

Key figures

536,285

Treatment courses provided

250

Trauma cases treatments delivered

996

Healthcare providers trained

81,303

Outpatient consultations provided

125.652

Tonnes of health supplies delivered

64.5 % of sentinel sites submitted
weekly disease surveillance reports

60.22 % of disease alerts were
responded to within 72 hours



The late Eng. Emad Shehab actively engaging with community members during a cholera awareness campaign in Al-Ashara, Deir-ez-Zor Governorate, Syria, 2022. His memory and service to the humanitarian response was honored on World Humanitarian Day 2024.

Top four morbidities reported by Early Warning, Alert and Response System (EWARS & EWARN)

Influenza-like illness (ILI)

182,915 (56.9%)

Acute Diarrhea (AD)

118,659 (36.9%)

Leishmania

5,645(1.8%)

Acute Jaundice Syndrome

4453 (1.38%)

Highlights

- On August 12, a magnitude 5.5 earthquake struck 28 km east of Hama City, followed by 13 aftershocks ranging from magnitudes 2.5 to 4.6, which affected Damascus, Lattakia, and Aleppo. Another earthquake, with a magnitude of 4.8, occurred on August 16. At least 65 injuries were reported as community members fled their homes, and high levels of mental distress were observed in both the affected communities and nearby areas. WHO teams on the ground, along with health and education partners, responded by providing stress-coping support, offering critical incident care, and scaling up remote mental health and psychosocial support (MHPSS) services, including extended hours of operation.
- The WHO workforce came together to mark World Humanitarian Day (WHD) 2024, honoring the dedication, commitment, and sacrifices of humanitarians worldwide, in line with this year's global theme, "#ActforHumanity." On WHD, WHO Syria paid tribute to Engineer Emad Shehab, who tragically lost his life during an airstrike on his building in Deir-ez-Zor Governorate. Engineer Emad joined WHO in 2022 as a water, sanitation, and hygiene (WASH) focal point in Deir-ez-Zor. His expertise contributed to critical improvements in WASH conditions at health facilities, where he led essential water quality monitoring efforts that addressed significant public health risks.

- Following WHO's declaration of Mpox as a Public Health Emergency of International Concern on August 14, 2024, WHO has assessed the risk of Mpox in the Eastern Mediterranean Region as moderate. In Syria, despite the high risk of infectious disease spread due to the ongoing crisis and population displacement, the risk of a Mpox outbreak remains moderate. WHO in Syria is working closely with the Ministry of Health to strengthen preparedness measures to prevent new cases by ensuring rapid identification, testing, and response to potential cases. Mpox has been added to the list of priority diseases for surveillance, and case definitions and WHO guidance have been shared with the Ministry of Health and health partners. Additionally, through the regional office, WHO has facilitated training for Ministry of Health workers regarding Mpox as a public health emergency. Furthermore, WHO has provided the Central Public Health Laboratory in Damascus with PCR kits for diagnosing suspected cases.

WHO Country Office Syria

Security and Access Situation

- The security situation within WHO Syria's area of operations remained unstable in several hotspots, including northeast Syria (Al-Hassakeh, Ar-Raqqa, and Deir-ez-Zor), Dara'a, Quneitra, Aleppo, Idleb, Lattakia, Hama, and Homs.
- As part of regional escalation due to the Israeli-Palestinian crisis, intermittent airstrikes continue across the country with attacks reported in Damascus, Rural Damascus, Dar'a, and Homs governorates during August 2024.
- Hostilities continued in rural areas of northeast Syria, causing instability and threatening the safety of civilian populations, humanitarian staff, and security forces. In Deir-ez-Zor, security incidents have increased, with more than 70 serious incidents recorded during the reporting period.

Expanded Program on Immunization (EPI)

- Monthly outreach and mobile team activities were conducted across all governorates to enhance routine vaccination coverage in remote and high-risk areas.
- WHO, in cooperation with the Ministry of Health (MOH), conducted planning workshops in Aleppo, Dara'a, and Hama aimed at integrating the Integrated Management of Childhood Illness (IMCI) and nutrition services into the mobile vaccination teams' activities. This initiative seeks to expand access to essential healthcare services for children in target areas.
- WHO, together with the MOH, conducted a series of workshops for surveillance officers, focusing on enhancing the skills of doctors and technicians working in hospitals across all governorates.

Primary Health Care (PHC) and Non-Communicable Diseases (NCDs)

- With WHO support, 175 healthcare workers from the Ministry of Health received training on quality assurance standards at the primary healthcare level in Damascus, Homs, Hama, Aleppo, Lattakia, and Tartous. Additionally, 150 healthcare workers from the directorates of health in Damascus, Rural Damascus, Quneitra, Hama, and Tartous received training on elderly care at home.
- Two key workshops were conducted in Damascus to present the endorsed Primary Health Care (PHC) strategy and draft action plans at the Directorate of Health (DoH) level.
- WHO dispatched lifesaving medicines, including PHC/NCD medicines and 46 non-communicable disease kits (NCDs), to the MOH at the central level, and to the DoH in Rural Damascus, Hama, Dara'a, As-Swida, Tartous, Lattakia, Al-Hassakeh, Deir-ez-Zor and Ar-Raqqa. Other support was channeled through 4 NGOs.

Secondary Health Care (SHC)

- WHO facilitated hospitals' governance training workshops in Damascus. Eight central workshops were conducted from August 1 to 29, 2024, targeting 125 healthcare workers from public and autonomous hospitals. The objectives included conducting a situational analysis, endorsing the updated health service package, and standardizing quality assurance measures.
- WHO dispatched IPC supplies, including 5,000 self-assembly visors, 7,845 disposable plastic aprons, and 175 body bags for adults, to the MoH central warehouse and PHC facilities in Deir ez-Zor.

Trauma Care

- WHO conducted one 5-day workshop on “Major Incident Medical Management and Support” (MIMMS) and disaster management in Damascus, in addition to one 3-day training on First Aid and Basic Life Support. These workshops equipped 50 health professionals from the Ministry of Health with the skills and knowledge necessary to respond to human-made and natural emergencies. The training emphasized on-the-scene management and practical skills, providing a standardized approach to emergency medical management and support.
- WHO, in cooperation with the Ministry of Health, facilitated four training courses on disability and physical rehabilitation in Damascus. A total of 100 health workers, including prosthetics and orthotics technicians, physiotherapists, and physiatrists, received training on subjects related to disability.

Nutrition

- A total of 87,740 children under the age of five were screened for malnutrition across 981 health centers.
- A total of 3,534 cases of acute malnutrition were identified, including 694 cases of severe acute malnutrition (SAM) and 2,480 moderate acute malnutrition cases (MAM).

Mental Health and Psycho-Social Support (MHPSS)

Primary health centers (PHC), outpatient clinics, and specialized facilities provided:	<ul style="list-style-type: none">- 6,270 psychotropic medication treatment courses.- 18,018 Mental Health Gap Action Program (mhGAP) and specialized consultations at the PHC level.- 20,127 basic psychosocial support services and 461 therapeutic psychological interventions.- 804 therapeutic psychological interventions, with 55 cases referred to psychiatrists.
Online MHPSS-services	<ul style="list-style-type: none">- 639 MHPSS online services were provided for those in need of psychological support.
Engagement through Mental Health experts in the field	<ul style="list-style-type: none">- 9 field visits.- 21 supervision sessions delivered to health and community workers.- 106 health and community workers supervised.- 19 trainings conducted with 187 workers received MHPSS training

Tuberculosis (TB) & HIV

- With the support of the Global Fund, WHO provided the MoH TB program with sufficient supplies for one year, including 3,500 tuberculosis treatment courses along with prophylactic treatment for contacts.
- In August, WHO concluded an active tuberculosis (TB) case-finding initiative in central prisons located in the governorates of Damascus, Rural Damascus, Al-Hassakeh, Aleppo, and Homs. A total of 15,805 prisoners were screened for TB and received awareness sessions. Of the 1,809 presumptive cases, 18 TB cases were confirmed and initiated on treatment.
- TB mobile clinics continued to operate in Aleppo, Deir-ez-Zor, and Rural Damascus. A total of 580 beneficiaries attended 29 TB awareness sessions, and 36 suspected cases were tested for TB, resulting in 2 confirmed cases.

Neglected Tropical Diseases (NTD)

- On August 28-29, a two-day meeting was facilitated with the Fight Rabies Committee, bringing together 32 participants from the Ministry of Health, Ministry of Higher Education, Ministry of Education, Ministry of Defense, Ministry of Environment and Local Administration, and local NGOs. The participants discussed strategies to address the rising number of dog bites, using a One Health approach to control and prevent rabies.

Health Systems Strengthening

- WHO supported a two-day workshop focused on the measurement of Sustainable Development Goal (SDG) 3.5, which aims to strengthen the prevention and treatment of substance abuse, including the misuse of narcotic drugs and alcohol. The MoH led a new partnership with the Ministry of Interior's Drug Control Department to enhance reporting on SDG 3.5 and to collaborate with other partners to achieve the Sustainable Development Goals. The workshop, held

in Damascus, was attended by staff from the Drug Control Directorate and other key stakeholders. The forum also served to further strengthen multi-stakeholder approaches to prevention and treatment of substance abuse.

Preventing and Responding to Sexual Misconduct (PRS)

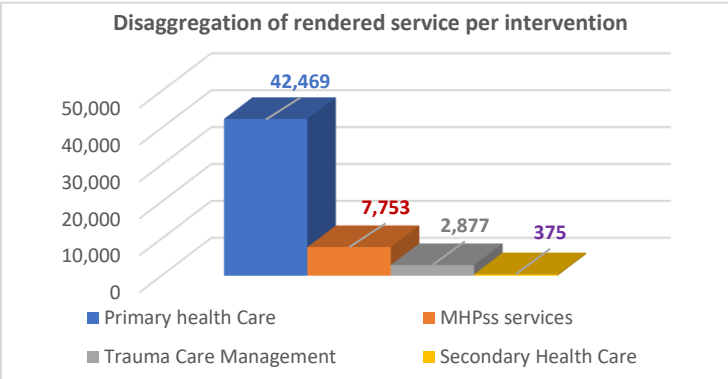
- In response to numerous staff inquiries regarding the Victim/Survivor-Centered Approach (VSCA), the PRS coordinator organized a Q&A session for 42 WHO participants, with the participation of EMRO’s IOS (United Nations Office of Internal Oversight Services) focal point and the victim support officer from WHO headquarters.
- The WHO Code of Conduct was disseminated by sub-national focal points for signatures among health sector partners in Homs, Hama, Idleb, and Deir-ez-Zor.
- Awareness sessions were conducted in the governorates of Homs, Hama, and Idleb to strengthen PRS accountability among partners.

Community Engagement (NGOs)

- 3 WHO implementing partners in Aleppo operated 5 medical mobile teams (MMTs) providing primary and secondary trauma care, MHPSS services, telemedicine consultations, and conducting awareness activities for underserved populations.
- A total of 53 474 healthcare services were supported during the reporting period.

National Health Sector Coordination

- WHO prepared an updated overview of the impact of underfunding on the health sector, including a review of OCHA’s financial tracking service funding.
- The Health Sector Syria Preparedness Plan was updated to reflect the impact of regional conflicts.
- On August 18-19, WHO led the health sector Review Committee for the first standard SHF allocation.



WHO Syria Sub-Offices

Aleppo Hub	<ul style="list-style-type: none">• The newly rehabilitated Burns Unit at Al Razi Hospital treated approximately 600 patients in outpatient clinics and admitted 43 patients for treatment during the month. A field visit was conducted to assess challenges, identify gaps, and evaluate the overall situation of the unit.• In Nubul, northern rural Aleppo, approximately 120 cases of diarrhea were reported. Affected individuals received treatment at Al-Zahra Hospital, and MoH Rapid Response Teams (RRTs), supported by WHO, were deployed to investigate and respond. Local authorities closed several fast-food shops and ice cube vendors for failure to adhere to food safety regulations. All Rapid Diagnostic Tests (RDTs) for cholera were negative, and the DoH confirmed that it was food poisoning.• Four Mobile Medical Teams (MMTs) were deployed to remote areas in Aleppo governorate, and four public health facilities were activated for night shifts in Jabbal Samman sub-district.• WHO's response included the following health services:<ul style="list-style-type: none">- 24,946 outpatient consultations- 1,764 trauma consultations- 16 remote areas and villages received support with basic health care services.- 12,237 treatment courses- 7,753 mental health consultations- 1,962 telemedicine consultations supported- 4,327 consultations provided by WHO-supported medical mobile teams.
------------	--

Lattakia Hub	<ul style="list-style-type: none"> • WHO participated in a field visit to the Kassab cross-border medical point alongside the Resident Coordinator, OCHA, and UNHCR. Discussions with the Lattakia DOH medical staff covered the overall situation, challenges, recommendations, and needs. • WHO conducted monitoring visits to 8 PHCs in Lattakia to assess the implementation of health programs, including the Expanded Program on Immunization (EPI), Health Resources and Services Availability Monitoring System (HeRAMS), Early Warning, and Alert and Response (EWARS). • WHO conducted follow-up visits to Tishreen University Hospital to monitor updates to the Health Information Management System (HIMS) and provide staff training.
Homs Hub	<ul style="list-style-type: none"> • On August 12, a magnitude 5.5 earthquake struck 28 km east of Hama City. The Hama Directorate of Health reported 65 injuries and 67 cases of acute psychological trauma. • On August 14, WHO participated in an inter-sector assessment mission to As-Salamiyyah and its surrounding rural areas to evaluate the earthquake's impact on the most affected villages. The mission included visits to four locations: Zaghrin, Ali Kasun—El-Sheikh Ali, Tal Dura, and Ruba villages in rural As-Salamiyyah. The expedition also involved an evaluation of the As-Salamiyyah General Hospital. • In response, WHO dispatched essential medications and an Interagency Emergency Health Kit (IEHK) to the DoH in Hama governorate and the As-Salamyieh General Hospital.
Deir-ez-Zor (DeZ) Hub	<ul style="list-style-type: none"> • As part of the emergency response to the escalating violent conflict situation on the ground, WHO dispatched a shipment of medical supplies to Al-Assad Hospital and the Deir-ez-Zor DoH including: <ul style="list-style-type: none"> - Isoflurane 100% Inhalation Vapour, Liquid (250mL Bottle): 40 bottles. - Interagency Emergency Health Kit (IEHK) 2017 Basic: 3 kits (medications). - Interagency Emergency Health Kit (IEHK) 2017 Supplementary: 12 kits (medical equipment). - TESK 2019 Emergency Kit, Module 1B (Anesthesia Supplies): Various consumables and sterilizable items. - Patient Monitors (Edan iM60): 3 units, equipped with ECG, NIBP, TEMP, SPO2, and accessories. - Oxygen Concentrators (Oxytek, OX-10A, 10 LPM, 220V): 50 units with accessories. Creative Medical Finger Oximeters: 200 units. • In response to the typhoid outbreak in eastern DeZ, WHO concentrated its surveillance activities in the affected areas, provided the necessary supplies for verification, and coordinated with Health and WASH partners to prepare a contingency plan and response. • In collaboration with the DOH, WHO continues to lead the AWD response by supporting all response pillars and working on the AWD/Cholera readiness checklist in collaboration with other sectors.
Northeast Syria (NES) - Qamishli Hub	<p>Coordination:</p> <ul style="list-style-type: none"> • On 6 August, the WHO team conducted a mission to the Malkeyh District, visiting Al-Roj camp, the Malkeyh health center, and Al-Newroz camp to monitor the implementation of the BCU vaccination activity. • On 7 August, WHO was represented at the Al-Hol health coordination meeting and shared updates on ongoing health interventions including updates on MHPSS. • On 21 August, WHO conducted a mission to Al-Hasakeh to assess the epidemiological situation, focusing on Acute Watery Diarrhea (AWD), and to support the related Risk Communication and Community Engagement (RCCE) activities. <p>EPI:</p> <ul style="list-style-type: none"> • Coordinated with the Directorate of Health on the Expanded Program on Immunization (EPI) activities to address gaps in low-coverage areas and align efforts with UNICEF-oriented RCCE activities.

	<p>Other health response activities:</p> <ul style="list-style-type: none"> On 12 August, WHO conducted a mission to the Areesha camp to provide technical support and address increased cases of substance use disorders, exploring evidence-based interventions, needs assessment, and referral mechanisms. WHO distributed 9 tonnes of medical supplies to various health partners and facilities in NES. WHO conducted water quality monitoring in 11 camps, 49 shelters, 37 water stations, and 5 boreholes. A total of 3,322 water samples were tested, 50 (1.5%) of which showed bacterial contamination.
--	---

WHO Gaziantep Field Presence for the Cross-Border Response _ Northwest Syria

Northwest Syria (NWS) Situation Update

- The security situation in northwest Syria remains unstable with ongoing hostilities continuing to endanger civilians in particular women and children.
- In the second quarter of 2024, the Camp Coordination and Camp Management Cluster reported more than 21,000 displacements in the northwest region, particularly from the districts of Dana, Maaret Tamsrin, Afrin, Idlib, and Sarmin. These displacements were largely due to reduced access to humanitarian assistance, increased rental costs, loss of income, and the escalation of ground-based conflict.
- Almost 8 out of 10 people require health assistance, that is 80 percent of the entire population of northwest Syria.
- The lack of funding continues to challenge the sustained provision of healthcare services in northwest Syria. Many health facilities are being forced to downsize operations, close departments, or reduce working hours. More than 20% of functional health facilities in northwest Syria have fully or partially suspended their operations by August 2024. By December 2024, WHO estimates that 230 or nearly half of all functional health facilities in northwest Syria will face full or partial closures at current funding levels.

Northwest Syria Response

- Since January 2024, WHO has undertaken 68 truckloads of cross-border deliveries to northwest Syria containing emergency kits and essential medicines.
- WHO conducted nine missions to northwest Syria in August, including one inter-agency mission with UNOCHA.

Key Figures January to August WHO Cross-border Response
3,255,358 Treatment courses provided
42,880 Trauma cases treatments delivered
601.01 Tonnes of health supplies delivered

Enhancing the cholera emergency response capacity in northwest Syria

- Following the confirmation of three cholera cases in northwest Syria during August 2024, significant efforts were undertaken to enhance the cholera emergency response capacity of partners in the region. The strategic priorities include strengthening coordination among stakeholders, enhancing surveillance systems, reviewing and bolstering case management and infection prevention and control capacities, and ensuring a continuous supply chain and effective logistics management to sustain preparedness and response activities.

WHO works to mitigate the risk of a Mpox outbreak in northwest Syria

- The northwest Syria region is placed at a moderate risk of MPox transmission due to its proximity to affected regions, ongoing conflict, displacement, limited healthcare infrastructure, and low public awareness. There is also very low testing capacity for MPox in northwest Syria. While ACU managed to provide labs with the first batches of PCR tests, WHO is advocating to enhance surveillance by establishing a diagnostic laboratory in northwest Syria and training staff. Efforts will also focus on strengthening healthcare systems in major IDP centers and increasing public awareness

through health campaigns, particularly in high-risk communities. WHO remains vigilant to take further action as required.

WHO initiates a community health worker mapping in northwest Syria

- In an effort to better understand and optimize the role of Community Health Workers (CHWs) in northwest Syria, WHO launched an initiative to assess and map community health workers in northwest Syria. This initiative aims to address key questions, such as whether CHWs are primarily functioning as health educators and nutrition workers within primary healthcare centres or if their role should be centered towards household outreach as family health visitors. The mapping will also examine the dynamics of ownership and responsibility for community health workers, considering the perspectives of both, PHC centre medical officers and community leaders.
- The mapping will be instrumental in determining the most effective positioning of CHWs within the complex healthcare landscape of northwest Syria, ensuring they are optimally placed to address current needs and respond efficiently to future health challenges.

Scabies mass drug administration in IDP camps successfully concluded

- The scabies permethrin-based mass drug administration (MDA) campaign targeting vulnerable populations across 88 IDP camps and distribution sites was successfully concluded. This initiative is crucial in addressing the widespread scabies infestation affecting these communities, particularly in settings where overcrowding and water scarcity conditions exacerbated the issue. The MDA reached over 95,000 individuals across 16,000 households and was implemented in collaboration with 13 health and wash cluster partners and UNICEF with the financial support of European Union Humanitarian Aid.
- The successful conclusion of the MDA marks a significant step forward in controlling the spread of scabies in these vulnerable communities. However, ongoing efforts are necessary to address underlying hygiene and sanitation challenges to prevent future outbreaks. Lessons learned from this campaign will guide future interventions, particularly in improving coordination among implementing partners and adjusting strategies to accommodate fluctuating population sizes in IDP settings.



Community health workers distribute permethrin creams to treat and raise awareness among families living in camps on how to treat and prevent scabies. Photo credit: © Al-Sham Humanitarian Foundation

WHO helps to enhance the prevention of non-communicable diseases in the northwest region

- Non-communicable diseases (NCDs) account for 43 percent of all medical consultations in northwest Syria, according to DHIS2 data. Among the most prevalent NCDs are cardiovascular diseases, diabetes, hypertension, asthma, and chronic respiratory conditions. To reduce prevalence and enhance the clinical management of NCDs in the region, WHO conducted an extensive five-day training on the Package of Essential Non-Communicable Disease Interventions for Primary Health Care with the financial support of USAID's Bureau for Humanitarian Assistance. Thirty healthcare workers participated in the training. The participants are expected to further disseminate this training across northwest Syria in coordination with WHO.



WHO conducts an extensive five-day training on the package of essential NCD interventions for primary health care workers in northwest Syria: © WHO

Capacity building efforts

- WHO completed the Mental Health Gap Action (mhGAP) supervision programme in northwest Syria for 190 mhGAP doctors, 120 nurses, and 40 psychosocial workers.
- WHO delivered substance use and substance use disorders training for humanitarian actors, aiming to enhance support and care for individuals facing substance use problems by discussing substance use disorders as health conditions, learning about the negative consequences of substance use, and developing basic psychosocial skills to strengthen supportive interactions.
- WHO completed two capacity-building sessions
- focused on training healthcare providers on WHO standard treatment guidelines for antibiotics under the antimicrobial resistance programme.
- A consultative scientific workshop to standardize the pharmaceutical list for Northwest Syria was held for 40 doctors from various specialties.
- WHO delivered a workshop to develop a consumption platform for WHO supplies during August with the participation of 50 pharmacists and data entry focal points from 30 organizations.

Useful links

[HeRAMS public hospitals](#)
[HeRAMS public health centres](#)
[WHO-Syria Summary of HRP indicators reported through the 4Ws](#)
[WoS key performance indicators](#)
[MHPSS dashboard](#)

Follow WHO Syria



[Facebook](#)
[Twitter](#)
[Instagram](#)
[YouTube](#)

Contact Us

Dr Iman Shankiti

WHO Syria Representative, a.i.

emwrosyr@who.int

Rosa Crestani

WHO Health Emergencies (WHE)
Team Lead, and Head of Office for
WHO Gaziantep Field Presence

crestanir@who.int