COVID-19 testing opportunities and conditions are very difficult.

November 2019

Opening of MHPSS center in Hatay

December 2019

DDD projects providing refugees with MHPSS services in Istanbul (Bağcılar & Sultangazi), Izmir And Hatay have been successfully completed. - Transition process of our beneficiaries to the Ministry of Health has been successfully achieved.

2020

In addition to 9 health centers in Idlib, DDD launched outreach teams to enhance access for the most vulnerable in Al Jolan, Al Dana, Dier Hassan and Morek Alez PHC clinics.

September 2021

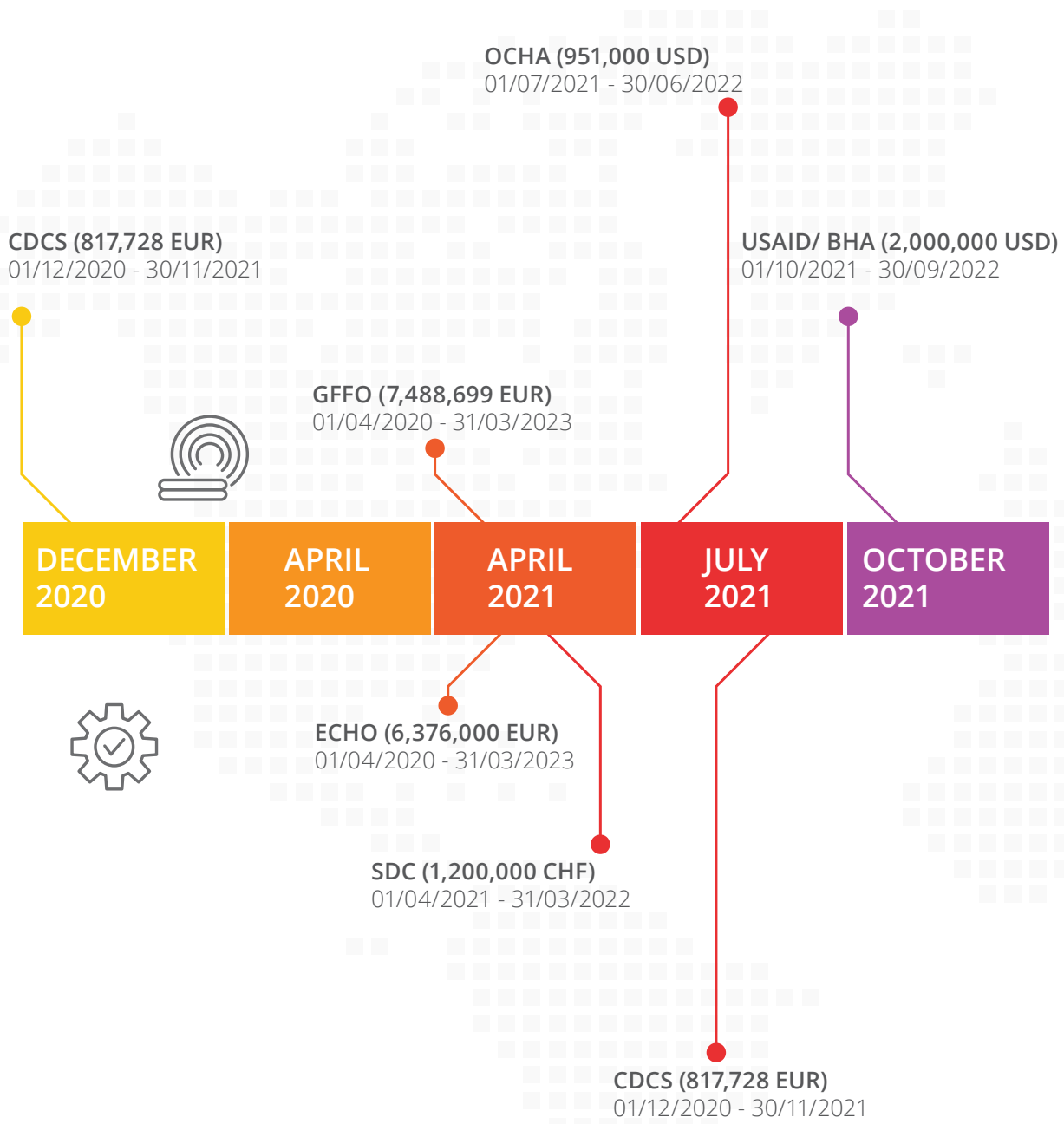
DDD launched its new Turkey project in Istanbul (Zeytinburnu, Esenyurt and Fatih), Izmir (Konak and Torbali), and Manisa (Saruhanli and Turgutlu), providing health-focused mobile protection and health care services for refugees.

2019

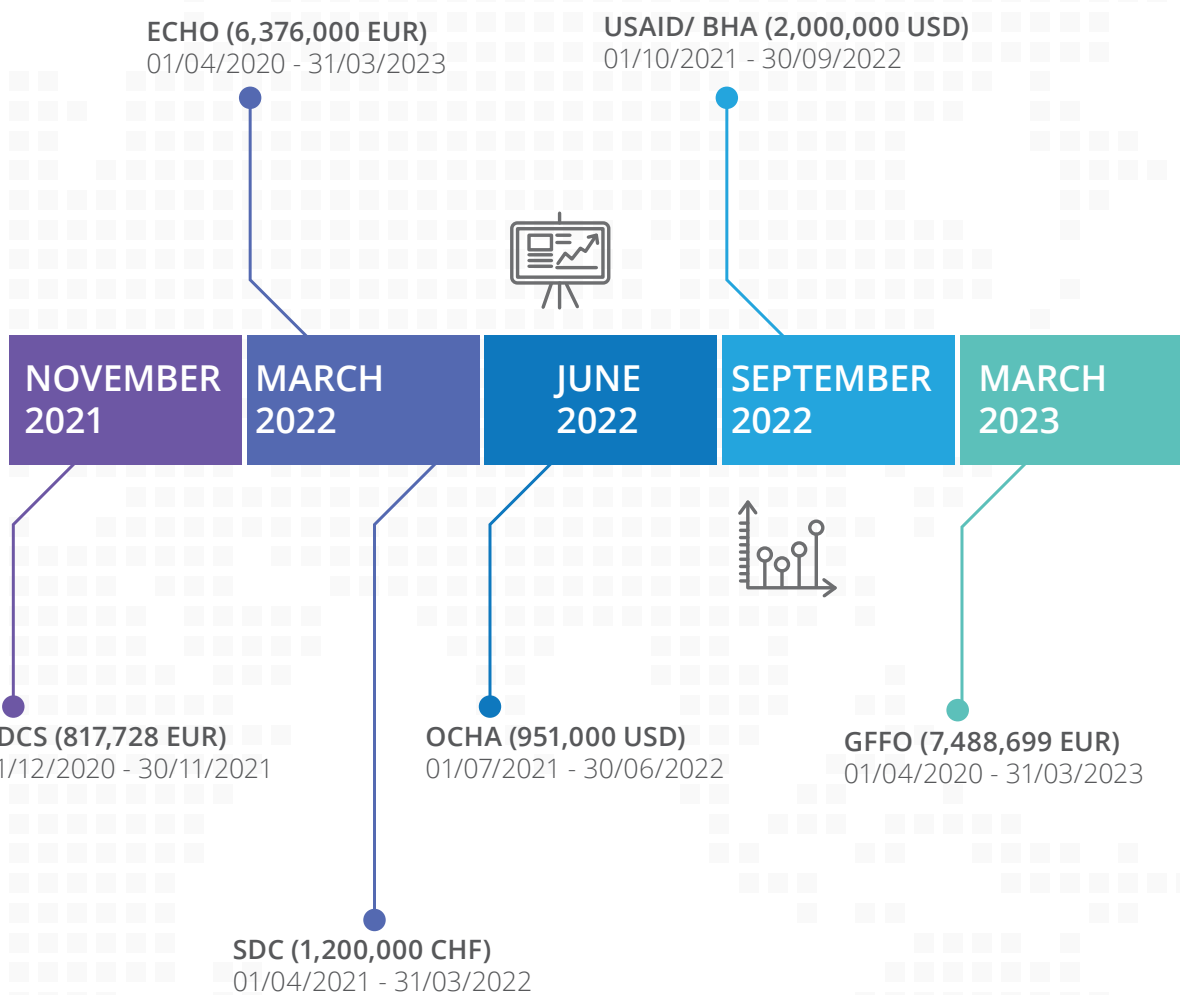
2020

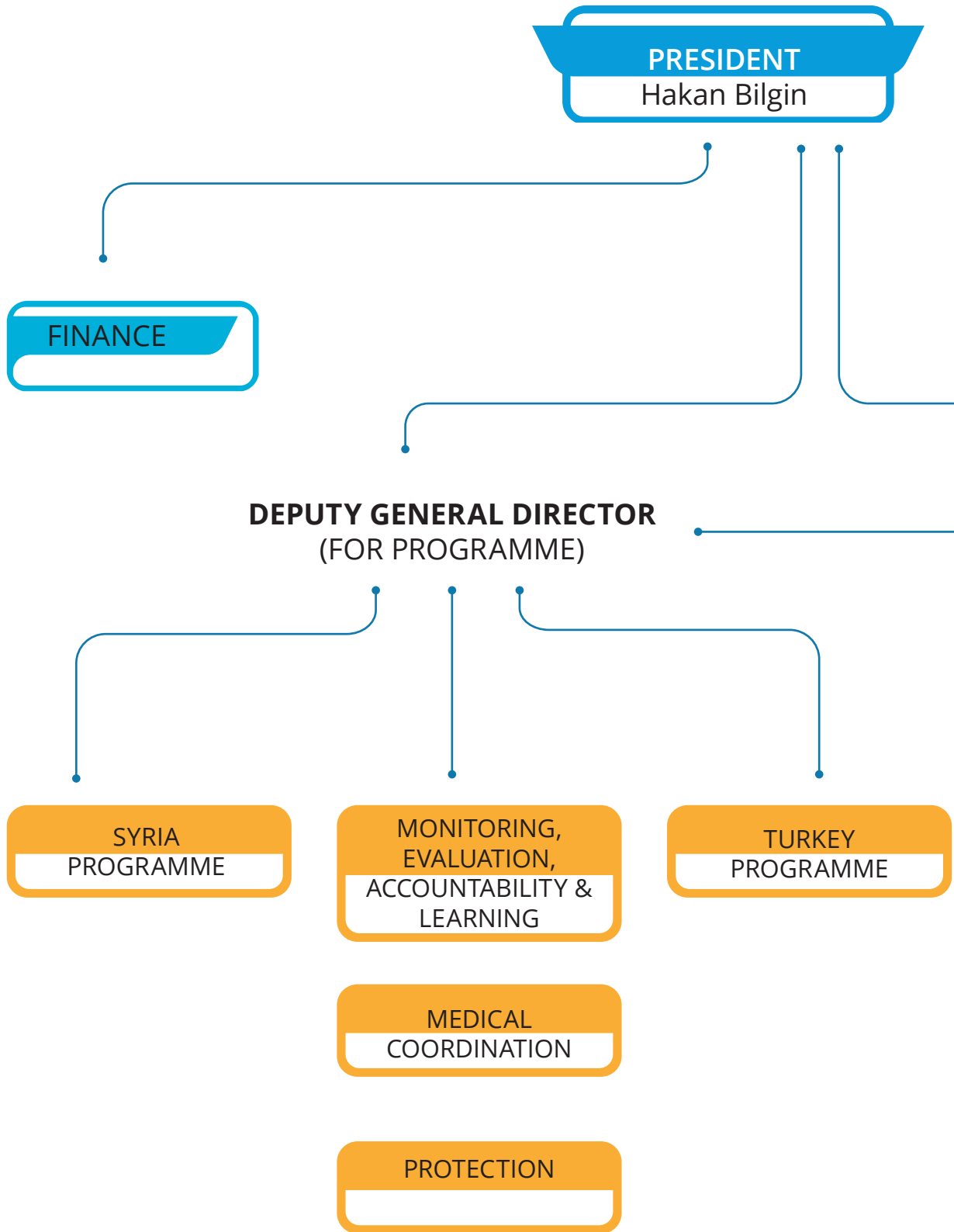
2021

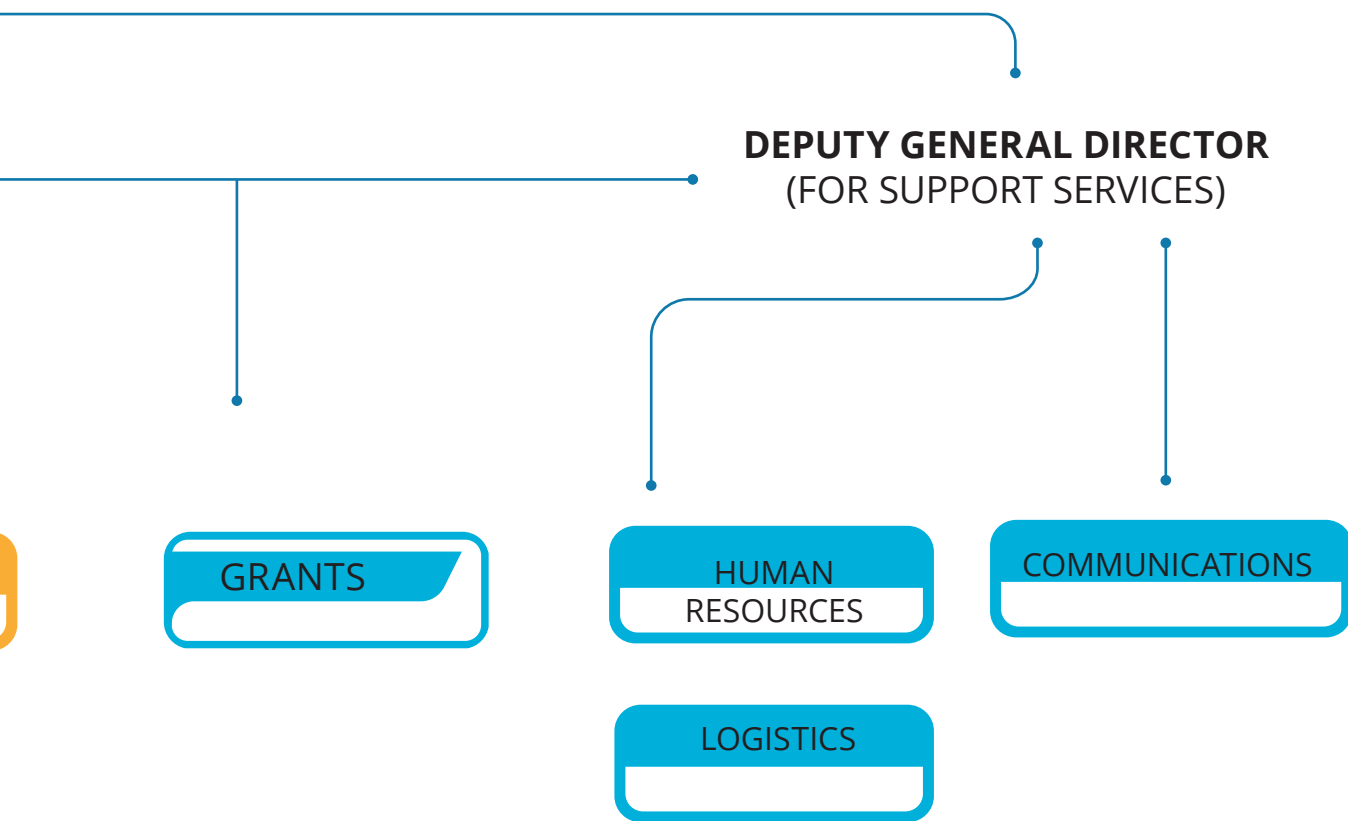
FINANCIAL INFORMATION



- CDCS** : Centre De Crise et de Soutien
- ECHO** : European Civil Protection and Humanitarian Aid Operations
- OCHA** : United Nations Office for the Coordination of Humanitarian Affairs
- SDC** : Swiss Agency for Development and Cooperation
- GFFO** : German Federal Foreign Office
- USAID/BHA** : United States Agency for International Development/Bureau for Humanitarian Assistance







CONTEXT TURKEY

Turkey is one of the largest refugee-hosting countries in the world with nearly 4 million registered Syrian refugees and another 320,000 registered non-Syrian migrants and asylum seekers.

There are an estimated 640,037 irregularly or undocumented migrants in Istanbul alone, primarily from Afghanistan, Iran and Iraq, as well as African states. The numbers are increasing yearly. The majority of migrants and refugees lives amongst host communities in urban and rural areas of Turkey, with Istanbul, Izmir and Hatay, being some of the provinces with the highest number of Syrian refugees and migrants in the country.

Increasing economic inequality and poverty amid the COVID-19 pandemic is pushing Turkish and non-Turkish populations to the margins. Official rates of poverty have increased from 0.6% to 21.9% of the Turkish population by 2020". Based on Dünya Doktorları Derneği (DDD)/Médecins du Monde (Mdm) Turkey experience, it is becoming increasingly difficult for document, irregularly documented and undocumented Syrian refugees and non-Syrian migrants to legalize their status in cities such as Izmir and Istanbul. Many live-in poverty and most find employment in the informal work-sectors such as construction or textile. Others work as agricultural labors (seasonal workers) in rural areas of Turkey.

Without legal documentation they are excluded from basic primary service provision such as health, education, and are at risk of deportation. The conflict and its subsequent displacements combined with poor living conditions in Turkey have had serious consequences on refugees' psychological wellbeing, with a particularly adverse impact on women, elderly, and children. Migrants and refugees living in rural areas tend to face additional barriers and have little to no access to healthcare services due to distance, financial constraints and lack of information on available services.

Within this scope, DDD has carried out humanitarian operations to increase, improve and facilitate the access of vulnerable groups -including refugees, migrants and asylum seekers- to healthcare services through primary health care (PHC) and mental health and psychosocial support (MHPSS) centers. Through its MMUs in the rural areas of Bayraklı and Torbalı districts of Izmir and in Manisa, DDD provides PHC services, medical and SRH consultations, preventive screening sessions and supports referrals to its Izmir MHPSS Centre and PHC facilities.

As DDD also provided PHC services for Syrian refugees in Istanbul's Sultangazi district between 2015-2017, it has handed over its PHC clinics in Sultangazi and Izmir's Konak district after the SIHHAT Project led by the Turkish Health Ministry launched.

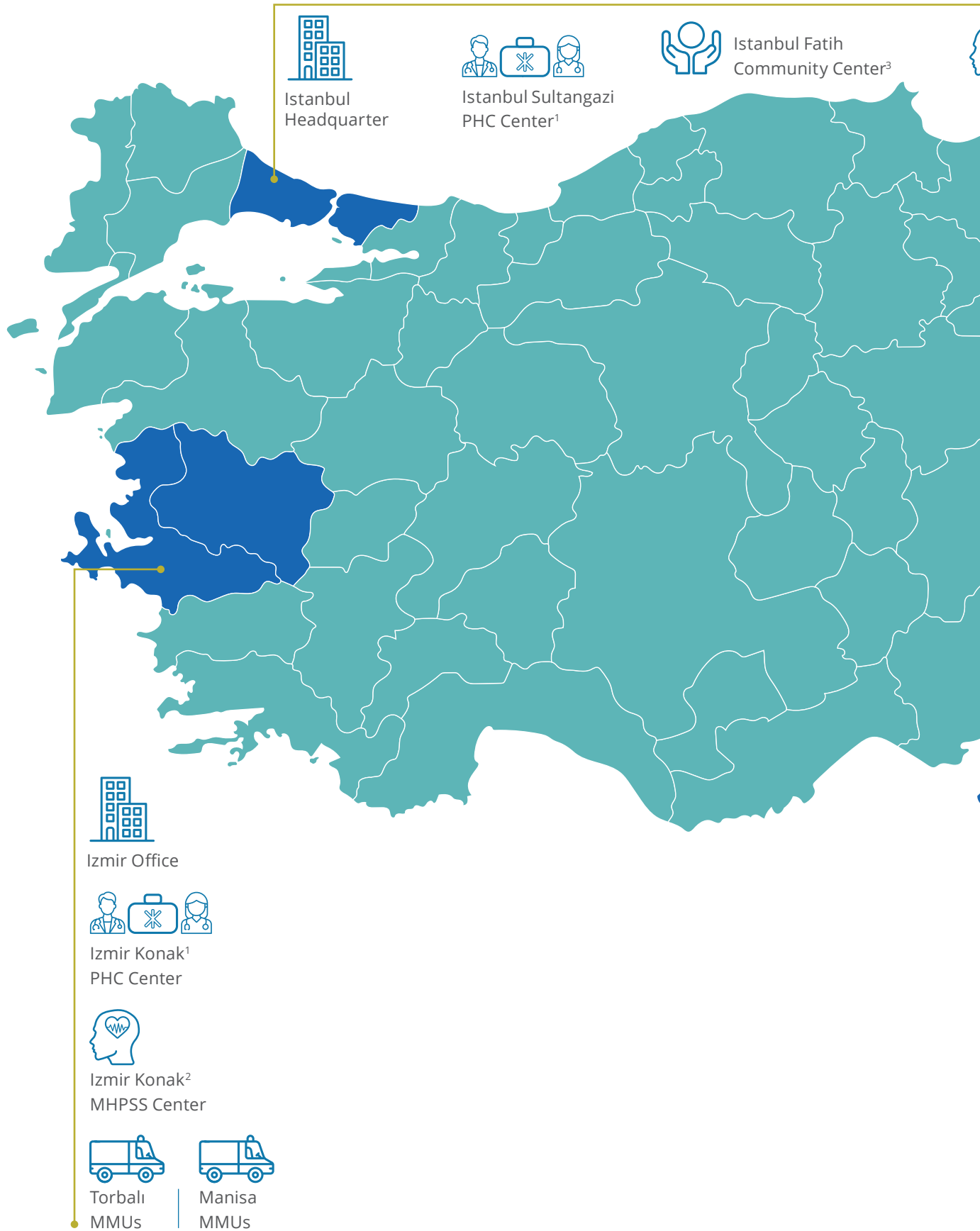
Providing 67,514 refugees with mental health and psychosocial support services between 2016- 2020, DDD has transferred its beneficiaries to Immigrant Health Centers of Turkey's Ministry of Health as of December 31, 2020

In its Community Centre in Fatih (Istanbul), DDD aimed at promoting the integration of Sub-Saharan African refugees, migrants and asylum seekers into the host population and the public health services. DDD provided them with awareness and health promotion group sessions, case management and orientation services as well as language classes and legal counselling. The project was completed by providing case management services to a total of 1,250 vulnerable and unregistered beneficiaries in Istanbul's Fatih Community Center throughout 2020 to contribute to the solution of problems related to the protection area, as most of them are non-Syrian refugees and migrants who do not have access to basic healthcare services in Turkey.

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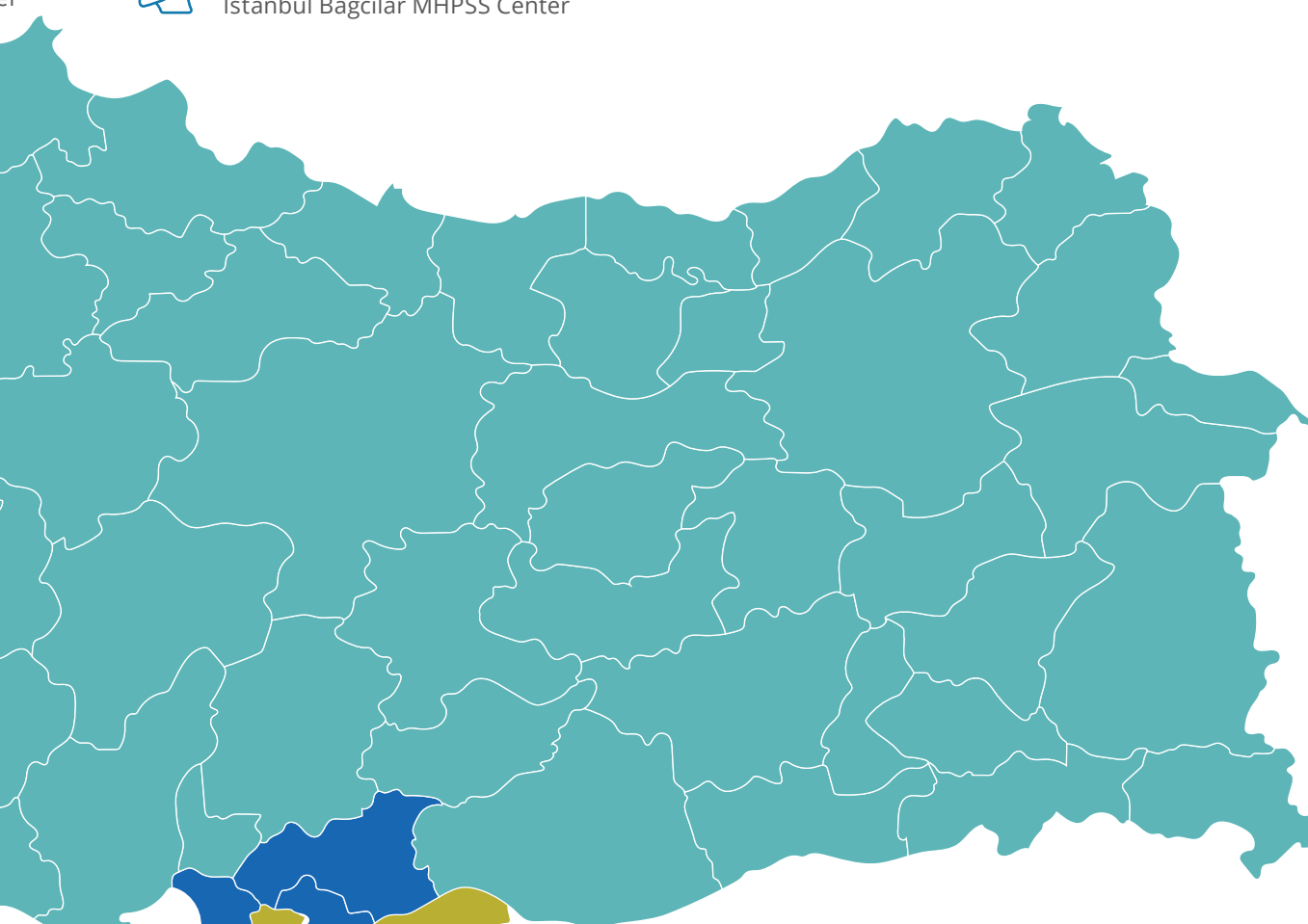
OUR OPERATIONS



¹⁻²Project Title: Strengthening the long-term resilience of refugees and migrants by improving the level of their emotional, mental, and physical wellbeing (1 January 2018 - 30 September 2019). Please see the page 36 for more details."



Istanbul Sultangazi MHPSS Center²
Istanbul Bagcilar MHPSS Center



Aleppo

DDD directly operates 3 PHC (1 SRH) clinics and PCR laboratory in Afrin region of the Aleppo Governorate.

Idlib

DDD operates 9 PHC clinics and a PCR laboratory in Idlib Governorate.



Hatay Office

2 partner-run health facilities



Antakya MHPSS Center²
Reyhanli MHPSS Center
in partnership with VOSSM¹

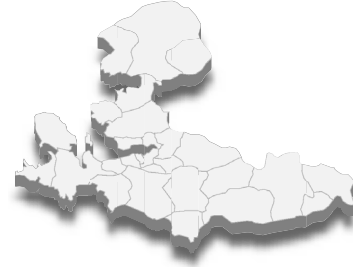
GENERAL NOTES ABOUT THE PROJECTS

The project descriptions in the following pages aim to provide a summary of each specific project. In addition to the services mentioned in these descriptions, all the projects include a number of additional activities as part of their implementation:

- DDD regularly contacts and coordinates with all the relevant actors for the implementation of the projects, including national and local authorities, other NGOs, and relevant clusters. These coordination efforts contribute to a well-informed and coordinated action by all actors and ensures that DDD obtains all the official permissions required for the delivery of the services, follows up the humanitarian situation and potential emergency situations, better analyses the needs in specific areas of intervention, avoids duplication of services and maintains a service map for effective referral of the targeted beneficiaries.
- DDD constantly monitors the project implementation and evaluates the results to improve the quality of the services. In addition, it regularly assesses the needs of the target populations. For this purpose, a feedback and complaints mechanism has been in place in all areas where services are provided. Target populations are also informed, engaged and consulted through awareness raising sessions, brochures, health committee meetings, etc. Every new project is designed in consideration of the results of such evaluation and assessment.
- In addition to DDD's general capacity building efforts, almost all projects include specific training activities aiming to increase the capacity of staff in delivering the services. In addition to technical trainings on medical issues, staff are also regularly trained on some key issues including, among others, gender and protection mainstreaming.
- As part of its gender and protection mainstreaming policies, all DDD projects include specific outreach activities for the most vulnerable individuals in the target populations. Through pre-defined vulnerability criteria, DDD teams identify the most at-risk individuals and deliver these tailored activities including home-based medical visits, distribution of hygiene and maternity kits, etc.
- The projects also aim to rehabilitate the facilities to improve service delivery and adapt to the changing conditions, including the outbreak of COVID-19 and influx of internally displaced people. The rehabilitation works also consider the needs of different groups including disabled persons and pregnant women.
- DDD adapts its services according to the current needs and changing circumstances. In certain areas where the target population lives in camps, etc. (e.g. internally displaced people, seasonal workers), services are usually delivered through mobile medical teams. 18 Many of the services were also adapted to minimise the risk of COVID-19, including psychological counselling online or via phone, etc.
- DDD holds a conflict-sensitive approach in the delivery of its services, considering the volatility of the situation in the targeted areas of intervention. DDD aims to remain impartial in all processes and provides its services equally to all communities. In order to minimise any conflict-related risks, security teams closely follow up the situation and inform the programme implementation accordingly.

TURKEY PROGRAMME¹

Izmir Konak PHC Center
Izmir Konak MHPSS Center
Izmir Torbali & Mania Mobile Medical Units



Istanbul Sultangazi PHC Center
Istanbul Sultangazi MHPSS Center
Istanbul Bagcilar MHPSS Center
Istanbul Fatih Community Center



Hatay/Antakya MHPSS Center
Hatay/Reyhanli MHPSS Center



Health Care Services provided by Dünya Doktorları



Primary Health Care



Mental Health
and Psychosocial Support



Mobile Medical Units



Free delivery of
medicine



Protection



Sexual and
Reproductive Health

¹For the projects funded by EU ECHO, Médecins du Monde France acted as the contract holder and the implementing organisation.



Funded by
the European Union

TURKEY PROJECTS

Project Title: Provision of medical relief to refugees and migrants in Turkey through direct support to health facilities and implementing partners

Project Period: 1 May 2015 – 31 March 2017

Budget: 6,975,995.82 €

Funded by the European Civil Protection and Humanitarian Aid Operations (ECHO) of the European Union, this project addressed a critical gap, providing medical relief to 123,223 refugees and migrants in South-eastern Anatolia, Marmara, and Aegean regions. DDD implemented the project in partnership with 3 partners: Doctors Worldwide (DWW), Union of Medical Care and Relief Organisations (UOSSM) and Association d'Entraide et de Solidarité aux Migrants (ASEM).

The project specifically targeted refugees who had significant challenges to healthcare access through administrative counselling services and mobile medical teams. One of the best practices in this project was individual counselling sessions provided within the PSS component, which proved to have an added benefit in helping refugees. Cases of sexual and gender-based violence, gynaecological disorders and judicial offenses were discovered and addressed as a result of longterm counsellor-beneficiary trust-building and case follow-up.

Throughout the project, DDD ensured its services complied with the Ministry of Health, which reinforced the services provided by the Ministry.



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Funded by
the European Union

Project Title: Contributing to sustainable integration of refugees into host population

Project Period: 1 April 2017 – 30 June 2018

Budget: 3,000,000.00 €

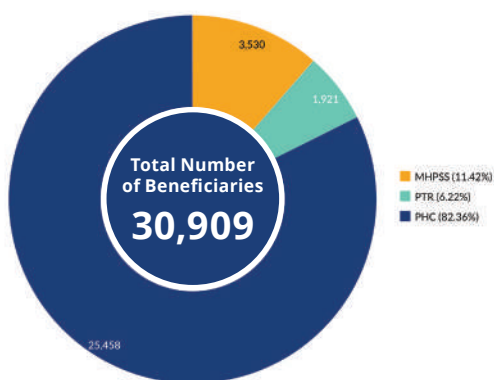
Over the course of this DG-ECHO-funded Project, DDD provided MHPSS, PTR, and PHC services to 30,909 individual beneficiaries in Istanbul, Hatay and Izmir, in cooperation with its partners DWW, UOSSM and ASEM.

In addition to the medical and psychological services delivered to vulnerable refugees, one of the key achievements of this project was its contribution to the empowerment of the communities and social cohesion, by engaging the community members as multipliers of trainings and bringing together refugees and host communities through diverse activities.

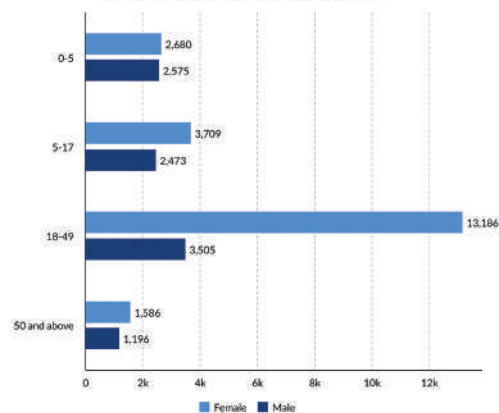
Total Number of Beneficiaries	30,909
MHPSS	3,530
PTRC	1,921
PHC	25,458

	Female		Male		Total	
	#	%	#	%	#	%
0-5	2,680	51%	2,575	49%	5,255	17%
5-17	3,709	60%	2,473	40%	6,182	20%
18 - 49	13,186	79%	3,505	21%	16,691	54%
>= 50	1,586	57%	1,196	43%	2,782	9%
	21,160		9,749		30,909	

Number & Type of Services in Turkey (2017-2018)



Age-Gender Breakdown (2017-2018)







EUROPEAN COMMISSION



Humanitarian Aid





Funded by
the European Union

Project Title: Strengthening the longer-term resilience of refugees and migrants by improving the level of their emotional, mental and physical wellbeing

Project Period: 1 January 2018 – 30 September 2019

Budget: 8,978,466.00 €

Through this DG-ECHO-funded Project, Dünya Doktorları Derneği (DDD), in collaboration with its local partner UOSSM, provided MHPSS, physical therapy and rehabilitation (PTR) and PHC via medical mobile units for refugee populations in Gaziantep, Hatay, Istanbul, Izmir, Kilis, and Manisa.

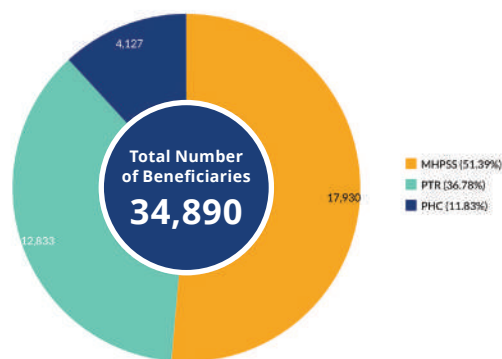
The Project reached 17,930 direct beneficiaries for MHPSS, 12,833 for PTR and 4,127 for PHC, providing tailor made services to the refugees with health professionals culturally and technically equipped to meet their specific needs. The project addressed a continuing gap in healthcare access as refugees relocating from their registered Turkish cities risked becoming undocumented and faced barriers in accessing services. In response to this, DDD improved its capacity for better case management, and connected refugees to PHC services of the recently established Migrant Health Centres (MHC) and other public health institutions.

The project also provided safe and secure environments where beneficiaries could feel comfortable to ask for psychological support, organising workshops and offering psychoeducation, to reduce the feeling of social exclusion and isolation.

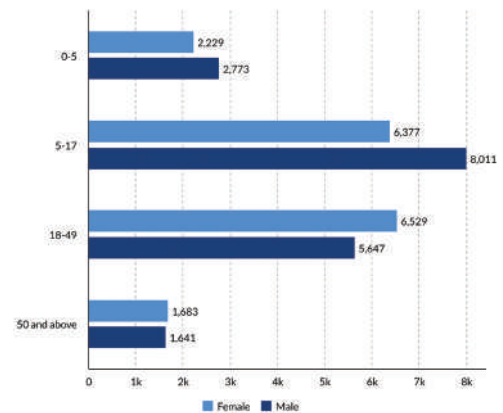
ECHO-8-2018 Total Number of Beneficiaries	34,890
MHPSS	17,930
PTRC	12,833
PHC	4,127

	Female		Male		Total	
	#	%	#	%	#	%
0-5	2,229	45%	2,773	55%	5,002	14%
5-17	6,377	44%	8,011	56%	14,388	41%
18 - 49	6,529	54%	5,647	46%	12,176	35%
>= 50	1,683	51%	1,641	49%	3,324	10%
	16,818	48%	18,072	52%	34,890	

Number & Type of Services in Turkey (2018-2019)



Age-Gender Breakdown (2018-2019)





Funded by
the European Union

Project Title: Contribution to Sustainable Integration of Refugees, Migrants and Asylum Seekers in Turkey

Project Period: 1 April 2018 – 11 January 2021 (suspended between November 2018 and June 2020)

Budget: 344,322.36 €

The project addressed a critical and ongoing gap by promoting the human rights and dignity of most at-risk migrants, asylum seekers and refugees in Istanbul (particularly of African origin), increasing their resilience and access to rights and services and contributing to their integration into the Turkish society.

A total of 1,080 vulnerable individuals (602 women and 478 men) from 42 nationalities benefited from project activities. The activities significantly increased beneficiaries' awareness about health and legal rights and services, and empowered them through cultural activities and language classes. The project provided healthcare to undocumented people.

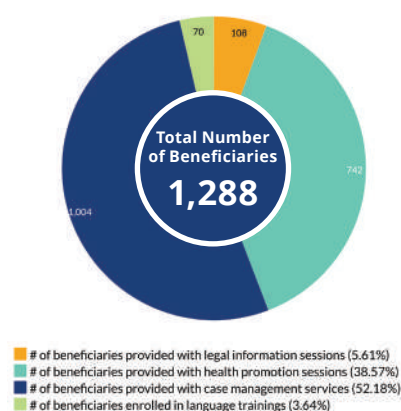
This is an ongoing and critical issue for such people. The activities were conducted at DDD's community centre in Fatih district of Istanbul, which was unique in the region in terms of serving asylum seekers, undocumented migrants, and non-Syrian refugees through such combination of activities. Almost all staff working in the community centre were African migrants that DDD hired and registered as employees with full work permits. This is an important practice in the empowerment of beneficiaries and communities.

The project also targeted the Turkish host community across different sectors, including academia, health workers, civil society actors, and NGOs, mainly through workshops that promoted a stronger understanding of migrants' challenges and rights by community leaders and advocated for their rights.

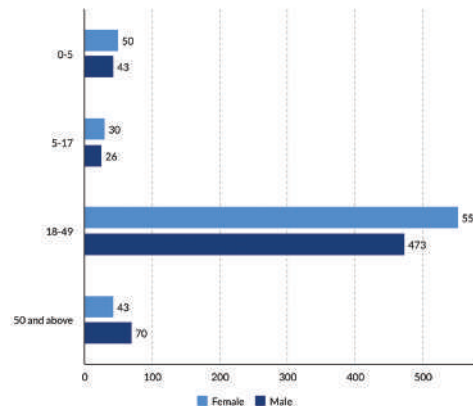
EUD-2020-21 Total Number of Beneficiaries	1,288
# of beneficiaries provided with legal information session	108
# of beneficiaries provided with promotion sessions	742
# of beneficiaries provided with case management services	1,004

	Female		Male		Total	
	#	%	#	%	#	%
<5	50	54%	43	46%	93	7%
5-17	30	54%	26	46%	56	4%
18 - 49	553	54%	473	46%	1,026	80%
>49	43	38%	70	62%	113	9%

Number & Type of Services in Turkey (2020-2021)



Age-Gender Breakdown (2020-2021)





This project is co-financed by The European Union and the Republic of Turkey

Project Title: Town Twinning Program: Empowerment of Local Authorities/Administrations in the Management of Migration (Together & Stronger) Project

Project Period: December 2018 - December 2019

Budget: \$144,000

The aim of this project was to support local authorities to develop migration management policies in local administrations through town-twinning as well as reinforcing the relations by transferring good practices. Final beneficiaries of the project were specifically local authorities, universities and CSOs in the twinned cities, locals, migrants living in Izmir (18,883) and Italy [144,500 migrants in Molise region (place of the action and place of both Italian partners 13,900 migrants from the east part of Europe, from Africa and from Asia)].

As a result of the project carried out in cooperation with Izmir Governorship, Municipality of Ropalimosani, and ARES Scarl, the capacities of at least 5 districts' local administrations (Konak, Karabağlar, Bornova, Buca, Bayraklı with intense migrant population) for migrant management were developed via exchange of good practices. Additionally, social inclusion of migrants was provided, as long-term sustainable relationships were created among twinned cities via the platform. Finally, a significant data source on the social integration problems that around 2,000 migrants faced has been obtained.





Project Title: Improving the wellbeing of refugees and migrants in Turkey by empowering them and facilitating access to sustainable and quality health services tailored to their needs

Project Period: 1 September 2019 – 28 February 2021

Budget: 4,687,587.78 €

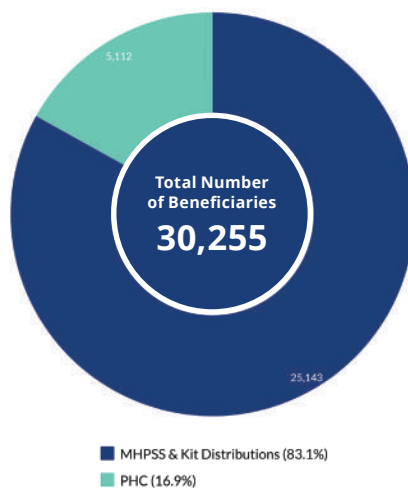
Dünya Doktorları Derneği (DDD), in partnership with UOSSM, reached a total of 28,773 direct beneficiaries through this project funded by DG ECHO. A total of 25,143 refugees benefited from the MHPSS centres in Hatay, Istanbul, and Izmir, and a total of 6,050 (Syrian) seasonal agricultural workers received PHC services through mobile medical units in the rural areas of Izmir and Manisa.

In addition, the Project effectively responded to the urgent needs arising from the earthquakes in Elazığ and Izmir and the outbreak of COVID-19 in 2020, providing psychological first aid, PSS and awareness raising activities on COVID-19, in coordination with local authorities. Despite this challenging atmosphere, the project activities could be smoothly handed over to the state authorities by the end of the project.

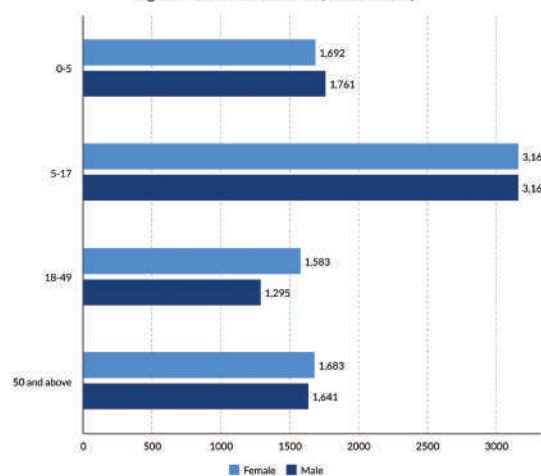
ECHO-12-2019 Total Number of Beneficiaries	30.255
MHPSS and kit distributions	25.143
PHC	5.112

	Female		Male		Total	
	#	%	#	%	#	%
0-5	1.692	49%	1.761	51%	3.453	12%
5-17	3.165	40%	3.165	50%	6.330	22%
18 - 49	9.829	61%	6.284	39%	16.113	56%
>= 50	1.583	55%	1.295	45%	2.877	10%
	16,268		12.505		28.773	

Number & Type of Services in Turkey (2019-2021)



Age-Gender Breakdown (2019-2021)









THE SYRIA PROGRAMME ATMOSPHERE AND CIRCUMSTANCES

The civil war in Syria has claimed thousands of lives, displaced over 10 million people and fueled the worst refugee crisis since World War II.

The socio-economic impact of war, including the depletion of economic resources, the continuation of forced displacement movements, and the destruction of livelihoods, has had a profound effect on local communities to access and use vital/essential services such as health care.

Today, 2.7 million people in northwestern Syria need health support. Epidemics such as measles, acute bloody diarrhea, typhoid fever, and cutaneous leishmaniasis continue to be serious health issues due to certain health risks accompanied by overpopulated refugee camps, poor living and sanitation conditions, and lack of access to necessary vaccination services in unregistered settlements.

Attacks against civilians stuck in the middle of clash environment also result in disability injuries, trauma, and war-related psychological problems. Around 27% of Syrian population above 12 years of age have a disability, while 50% of them needs mental health and psychosocial services.

Humanitarian emergency in northwestern Syria has become much worse after war situation reerupted in southern Idlib in December 2019. According to the United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA), nearly 1 million people -%81 of them are women and children - have been displaced in the region since 1st December 2019. Dana, Salqin and Azaz, three sub-districts in Idlib and Aleppo host 56% of recent internally displaced people. Although the severity of internal displacements has decreased following the ceasefire on March 6, 2020, there is still not enough official data on the repatriations to settlement areas near conflict zones.

In the northern part of the Aleppo Governorate, internally displaced people have had to settle in informal camps, unfinished buildings, and open spaces due to lack of appropriate places for new settlements. Furthermore, the lack of access to clean, palatable water and adequate sanitation, bad weather conditions, and the recent fuel shortage resulting in price hike have led to the deterioration of the living conditions of internally displaced people and the host community.

The common perception in northwestern Syria is that people ignore the warnings and measures against the COVID-19 pandemic. Nevertheless, it is also known that only some refugee/IDP residents in the camps have started to use medical masks and gloves to protect from the spread of the coronavirus. Rising concerns over the COVID-19 pandemic indicate that all health actors must hold themselves in readiness to respond the potential spread of the pandemic in the region.

DDD SYRIA PROGRAMME IMPACT 2020

PHC & SRH



In 2020, a total of 384,816 people were provided with primary health care consultations including family planning and sexual reproductive health services in Idlib and Aleppo. DDD was also one of the only NGOs providing COVID-19 testing and support in northwest Syria.



384,816 | Idlib 230,890
Aleppo 153,926



MHPSS



A total of 3,746 IDPs were provided with Mental Health and Psychosocial Support in Idlib and Aleppo.

3,746 | Idlib 1,248
Aleppo 1,498



Protection

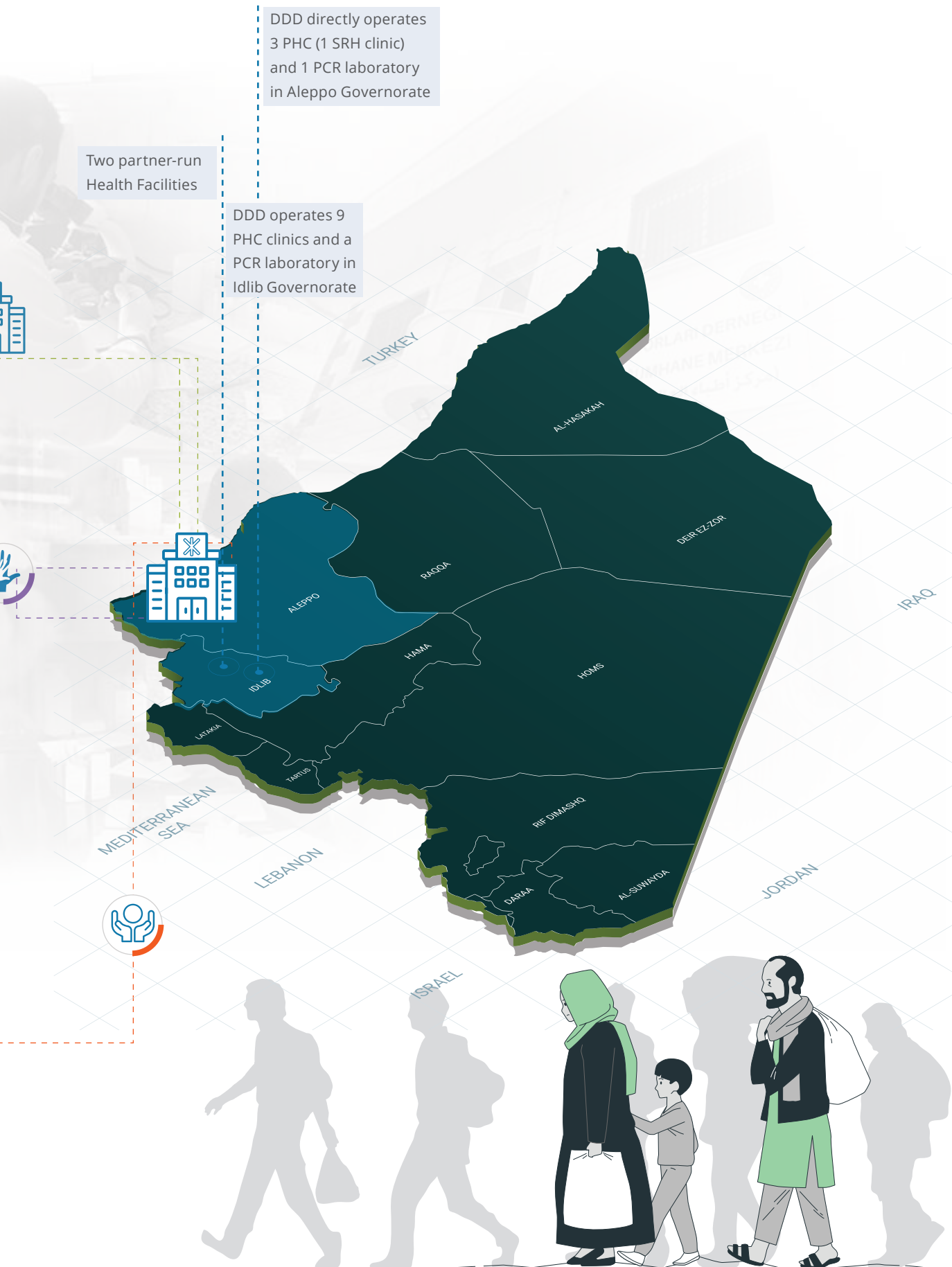


Throughout 2020, a total of 700 vulnerable beneficiaries were referred to relevant and appropriate services through case management approaches, to resolve non-medical and protection related issues.

700 | Idlib 400
Aleppo 300



SYRIA PROGRAMME MAP





Co-funded by
the European Union

SYRIA PROJECTS²

Project Title: Provision of health care services to conflict-affected population inside Syria through direct and indirect implementation

Project Period: 1 April 2017 – 31 March 2018

Budget: 3,000,000.00 €

The project provided inclusive healthcare services to a total of 147,912 beneficiaries in Idlib through 7 facilities operated by DDD and its partners UOSSM, Hand in Hand for Aid and Development (HIHFAD), and Idlib Health Directorate (IHD). The services included PHC, SRH and MHPSS.

Under the project, the mobility of staff and services was instrumental in adapting to the volatility of the context, allowing flexibility required to meet health needs of IDP populations in hard-to-reach areas where health infrastructures were either damaged or insufficient to meet communities' needs.

²Note 1: For all projects funded by EU ECHO and CDCS and for the first project funded by SDC, Doctors of the World France (Mdm France) acted as the contract holder and the implementing organisation. For projects funded by GFFO, Doctors of the World Germany acted as the contract holder and the implementing organisation.
Note 2: Some of the projects were co-funded, so the beneficiary numbers can be duplicate.



Project Title: Provision of health care services to conflict affected population inside Syria through direct and indirect implementation

Project Period: 1 April 2017 – 31 January 2020

Budget: 4,700,000.00 €

Funded by the German Federal Foreign Office (GFFO), the project fully supported the operation of 3 DDD clinics in Dana sub-district of Idlib. Throughout the project, a total of 207,980 individuals directly benefited from the PHC, SRH and MHPSS services provided by the clinics, as well as the emergency kits distributed to other health facilities and schools.

During the project, a need for improved protection mainstreaming was identified as a result of the regular needs assessment conducted by DDD teams. In this regard, in addition to new policies and capacity building of the staff, the project also led to the introduction of new services such as development of new outreach components for medical services, health promotion and community-based psychosocial services.









Co-funded by
the European Union

Project Title: Provision of primary health care services to conflict-affected population in Idlib Governorate

Project Period: 1 April 2018 – 31 March 2019

Budget: 2,500,000.00 €

As part of this project, DDD, along with other implementing partners UOSSM, HIHFAD, and IHD, provided healthcare services for 159,476 conflict-affected individuals in Idlib Governorate and Aleppo Governorate (with the integration of Afrin into the Project). Through direct implementation and support provided to partners, 254,278 PHC, 71,234 SRH, and 3,276 MHPSS consultations were provided. The majority of beneficiaries were displaced people from other areas of Syria.

The project had a specific focus on improved community engagement: An outreach team comprised of community health workers (CHWs) was recruited, trained and mobilized to improve access to care for marginalized populations, including women and people with disabilities or limited mobility. A focus was placed on promoting information sharing regarding services available in supported health facilities, especially new mental health and psychosocial services, and ensuring that protection concerns identified are addressed through timely and safe protection referrals.



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Project Title: Provision of primary health care services to conflict-affected population in Syria

Project Period: 01 October 2018 – 31 December 2019

Budget: 3,500,000 CHF

Funded by the Swiss Agency for Development and Cooperation (SDC), this Project provided a comprehensive package of PHC services to conflict-affected population – particularly IDPs - in 13 health facilities in northwest Syria. During the project, in April 2019, MDM France handed over administration of its Idlib facilities to DDD. Through 13 clinics, DDD was able to adapt to shifting needs, address patterns of displacements and react to changes in the security context, reaching a total of 282,824 beneficiaries in close partnership with UOSSM, HIHFAD and IHD. In response to the escalation of the conflict and IDP influx towards Dana sub-district during the project period, DDD teams conducted rapid field assessments in coordination with local actors and increased the number of working days and working hours in selected clinics, resulting in a sharp increase (30%) in the number of consultations in the last five months of the project.





Co-funded by
the European Union

Project Title: Provision of primary health care services to conflict-affected population in Idlib Governorate and Aleppo Governorate

Project Period: 1 April 2019- 31 March 2020

Budget: 5.354.690,55 €

Through direct implementation and support provided to partners (HIHFAD, IHD and Aleppo Health Directorate), a total of 537,579 healthcare consultations were provided in the supported facilities, including 432,930 PHC consultations, 97,005 SRH

consultations and 7,644 MHPSS consultations. The project reached a total of 348,590 unique beneficiaries in Idlib and Aleppo Governorates, responding to the large-scale population displacement emergency that further strained the resources and absorption capacity of the host community.



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Project Title: Provision of primary health care services to conflict-affected populations in northern Syria

Project Period: 15 June 2019 – 9 September 2019

Budget: \$30,000

This WHO-funded project contributed to the DDD's services in Afrin, by ensuring availability of qualified health staff at the facilities. The fund supported DDD in reaching more beneficiaries during this period when the conflict escalated and led to significant levels of displacement.



Project Title: Extending the availability of healthcare to conflict-affected people in Syria by strengthening the provision and effectiveness of essential health services

Project Period: 1 August 2019 – 30 June 2020

Budget: 15,000,000 CAD

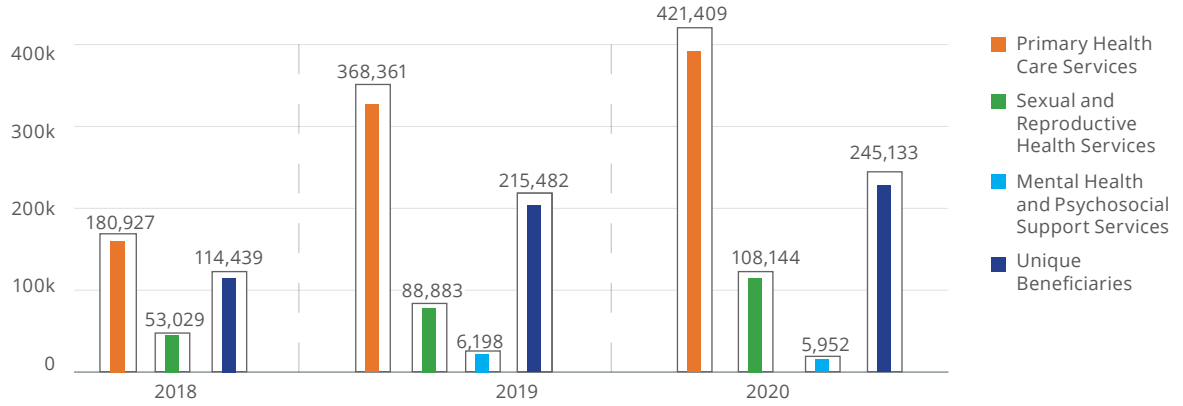
The Project, funded by the Global Affairs Canada and implemented by MDM Canada, provided healthcare to vulnerable conflict-affected people in Syria between 2017 and 2020. From August 2019, DDD, in partnership with HIHFAD and IHD, provided essential healthcare to 277,513 beneficiaries till the end of the Project.

The intervention in NWS was expected to improve access to PHC services for approximately 400,000 individuals (based on the estimated population of the catchment area as of September 2019), but the area increased up to 703,500 persons in January 2020 due to large-scale displacements, increasing the total number of beneficiaries reached.

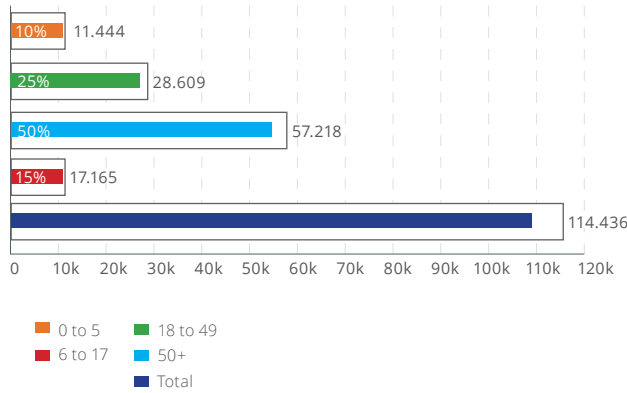


THE SYRIA PROGRAMME GENERAL IMPACT (2018-2020)

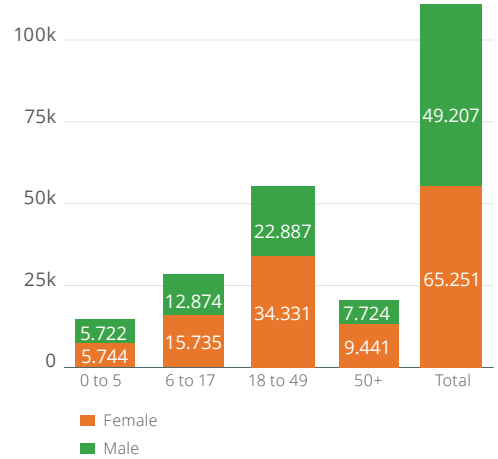
Number and Type of Services Provided in Syria



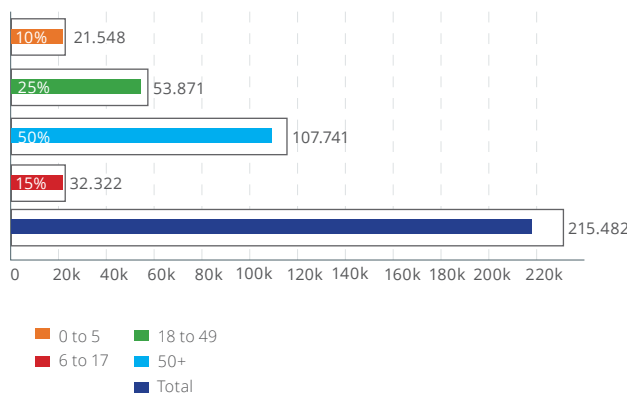
Age & Gender Breakdown of Syria Projects Total (2018)



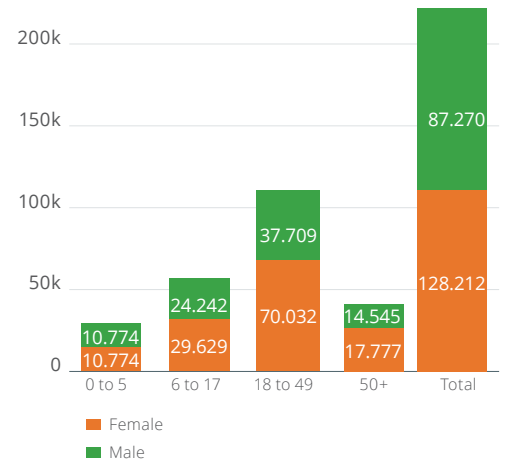
Age-Gender Breakdown (2018) - II



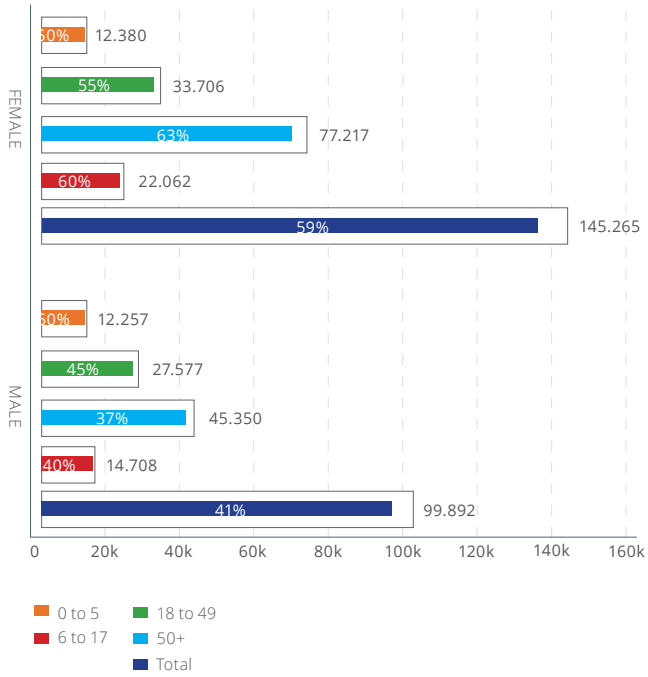
Age & Gender Breakdown of Syria Projects Total (2019)



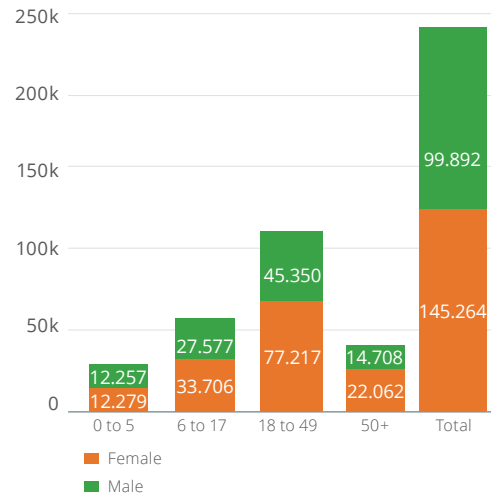
Age-Gender Breakdown (2019) - II



Age & Gender Breakdown of Syria Projects Total (2020)



Age-Gender Breakdown (2020) - II



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GENERAL IMPACT IN SYRIA (2018-2020)

Number and Type of Services Provided in Syria

Services	2016	2017	2018	2019	2020
PHC			180927	368361	421409
SRH			53029	88883	108144
MHPSS				6198	5952
Unique					
Beneficiaries			114436	215482	245133

Age & Gender Breakdown of Syria Projects

Year	Age	Total		Female		Male	
		%	#	%	#	%	#
2018	5	10%	11444	50%	5722	50%	5722
	6 to 17	25%	28609	55%	15735	45%	12874
	18 to 49	50%	57218	60%	34331	40%	22887
	50+	15%	17165	55%	9441	45%	7724
	Total	100%	114436	57%	65229	43%	49207
2019	5	10%	21548	50%	10774	50%	10774
	6 to 17	25%	53871	55%	969	45%	24747
	18 to 49	50%	107741	65%	70032	35%	37709
	50+	15%	32322	55%	17777	45%	14545
	Total	100%	215482	60%	128212	40%	87270
2020	5	10%	74514	50%	12257	50%	12257
	6 to 17	25%	61283	55%	33706	45%	27577
	18 to 49	50%	122567	63%	77217	37%	45350
	50+	15%	36770	60%	22062	40%	14708
	Total	100%	245134	59%	145242	41%	99892
Grand Total			575052	59%	338683	41%	236369



Project Title: Provision of specialized health services and psychosocial support to vulnerable conflict-affected population in northern Idlib

Project Period: 15 February 2020 – 31 March 2021

Budget: \$ 524,730.81

Funded by the UN Office for the Coordination of Humanitarian Affairs (OCHA), the project supported 4 DDD facilities in Idlib Governorate to provide essential healthcare to more than 32,191 people, of which around 87% were internally displaced people (IDPs) and approximately 80% were women and children under 12.

Through this project, DDD specifically focused on enhancing the physical, mental and psychosocial wellbeing of children, providing essential quality inclusive health care services for vulnerable individuals (including SRH services and home-based medical visits) and providing effective and safe referrals for protection cases with a focus on GBV.

The project was successfully adapted to respond to the COVID-19 pandemic that started in the beginning of the Project, especially by increasing the staff's capacity and enhancing the target population's awareness.



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Project Title: Provision of essential health care services and psychosocial support to conflict-affected population in northern Syria

Project Period: 1 April 2020 – 31 October 2020

Budget: \$ 362,011.84

This OCHA-funded project strengthened the health of conflict-affected IDPs and host communities through lifesaving and life-sustaining primary health care services and psychosocial support in Jinderes City of Afrin District.

Approximately 21,177 individuals directly benefited from the project. During a significant part of the project, DDD was the only MHPSS provider for vulnerable people in Jinderes. Thanks to the project, DDD was able to absorb patients from two other MHPSS providers in the region that were forced to close in the spring of 2020. The project also played a critical role in responding to the needs of new IDPs that arrived in the region.





Co-funded by
the European Union

Project Title: Provision of essential health care services and psychosocial support to conflict-affected population in North West and North East Syria

Project Period: 1 April 2020 – 31 March 2021

Budget: 9,026,163 €

Within the scope of this project, DDD continued providing PHC, SRH and MHPSS services in northwest Syria, i.e. Idlib and Aleppo governorates, in partnership with HIHFAD and IHD. Through 14 clinics operated by DDD and her partners, the project directly reached a total of 353,624 individuals in northwest Syria.

DDD services in the region were adapted to COVID-19 context within the scope of the project. The project's response to the pandemic included adaptation of facilities in line with the recommended safety measures, increasing the capacity of the staff in responding to COVID-19, and raising the awareness of target populations about the pandemic. In addition, DDD started to conduct PCR testing at two laboratories through this project.



Project Title: Provision of inclusive health care services and psychosocial support to conflict-affected population in Idlib governorate

Project Period: 1 April 2020 – 31 March 2021

Budget: 1,200,000 CHF

Funded by the SDC, the project contributed to 4 DDD facilities in Idlib, providing PHC, SRH and MHPSS services to 63,646 beneficiaries; the majority of whom were displaced people from other areas of Syria.

In addition to the consultation services, the project also included other activities such as health promotion and awareness raising, distribution of hygiene and maternity kits, and case management services.

The project specifically targeted the most vulnerable individuals in the areas of intervention, e.g. by organising home-based medical visits to reach out to the most at-risk individuals. This included pregnant women who are particularly at risk of COVID-19 complications and therefore reluctant to attend DDD clinics.

In total, 50% of healthcare staff in these facilities were women, improving both inclusive services to female beneficiaries and contributing to the empowerment of women in general in northwest Syria.



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Project Title: Provision of health care services to conflict affected population inside Syria (North West Syria and South Syria) through direct and indirect implementation

Project Period: 1 April 2020 – 31 March 2023

Budget: 7,488,699 €

Through this GFFO-funded project, DDD continues to operate 3 clinics in Idlib, improving access to integrated quality primary health care services (including SRH) to the primarily displaced people in the region.

By the end of March 2021, approximately 63,360 individuals benefited from health services in Idlib, of whom 61% were women/girls and 39% were men/boys (38,437 and 24,923 respectively). A total of 85,276 PHC consultations and 15,057 SRH consultations were provided to this target population.

As in all DDD services, this project also takes into consideration the fact that different groups, including women, elderly and children, are affected differently by the humanitarian crisis in the region, and they face numerous protection issues, including torture, famine and sexual abuse. To overcome these issues, DDD activities aim to mainstream gender and protection, and identify the most vulnerable and enhance their access to healthcare and protection services as victims of human rights violations.



Project Title: Provision of essential health care services and psychosocial support to conflict-affected population in Idlib Governorate and Aleppo Governorate

Project Period: 01 December 2020 – 31 November 2021

Budget: 875,000 €

Funded by the French Crisis and Support Centre (Centre de Crise et de Soutien – CDCS), this ongoing project co-finances all 3 DDD facilities in Afrin and 3 of its facilities in Harim, providing critical primary and specialized healthcare to vulnerable people.

By the end of May 2021, the project contributed to reaching a total of 31,732 beneficiaries, of whom 60% were women and girls and 55% were children. The services provided by the project include PHC, SRH, MHPSS, health promotion and awareness-raising, and case management. The project continues to support DDD in sustaining its services in an atmosphere where the ongoing conflicts significantly affect the health sector and thus access to healthcare.



MEDICINES & MEDICAL SUPPLY SHIPMENT PROVIDED BY DDD IN SYRIA (2018)

● UOSSM, HIH and Idlib Health Directorate



10,443,858.30 TRY



MEDICINES & MEDICAL SUPPLY SHIPMENT PROVIDED BY DDD IN SYRIA (2019)

*Idlib, Afrin, Jindires,
Jeleme, Afrin Health Center*



24,940,111.72 TRY



MEDICINES & MEDICAL SUPPLY SHIPMENT PROVIDED BY DDD IN SYRIA (2020)

*Idlib, Afrin, Jindires,
Jeleme, Afrin Health Center*



46,922,914.78 TRY

Medicine & Medical Supply Shipment to Syria (2018-2020)

Year	Coverage	Location	Total
2018	Medicine, Consumables and Medical Supplies	Idlib, UOSSM, HIH, Idlib Health Directorate	10,443,858.30 TRY
2019	Medicine, Consumables and Medical Supplies	Idlib, Afrin, Jindires, Jeleme, Afrin Health Center	24,940,111.72 TRY
2020	Medicine, Consumables and Medical Supplies	Idlib, Afrin, Jindires, Jeleme, Afrin Health Center	46,922,914.78 TRY









3

STORIES FROM REFUGEES

"The tent has no walls; it is just a space that embraces our disappointment."

One of our colleagues met with a young refugee woman in a camp located in Turkey's southeastern region. When she asked the young woman about what she would like to talk about and her future plans, she leaned back on the wall with all her past and burden that the war has put on her shoulders...

The young woman closed her eyes, felt thrilled with an exaltation surging up her body. She took a deep breath and replied: "A solid wall to lean upon... That is what I only need. No more." "The tent has no walls," the young woman continued, and told, "it is just a space that embraces our disappointment."

"I need nothing but a wall. A wall to back me up when my strength let me down."

©Dünya Doktorları/Médecins du Monde Turkey



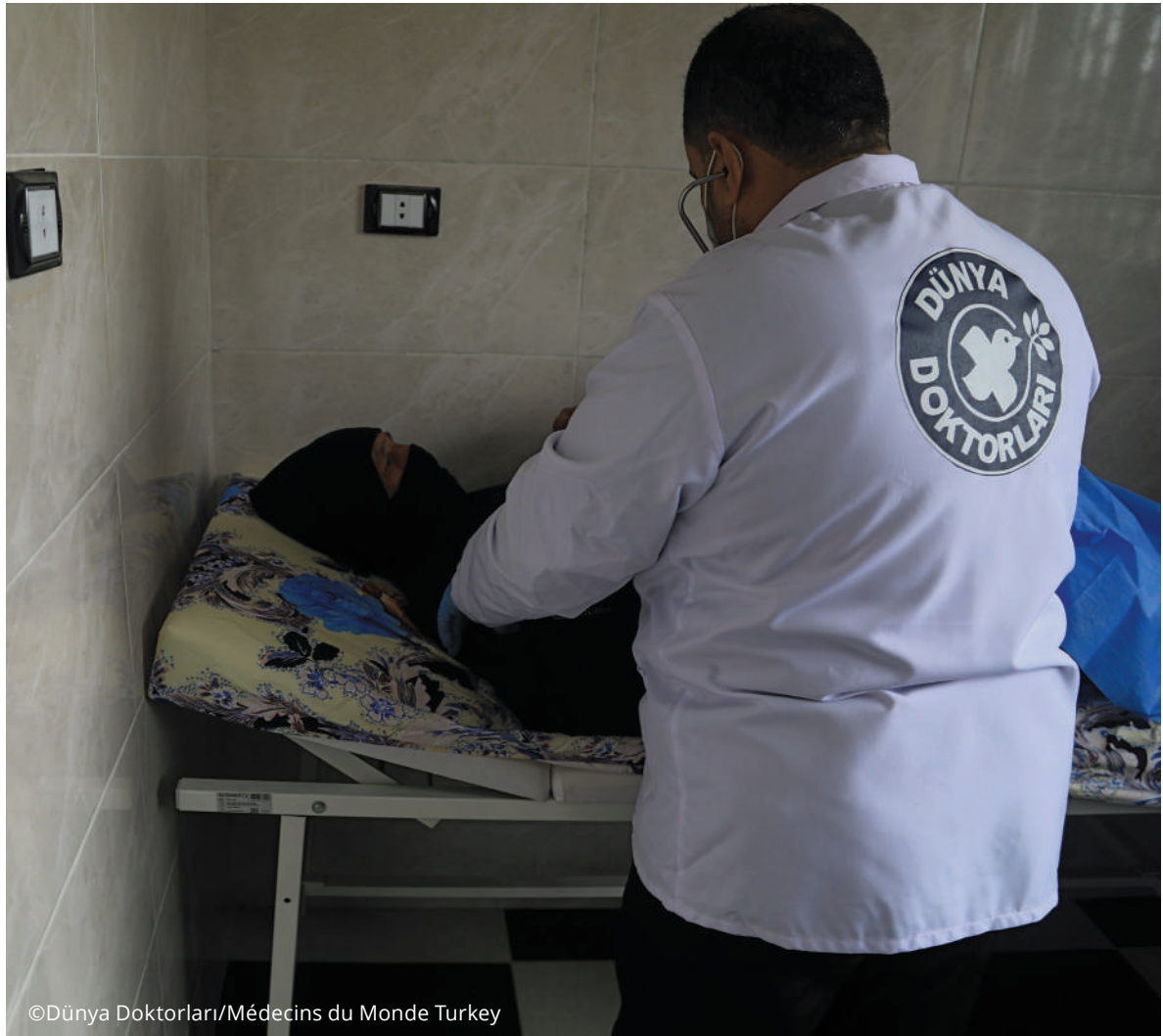
Zainab's Story of Forced Displacement amidst the War in Syria

Zainab is a 51-year-old displaced woman Syria's Idlib countryside. Zainab was displaced more than six times from everywhere she had to escape from the war in Syria and have settled in Afrin's Al-Zaydiyya neighborhood a year ago.

Her 21-year-old son has epilepsy due to hypoxia, as he is unable to work. Zainab's husband died in 2015 because of a bombing that targeted their village in Idlib. When they were displaced, she and her son began to live with her brother's family of six.

"Displacement, poverty, and sad memories...Why did my husband and others die in cold blood?" she always asks herself. Psychological stress increased her blood pressure and diabetes. Fortunately, Dünya Doktorları (DDD) has a health center in Al-Zaydiyya, and she visited our clinic six months ago for the first time when she heard us from her neighbors about DDD's healthcare services.

"I am currently and regularly visiting DDD clinic providing services in our neighborhood to take blood pressure and insulin," she tells and continues: "With every visit, DDD staff takes vital signs of blood pressure and insulin twice a heart ECG in addition to medicines and awareness of the diet as well as the way to use medicines." and the difficulties in transportation to health centers, I would be very appreciated if you could open an orthopedic and neurological clinic since the most people in Afrin need it," Zainab concludes.





The Story of a Refugee Family: Mohammed And His Family's Life from War-Torn Syria to Turkey³

The Syrian Crisis has expelled millions of people from their homes, injured thousands, and devastated generations. Approximately, six million Syrians refugees have fled the war to neighbouring countries such as Jordan and Lebanon. Turkey is hosting the largest number with nearly four million refugees and asylum seekers registered in the country, with many more still undocumented.

Initially, Syrians settled in the provinces bordering Syria, with many living in temporary camps set up by AFAD (the Disaster and Emergency Management Presidency). Over 3.6 million Syrians are registered under temporary protection, which allows them to access health and education services, and sometimes monetary aid distributed by the Turkish Red Crescent. However, most are unable to attain work-permits that would allow them to work legally in Turkey. As their stay in Turkey has continued, many Syrians have migrated to cities seeking jobs and living in low-income areas where rent is low.

Like Mohammed, many Syrians have moved from south-eastern Turkey to western coastal areas of the country in search of job opportunities and better living conditions. As many Syrian refugees have been employed as seasonal workers in the rural districts of western provinces in Turkey, they are among the most vulnerable groups because of their isolation, the lack of services and access for NGOs providing healthcare. Dünya Doktorları Derneği (DDD) met Mohammed and his family in a rural area located in Turkey's Izmir, one of the western provinces of the country. With support from the European Civil Protection and Humanitarian Aid Operations department (DG ECHO), DDD has been providing primary health care (PHC), sexual and reproductive health (SRH) and family planning (FP) services, psychological support services (PSS) and COVID-19 awareness services through mobile medical units (MMUs) to seasonal agricultural workers and many families as in the story of Mohammed.

DDD is the only NGO providing these services in the area. Like many other Syrian families, they stayed in Şanlıurfa province of south-eastern Turkey for a short time. However, they found it difficult to find jobs due to the language barriers along with other several reasons. Later, they decided to go to Izmir after their relatives settled in a rural area of the city.

Mohammed works with his wife in the fields of Izmir's rural areas. They can find work two or three days a week. When one goes to work, the other stays in the tent to look after their five children. Most of the time, however, the younger children are taken care of by their older siblings. Mohammed and his wife work for 70 TL (7 EUR) per day. Their income is insufficient to rent a house where they can live in more favourable conditions. For expenses such as water and electricity, they pay 500 TL (50 EUR) monthly rent to the landowner where they set up their tent. Mohammed and his family cannot access health services, education or other support services in Izmir.



³ Some specific information (names, places, etc.) in the story is changed to protect individuals' privacy.

The family live very far from the state-led refugee healthcare center, through which the Ministry of Health conducts the EU supported SIHHAT project. Mohammed and his family cannot reach this centre on their own because they cannot afford to pay for transportation. Many families can only access healthcare services through DDD's mobile medical units (MMUs) teams. With funding from DG ECHO, Mohammed's family and other seasonal refugee workers in neighbouring districts and provinces benefit from the primary health care, hygiene, family planning, and psychosocial support services provided through DDD's mobile medical units. DDD also distributes hygiene kits in the tent areas in rural areas in the region, where the living conditions are so difficult. In addition to hygiene kits, DDD offers information and training in these areas to help people stay healthy amidst the COVID-19 pandemic. Deprived of the most basic sheltering facilities, these families do not have heaters or fuel to keep warm in winter. The makeshift tents are not waterproof, and children need winter clothes and winter shoes.

There is a need for a world that will give children hope and support for the future, providing them with access to the most basic needs that everyone deserves and helps them break the cycle of poverty and discrimination experienced by their families.









Creating a Family Inside of a War, Migration and Cohesion Triangle⁴

The Syrian Crisis has expelled millions of people from their homes, injured thousands, and devastated generations. Approximately six million Syrians refugees have fled the war to neighbouring countries such as Jordan and Lebanon. Turkey is hosting the largest number with nearly four million refugees and asylum seekers registered in the country, with many more still undocumented.

Initially, Syrians settled in the provinces bordering Syria, with many living in temporary camps set up by AFAD (the Disaster and Emergency Management Presidency). Over 3.6 million Syrians are registered under temporary protection, which allows them to access health and education services, and sometimes monetary aid distributed by the Turkish Red Crescent. However, most are unable to attain work-permits that would allow them to work legally in Turkey. As their stay in Turkey has continued, many Syrians have migrated to cities seeking jobs and living in low-income areas where rent is low.

Along with all this, the lives of Syrian refugees continue. On the one hand, they grapple with the economic conditions created by war and migration; on the other hand, they experience the daily events and living conditions we all experience in our daily lives. Just like non-refugees, they love, get married, give birth, look for a job, work, study, acquire a profession. In short, they try to maintain the normal flow of life.

Dünya Doktorları (DDD) met Raghda and her family in Sultangazi-Istanbul. DDD Sultangazi MHPSS Center launched in 2018 with the support of the European Civil Protection and Humanitarian Aid Operations department (DG ECHO), providing specialized services (psychiatry and psychotherapy), psychological support services (PSS), case management and health promotion services to refugees, asylum seekers, and migrants like Raghda's family. At that time, DDD was the only NGO providing these services all together in the area.

Raghda and her husband Mohammed were married for 20 years. They married each other fondly. However, they never had children. They learned that they did not have children due to a problem in Mohammed when they went to the doctor, but they kept it secret. As a matter of fact, everyone saw the problem in Raghda and Mohammed's family tried to marry Mohammed to another woman, but Mohammed did not accept it. Raghda and her husband Mohammed were full of child longing. More than anything they wanted to have a child. In the culture they lived in, the child was the entity that made the family a family, and no matter how much they loved each other, they had a lack of children.

When the war started, there were many orphans, and they were gathered in a hospital. Raghda's sister was working as a nurse in this hospital, and she told Raghda that they could adopt. When Raghda and her husband went to the hospital, they met twin babies, a girl and a boy who were just three days old. They fell in love the first time they saw them. The legal procedures took 3 months to process and adopt. While Mohammed was initially thinking of providing family support by simply raising them and paying for their education, he later became very attached to these babies and gave his surname. He was their father no matter what, maybe they were not coming from his blood, but they were his whole life now.

Mohammed's father and family opposed their adoption and did not give their consent. The war was raging and the region where they lived was beginning to be affected. They learned that the hospital with orphans was also bombed and all the children there died when their children Ayşe and Mahmud reached the age of 2. They decided to migrate to Turkey. They settled in Gaziantep. Later, Mohammed's family also came to Gaziantep. The children were growing up and they did not want to be talked about their adoption in the presence of the children. That's why they left their families behind and migrated to Istanbul for their children.

A few more years passed. They had recovered their financial situation. Mohammed opened an electronics store. Raghda was also working as a cleaner at a school. The children started school. They were going to the Turkish school, and they had learned Turkish very well. From time to time, there was a conversation between Mohammed and Raghda about when to tell the children that they were adopted, but then they couldn't make any decision and they were giving up each time.

The children were now 8 years old, and Raghda learned that a neighbor was taking her children to mental health and psychosocial support center in Sultangazi that supports refugees and decided to come to this center.

After a preliminary interview with Raghda, their needs were determined, and she was referred to a psychotherapist for psychological counseling. After listening to the detailed story, the psychotherapist created a 4-week information and counseling program for the family. Raghda's husband was also invited, and the sessions started with both of them. In the first sessions, both Raghda and her husband Mohammed were crying out of their feelings of helplessness and guilt, as well as the fear that their children abandoned them after learning of their adoption or searching for their biological parents. These feelings were discussed in the first sessions.

Later, when they start feeling ready, how and when and in what way should children be told about their adoption, what are the reactions of children who learn that they have adopted? How do children feel? What activities should be done after finding out about the adoption? What are the changes that can happen in their lives?

After the sessions were over, Mohammed was ready to talk to the children, but Raghda was feeling very excited and not so ready. For this reason, 2 more sessions were studied with Raghda. Finally, Raghda was also completely ready. Raghda and Mohammed created the appropriate environment and explained together to their children that they were adopted as the way they planned with the therapist. After this statement, the two children gave different reactions.

Raghda and Mohammed came back to DDD's Mental Health and Psychosocial Support Center, and this time studies were conducted on the reactions and feelings of the whole family. By the time, Raghda and Mohammed arrived for the next session, their relationship with their children was fixed and has become the same as before. The fear, helplessness, and guilt felt by Raghda and Mohammed had disappeared. The reactions Ayşe and Mahmud gave when they first learned, such as withdrawal, rejection, and anger, disappeared after the speeches and activities they had done as a whole family. The bonds of trust and love they established with their children were getting stronger day by day. They left the center happily after 8 sessions of the consultation, expressed gratitude to the team at the DDD center and the psychotherapist

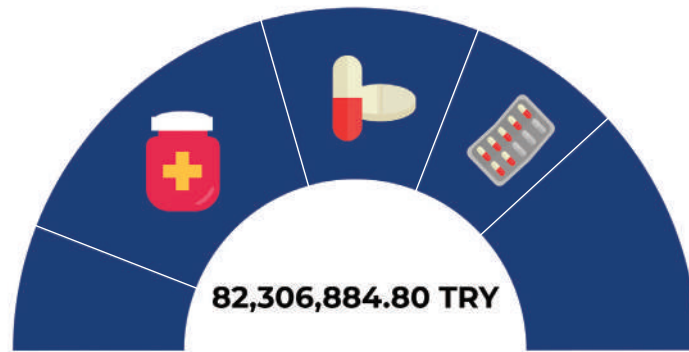


⁴Note: Some specific information (names, places, etc.) in the story is changed because of ethical reasons.



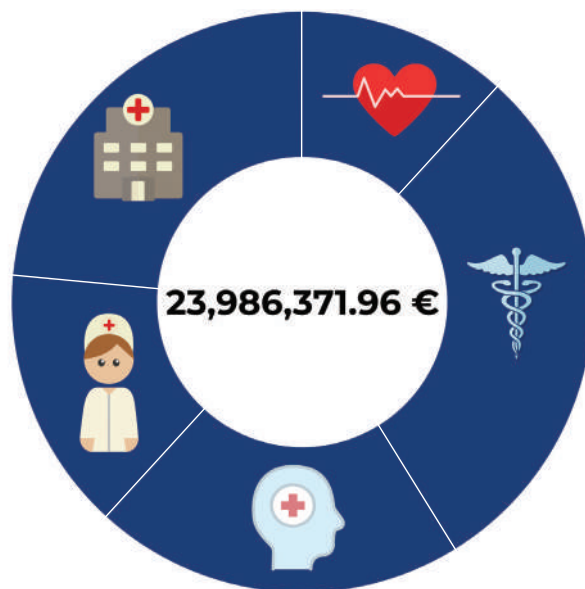
SUMMARY

TOTAL VALUE OF MEDICINES & MEDICAL SUPPLY SHIPMENT PROVIDED BY DDD IN NWS (2018-2019-2020)



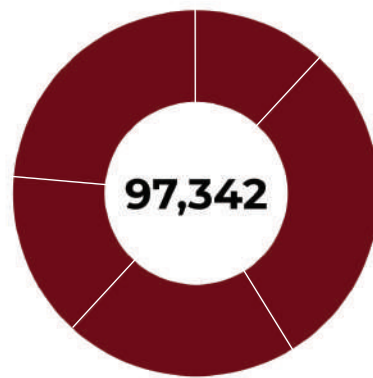
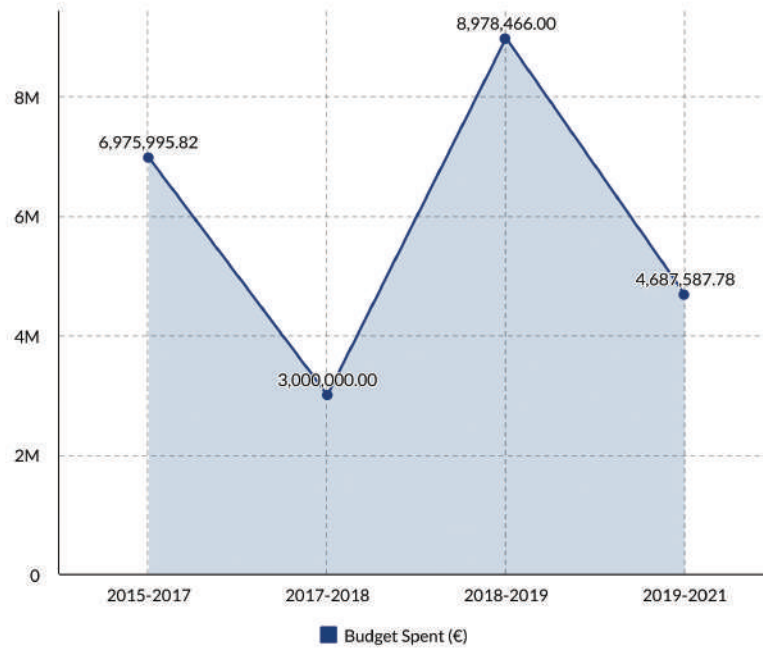
- Total value of medicines and medical supply shipment provided by Dünya Doktorları (DDD)/Médecins du Monde Turkey (MdM-T) in North West Syria, particularly in Afrin and Idlib, is 82,306,884.80 TRY between 2018-2020.
- As strengthening links to secondary health care services is one of its missions of in the region, Dünya Doktorları aims to explore upgrading existing services to secondary health care (SHC) level emergency services and from BEmONC to CEmONC level by adding more tailored specialist services including surgeries for caesarean sections as well as supporting people and facilities with necessary medicine and medical supplies.
- Moreover, Dünya Doktorları/Médecins du Monde Turkey has medical laboratories that fulfil urgent medical needs in Syria, addressing a critical gap, as one of the few organizations conducting PCR testing in NWS to fight the COVID-19 pandemic in coordination with the Health Cluster, COVID-19 taskforce, EWARN, and local authorities.

TOTAL BUDGET SPENT WITHIN TURKEY PROGRAMME (2017-2020)



- Dünya Doktorları/Médecins du Monde Turkey has carried out humanitarian operations to increase, improve and facilitate the access of vulnerable groups -including refugees, migrants, and asylum seekers- to healthcare services through its PHC and MHPSS centers, spending 23,986,371.96€ between 2017-2020.
- Through its Mobile Medical Units (MMUs) in the rural areas of Bayraklı and Torbalı districts of Izmir and in Manisa, DDD provides PHC services, medical and SRH consultations, preventive screening sessions and supports referrals to its Izmir MHPSS Centre and PHC facilities.
- As DDD also provided PHC services for Syrian refugees in Istanbul's Sultangazi district between 2015-2017, it has handed over its PHC clinics in Sultangazi and Izmir's Konak district after the SIHHAT Project led by the Turkish Health Ministry launched.
- Providing 67,514 refugees with mental health and psychosocial support services between 2016-2020, DDD has transferred its beneficiaries to Immigrant Health Centers of Turkey's Ministry of Health as of December 31, 2020.
- In its Community Centre in Fatih (Istanbul), DDD aimed at promoting the integration of Sub-Saharan African refugees, migrants and asylum seekers into the host population and the public health services. DDD provided them with awareness and health promotion group sessions, case management and orientation services as well as language classes and legal counselling. The project was completed by providing case management services to a total of 1,288 vulnerable and unregistered beneficiaries in Istanbul's Fatih Community Center throughout 2020 to contribute to the solution of problems related to the protection area, as most of them are non-Syrian refugees and migrants who do not have access to basic healthcare services in Turkey.

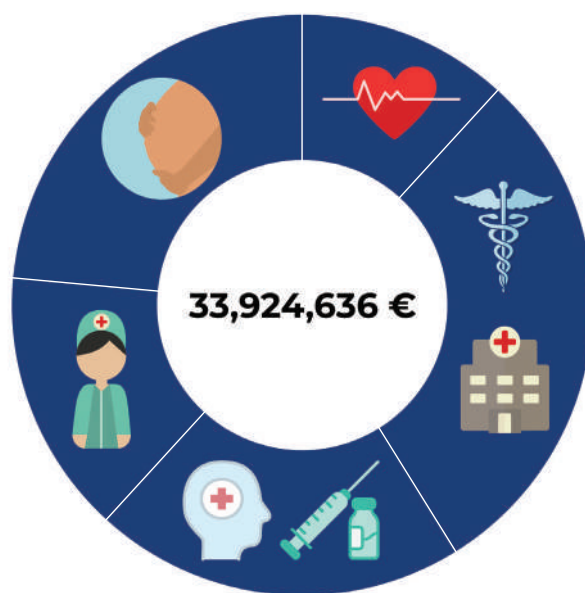
BUDGET SPENT CHART FOR TURKEY PROGRAMME (2017-2020)



Total Number of Beneficiaries (2017-2020)

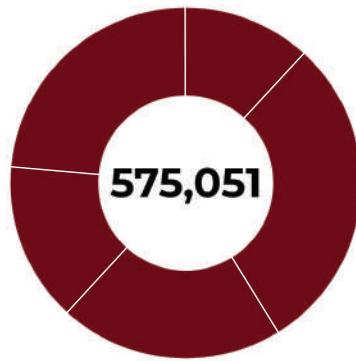
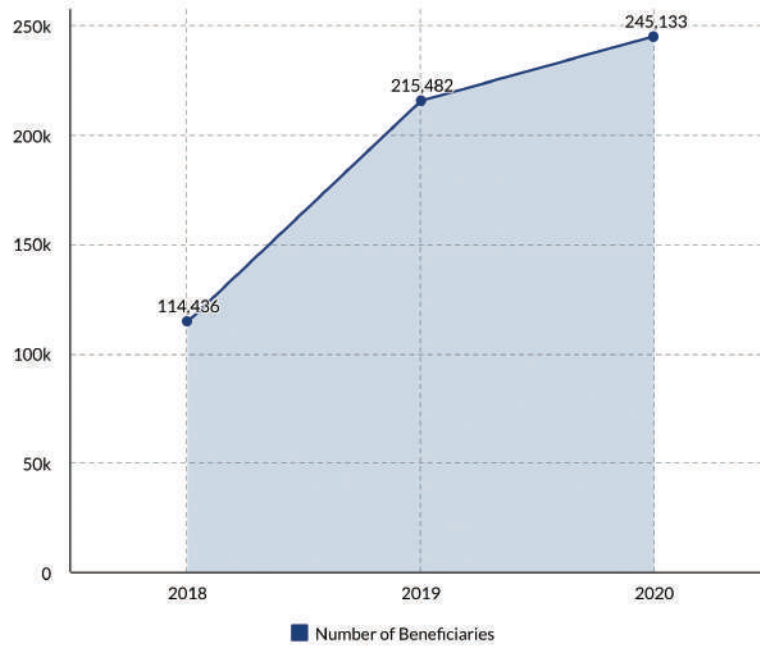


TOTAL BUDGET SPENT WITHIN SYRIA PROGRAMME (2017-2020)



- Total budget spent by DDD within its Syria Programme from various donors is 33,924,636€ between 2017-2020.
- In 2020, DDD oversaw 17 health facilities, as it directly operated 12 primary health care clinics (9 in Idlib and 3 in Aleppo). Through its two partners in the region, DDD supported two health facilities in Idlib and three mobile clinics in Aleppo. In total, over half-a-million people were serviced across these 17 facilities in 2020.
- In addition to its programs for PHC, MHPSS, SRH services, DDD also aimed at preventing and mitigating as well as addressing risks and obstacles in accessing protection services, such as lack of information and limitation of accessing specialized GBV protection services, qualitative SRH service links with GBV protection services.

TOTAL NUMBER OF BENEFICIARIES SYRIA PROGRAMME (2018-2020)



Total Number of Beneficiaries (2018-2020)





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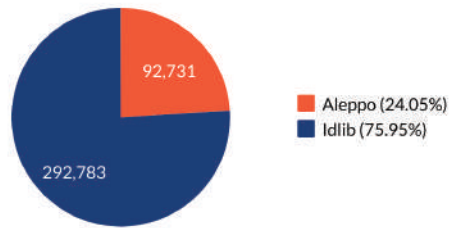
DDD's humanitarian intervention in Syria in 2021

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SYRIA PROGRAMME IMPACT 2021

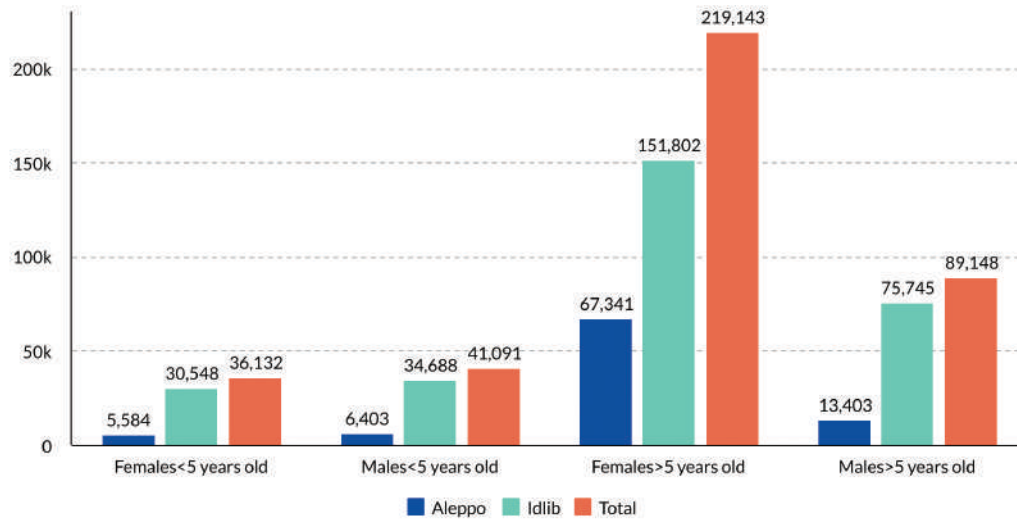
Number of Unique Beneficiaries in NWS



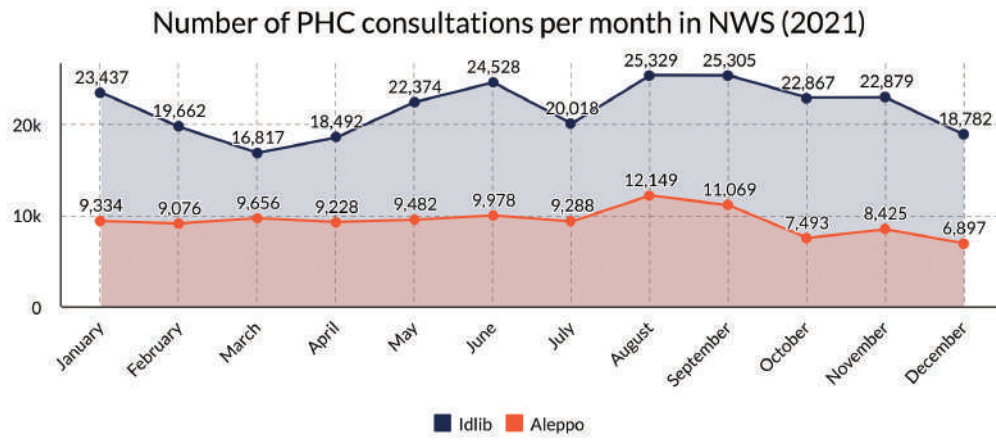
385,514

Dünya Doktorları reached 385,514 unique beneficiaries in North West Syria (Aleppo and Idlib) in 2021.

Age-Gender Breakdown of Unique Beneficiaries

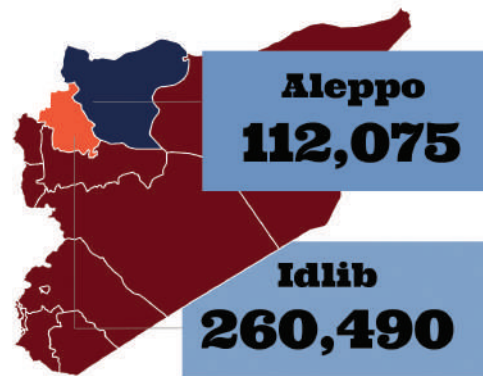


SYRIA PROGRAMME IMPACT 2021

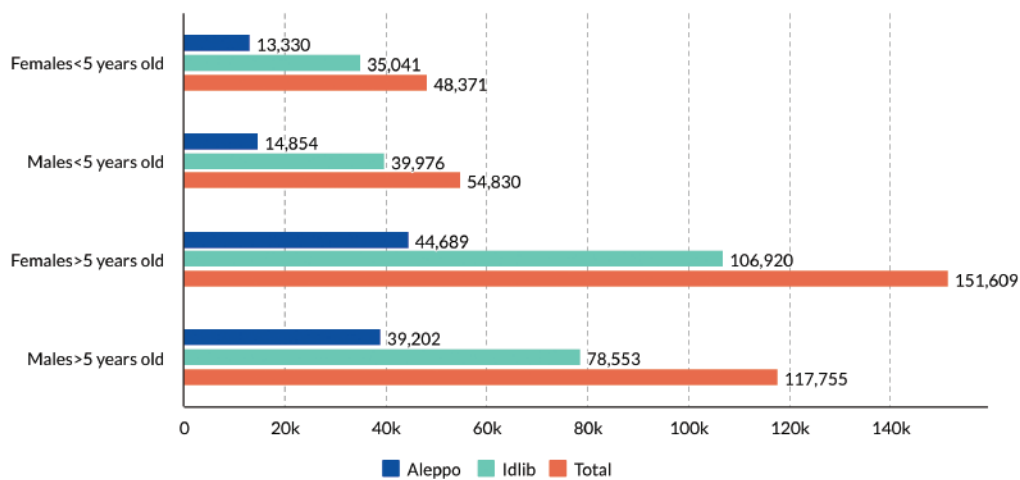


372,565

Dünya Doktorları provided a total of 372,565 PHC consultations in North West Syria in 2021.

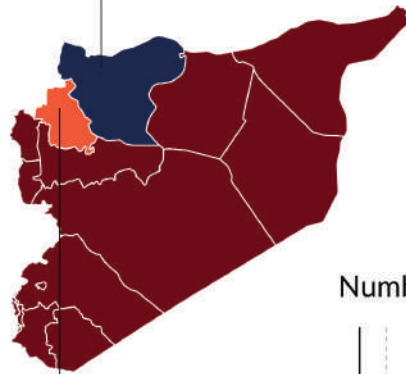


Age-Gender Breakdown of PHC Services



SYRIA PROGRAMME IMPACT 2021

Aleppo
23,139



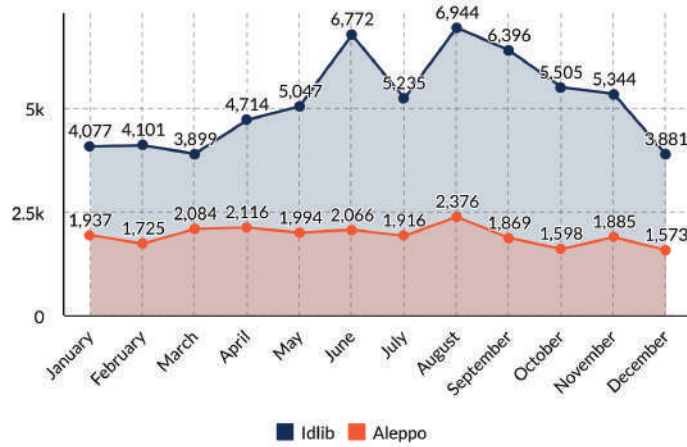
Idlib
61,915

Total Number of SRH Consultations

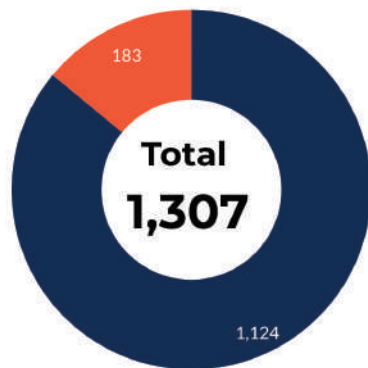
85,054

Dünya Doktorları provided a total of 85,054 SRH consultations in North West Syria in 2021.

Number of SRH consultations per month in NWS

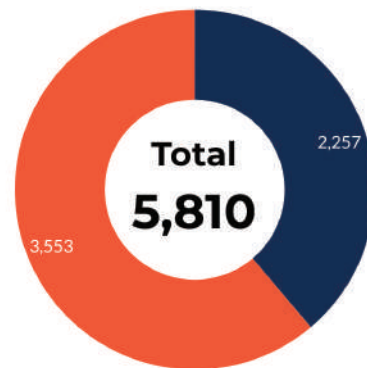


Total Number of Mental Health Services Provided



Aleppo (86%) Idlib (14%)

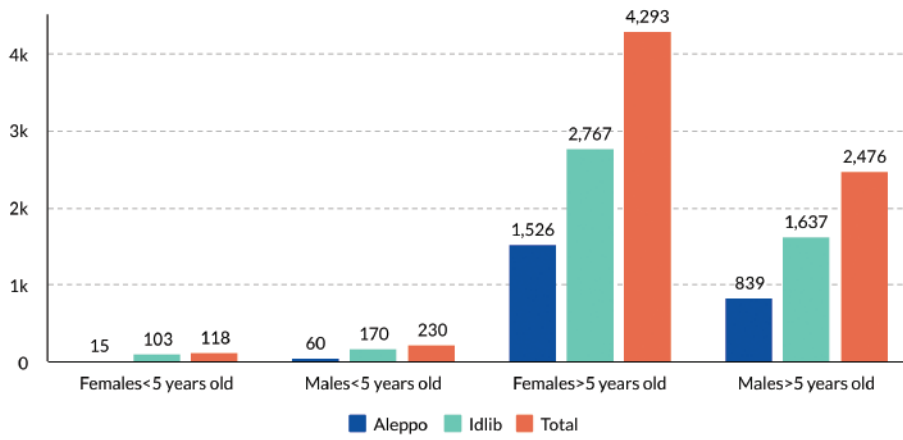
Total Number of Psychosocial Support Services Provided



Aleppo (38.85%) Idlib (61.15%)

SYRIA PROGRAMME IMPACT 2021

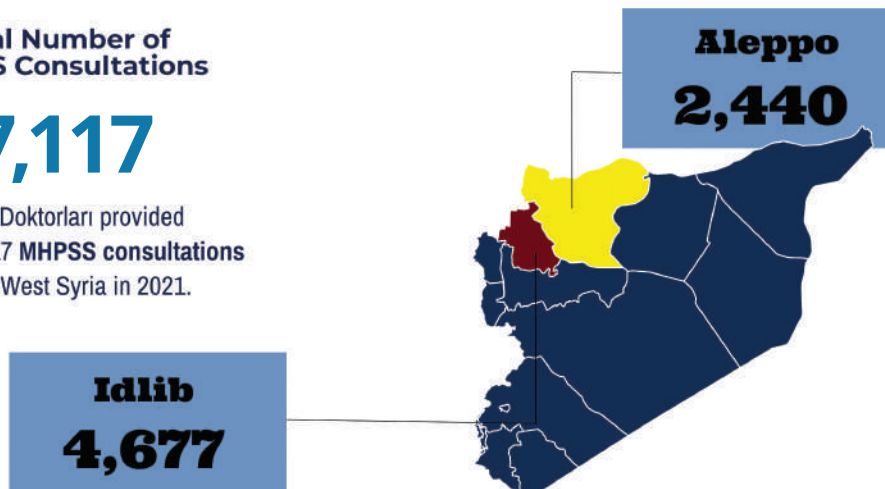
Age-Gender Breakdown of MHPSS Services



Total Number of
MHPSS Consultations

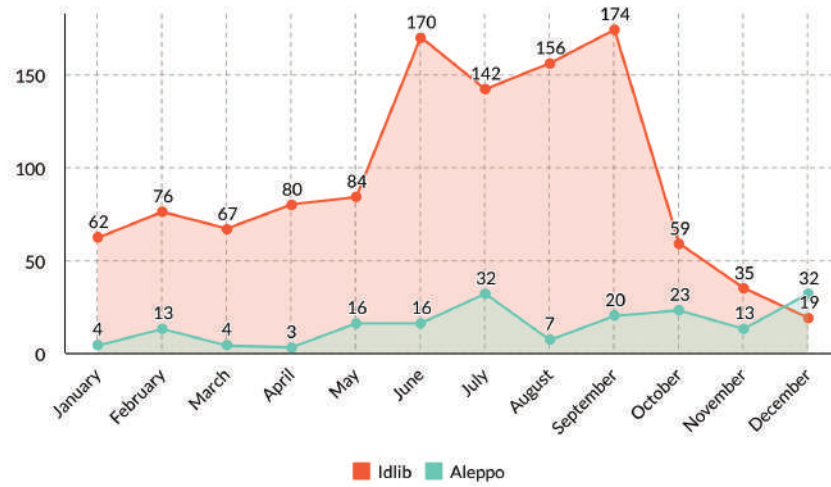
7,117

Dünya Doktorları provided
a total of 7,117 MHPSS consultations
in North West Syria in 2021.

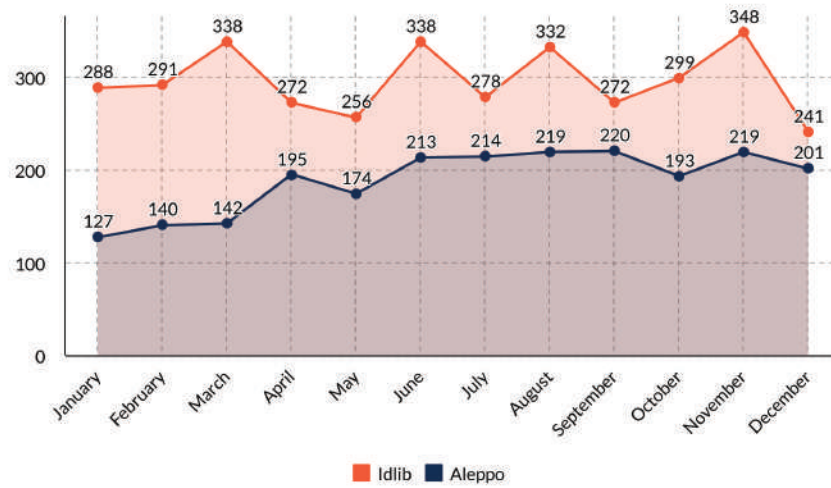


SYRIA PROGRAMME IMPACT 2021

Number of Mental Health consultations per month in NWS

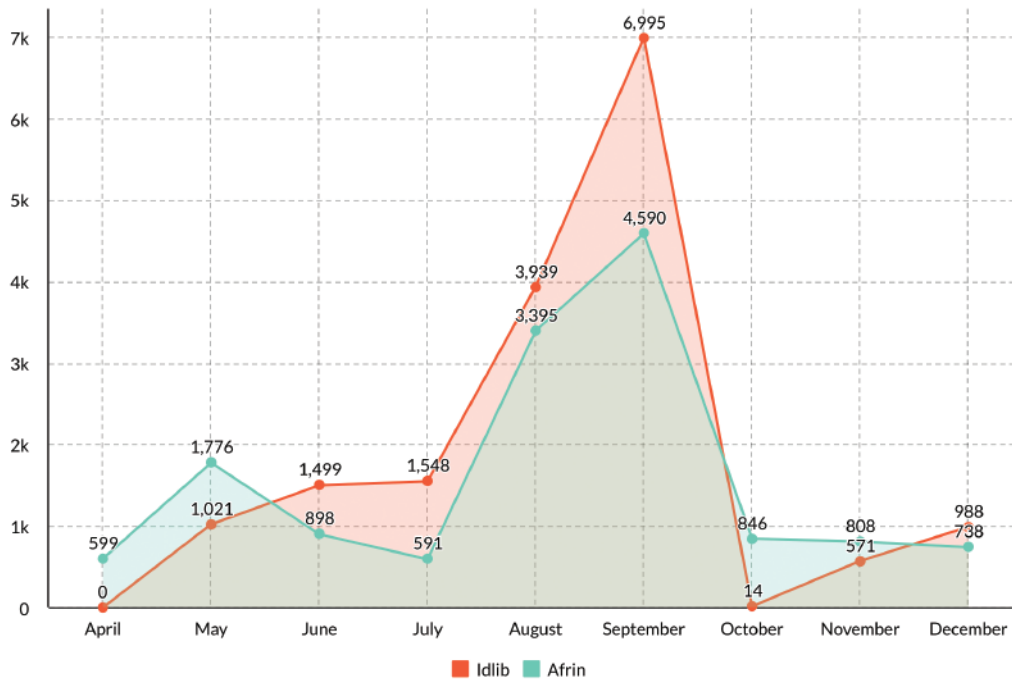


Number of PSS consultations per month in NWS

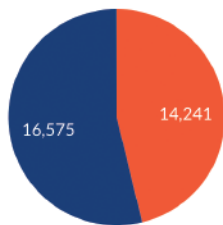


SYRIA PROGRAMME IMPACT 2021

Number of PCR tests performed by DDD (April 2021 - December 2021)



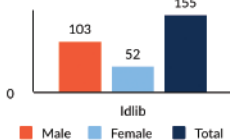
Total Number of PCR tests per region in NWS



30,816

Médecins du Monde Turkey performed a total of 30,816 PCR tests in North West Syria (Afrin and Idlib) between April-December 2021.

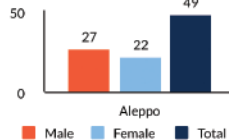
Number of Trained Staff



% of Total Staff

69%

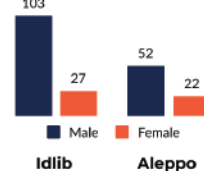
Number of Trained Staff



% of Total Staff

71%

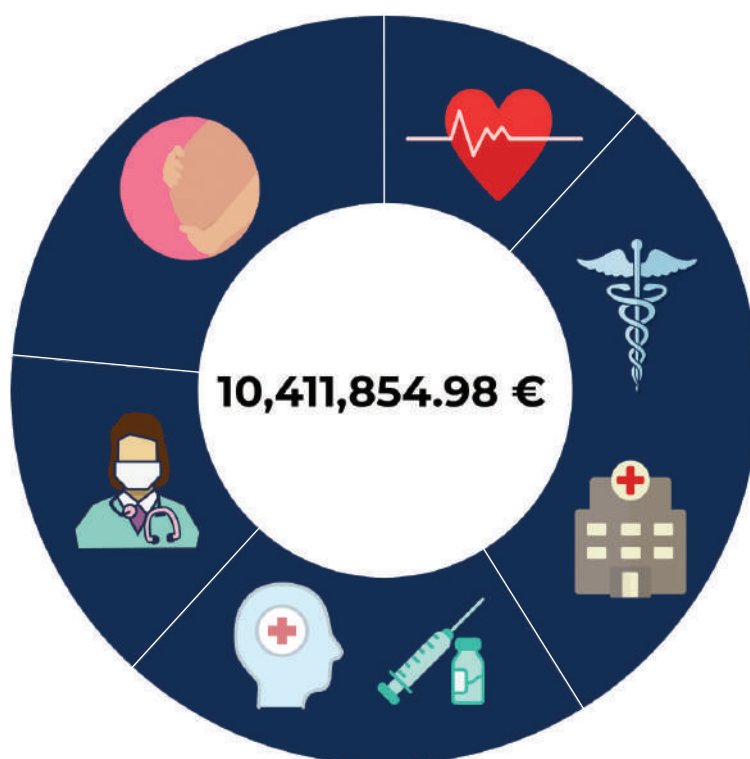
Total Trained Staff in NWS



Total Number of Trained Staff in NWS

204

TOTAL AMOUNT SPENT WITHIN SYRIA PROGRAMME (2021)



- Total budget spent by DDD within its Syria Programme from various donors is 10,411,854.98 € in 2021.

TOTAL BUDGET SPENT FOR TURKEY AND SYRIA PROGRAMMES (2017-2021)




- Total budget spent by DDD for the programmes in both Turkey and Syria between 2017 and 2021 is 68,322,862.94 €.

PARTNERSHIPS AND GRANTS



SCHF Syria Cross-border
Humanitarian
Fund



 Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

**Swiss Agency for Development
and Cooperation SDC**



DÜNYA DOKTORLARI MÉDECINS DU MONDE ÄRZTE DER WELT 世界の医療団 DOKTERS VAN DE WERELD منظمة اطباء العالم MÉDECINS DU MONDE
世界の医療団 LÄKARE VÄRLDEN ιατροί του κόσμου DOCTORS OF THE WORLD ÄRZTE DER WELT MÉDICOS DO MUNDO DOCTORS OF THE
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MUNDO LÄKARE VÄRLDEN ιατροί του κόσμου DÜNYA DOKTORLARI DOCTORS OF THE WORLD MEDICI DEL MONDO

**Argentina | Belgium | Canada | France | Germany | Greece | Italy | Japan
Luxembourg | Netherlands | Portugal | Spain | Sweden | Switzerland
Türkiye | United Kingdom | United States of America**



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DISCLAIMER

This document covers humanitarian aid activities implemented with the financial assistance of the donors referred herein. The views expressed in this document should not be taken, in any way, to reflect the official opinion of the donors, who are not responsible for any use that may be made of the information it contains.

ACRONYMS

MDM	: Médecins du Monde
DDD	: Dünya Doktorları Derneği
PHC	: Primary Health Care
MHPSS	: Mental Health and Psychosocial Support Services
SRH	: Sexual and Reproductive Health
SHC	: Secondary Health Care
PSS	: Psychosocial Support
BEmONC	: Basic Emergency Obstetric and Newborn Care
CEmONC	: Comprehensive Emergency Obstetric and Newborn Care
ANC	: Antenatal Care
PNC	: Postnatal Care
NWS	: Northwest Syria
NGO	: Non-governmental Organization
PCR	: Polymerase Chain Reaction
GBV	: Gender-based Violence
PPE	: Personal Protective Equipment
NCDs	: Non-communicable Diseases
IDP	: Internally Displaced People
WHO	: World Health Organization
EWARN	: Early Warning, Alert and Response Network
PTR	: Physical Therapy and Rehabilitation
FP	: Family Planning

NOTES

NOTES

NOTES



ALSO
CARES FOR
INJUSTICE