

Whole of Syria (WoS) Monthly Situation Report January – February 2024

Key Figures

January and February

723,800

Treatment courses provided

44,410

Trauma cases delivered

1,090

Healthcare providers trained

498,131

Outpatient consultations provided

246

Tonnes of health supplies delivered

88.3% of sentinel sites submitted weekly disease surveillance reports

97% of disease alerts were responded to within 72 hours

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

Influenza-like illness (ILI)
258,792 (62.48%)

Acute Diarrhea (AD)
94,565 (22.83%)

Acute Jaundice Syndrome (AJS)
6,626 (2.21%)

Severe acute respiratory infection (SARI) 6,626 (1.6%)



WHO is supporting the provision of primary health care services in partnership with local NGO in rural Hama

Highlights

- In January 2024, the World Health Organization launched an appeal for US\$ 1.5 billion to protect the health of the most vulnerable populations in 41 emergencies. The appeal covers the emergencies that require the highest level of response from WHO to reach 87 million people. Among these, WHO's Whole of Syria response requires US\$ 79.8 million to respond to nearly 15 million people in the country who are in need of humanitarian health services. Funding requested for Syria will prioritize direct access for hard-to-reach communities, outbreak prevention and response capacity, and critical investments in healthcare systems to build resilience against future threats.
- 6 February 2024 marked the 1-year anniversary of the devastating earthquakes that hit Türkiye and Syria, resulting in significant destruction, nearly 6,000 deaths, and 13,000 injured individuals. In response, WHO swiftly mobilized support to provide life-saving trauma care to hundreds of casualties. WHO is committed to ensuring the continuity and availability of essential health services. This includes preventing, detecting, and rapidly responding to infectious disease outbreaks, mitigating health consequences like mental health risks, and restoring essential health services in areas and health facilities impacted by earthquakes.

WHO Country Office Syria

Security Situation

- The security situation within WHO Syria's area of operations remained unstable in several hot spots, including Northeast (Al Hasakeh, Ar-Raqqa, and Deir-ez-Zor), Dara'a, Quneitra, Aleppo, Idlib, Latakia, Hama, and Homs.

- In Northeast (NES), frequent attacks have disrupted security and caused damage to infrastructures including power and water supplies, as well as harm to civilians. The scale of the damage surpassed the capacity of the humanitarian community to sustain emergency life-saving services. Due to key infrastructure being offline, the northern Al-Hasakeh governorate was heavily reliant on emergency stop-gap measures to sustain life and livelihood.

Expanded Program on Immunization (EPI)

- EPI outreach/mobile teams conducted vaccination campaigns in all governorates to improve coverage in remote and high-risk areas.
- For the first time, January coverage data was reported through the online platform (DHIS2) developed by WHO.
- At the governorate level, 99 micro-planning workshops were conducted for staff at districts and health facilities.

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

- In collaboration with the Ministry of Health (MoH) and Ministry of Education (MoE), WHO launched the Global School-based Student Health Survey (GSHS) in Syria to address the high rate of preventable deaths among adolescents. A total of 3,125 students from 52 public and private schools under the authority of the MoE participated in the survey. The questionnaire was translated into Arabic and adapted to suit the Syrian context, taking into account cultural sensitivity and accuracy. This inclusivity aimed to collect precise and relevant data that reflects the unique challenges and requirements of Syrian youth.
- WHO is providing ongoing support in the earthquake-affected areas of Aleppo, Hama, and Lattakia through the operation of 6 mobile medical teams (MMTs). These teams are offering integrated primary healthcare, nutrition, and reproductive health services, as well as mental health and psychosocial support (MHPSS) services. During the reporting period, more than 54,551 services were provided to those in need.

Trauma Care

- In February, WHO, in close coordination with MoH, supported two trainings on Mass Casualty Management (MCM) in Aleppo and Damascus governorates with the participation of 60 health professionals. The training provided the participants with the necessary knowledge, skills, and standard operating procedures to respond effectively to mass casualty incidents and save lives. Furthermore, in Damascus, a 2-Day MCM Training of Trainers was conducted with the participation of 16 health professionals from Aleppo and Damascus, delivering the training at the national level after completing the supervision phase and receiving training materials and MCM kits.

Nutrition

- A total of 159,467 children under the age of five were screened for malnutrition across 983 health centers.
- A total of 2,747 cases of acute malnutrition were identified, including 772 severe acute malnutrition (SAM) and 1,761 moderate acute malnutrition cases (MAM).

Mental Health and Psycho-Social Support (MHPSS)

In partnership with 8 local non-governmental organizations (NGOs), WHO provided:	<ul style="list-style-type: none"> - 24,471 different MHPSS services, including recreational activities and vocational training. - 387 mhGAP consultations and specialized mental health services. - 142 MHPSS services were provided online to those requiring emotional and psychological support. - 2,066 beneficiaries received from GBV awareness sessions. - 9,146 beneficiaries received MHPSS awareness sessions. - 42 supervision sessions for 256 health and community workers.
PHC centers, outpatient clinics, and specialized facilities provided:	<ul style="list-style-type: none"> - 18,074 psychological interventions at the PHC level. - 16,826 mhGAP and specialized consultations at the PHC level.

International Health Regulations (IHR)

- On 20 and 21 February, WHO, UNHCR, and MoH conducted a joint mission to evaluate the newly established health facilities and core capacities of SARC and local health officials at two border crossing points - Arida (Tartous) and Kassab (Lattakia). The purpose of the assessment was to strengthen IHR core capacities at these points of entry and ensure preparedness and capacity for response to any health concerns.

Health Systems

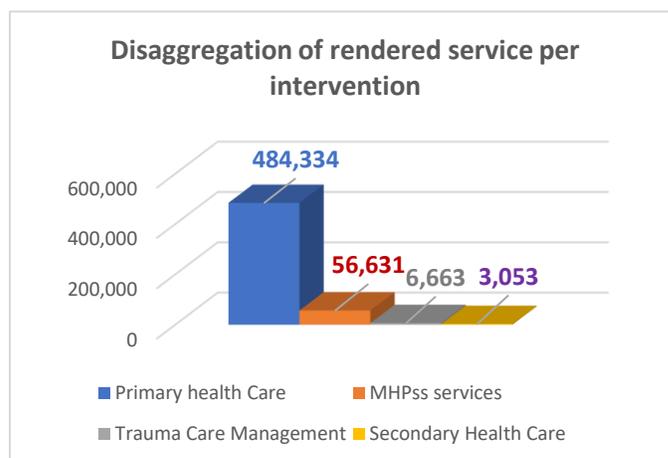
- WHO is working closely with MOH to finalize the costing exercise of the Essential Health Service Package. A national committee was established in this regard, and the proposed date for finalizing the package is May 2024.
- WHO country office contributed to the development of the National Strategy of Midwifery and Nursing, presenting normative guidance in a national stakeholders' workshop in January 2024.

Preventing and Responding to Sexual Misconduct (PRSM)

- The WHO Syria Prevention and Response to Sexual Misconduct (PRSM) team, through its implementing partner, engaged with 831 stakeholders from several governorates including Hama, Homs, Lattakia, Aleppo, Damascus, and Rural Damascus. The team also conducted an awareness-raising session for participants from the Directorate of Health (DoH) and one MMT from Homs.

Community Engagement (NGOs)

- 12 WHO implementing partners operated 18 MMTs, 11 static medical points, and 6 community well-being centers across Rural Damascus, Dara'a, Homs, Al-Hasakeh, Hama, and Aleppo, providing primary, secondary, rehabilitation, and trauma care, as well as MHPSS services to underserved populations.
- A total of 550,681 healthcare services were supported during the reporting period.



National Health Sector Coordination

- The Health Sector contributed to the inter-sector overview of the Regional Dynamics/Impact linking the Gaza Crisis and its fallout to the increasing fragility of the Syrian Situation, February 2024.
- Additionally, contributed to the 2023 Global Health Cluster Annual Report and released in February an annual report for 2023 – [link](#)
- To review and update the Whole of Syria (WoS) 2022 risk profile exercise, WoS health sector in coordination with the Cluster Lead Agencies (CLAs), health sector coordinators across WoS response areas: the UN Humanitarian Country Team response areas (HCT), Northwest Syria (NWS) and Northeast Syria (NES), and other relevant sectors conducted an All-Hazards Risk Assessment exercise between September and December 2023. A series of online consultative meetings were organized to undertake the risk assessment using the STAR tool by reviewing and analyzing the current public health response situation, and through expert contributions from relevant technical experts, health sector teams across all response areas, and other concerned sectors. All relevant documents within and outside the health sectors were collected, compiled, and reviewed. A 7-day online workshop extended over three weeks, with participation from the health sector coordination team across all areas of Syria, WHO technical officers from Syria country office, field office, and EMRO's WHE/CPI team were organized to undertake the risk assessment using WHO's STAR tool. Two online follow-up meetings to revise the results of the risk assessment. A validation workshop was later held in February 2024 in Amman to review and validate findings. The workshop was attended by representatives from Health, WASH, and Nutrition clusters.

Aleppo Hub	<ul style="list-style-type: none"> • WHO supported 12 Primary Health Centers (PHCs) in rural Aleppo and 2 public health facilities in the Jabbal Samaan subdistrict to deliver and/or reach: <ul style="list-style-type: none"> - 19,000 outpatient consultations. - 4,300 beneficiaries with awareness-raising activities. - 11,300 treatment courses to health facilities. - 603 cases referred for specialized treatment. - 173 assistive devices. - 4,200 mental health consultations.
Lattakia Hub	<ul style="list-style-type: none"> • WHO conducted assessment field visits to PHC centers in Lattakia and Tartous to evaluate the implementation of health programs, including EPI, Health Resources and Services Availability Monitoring System (HeRAMS), EWARS, and Nutrition. • 789 health workers from Lattakia and Tartous received training covering different intervention areas including mental health, surveillance, GBV, and PHC. • 3 WHO-supported implementing partners reached 49,558 beneficiaries. Services included primary and secondary health services, MHPSS, physical therapy for people with disabilities, and the distribution of assistive devices.
Homs Hub	<ul style="list-style-type: none"> • WHO provided health services through supported NGOs in Homs and Hama as follows: <ul style="list-style-type: none"> - Lamset Shifa assisted in providing 8,453 medical consultations and 1,549 MHPSS services at the Dar Al Kabera Family Well-being Health Center. - Al Afia Fund provided 1,284 haemodialysis sessions and 493 MHPSS services. - Building Community Association for Development (BCAD) worked in the Sqelbiyah district in Hama and provided 6,530 medical consultations and 4,934 MHPSS services. - Jad Charity operates in the Sqelbiyah district in Hama and provides 1,988 medical consultations, 3,210 MHPSS services, and 5,361 physiotherapy sessions. • WHO supported DoH Hama with 2 MMTs to provide primary health services in 20 communities in the Al-Saan and Al-Hamrat areas of northwest of Hama. 1,584 health services were provided and 1,035 were reached with awareness-raising sessions.
Deir-ez-Zor Hub	<ul style="list-style-type: none"> • A total of 10 pieces of medical equipment, including surgical operation lights and ventilators, were delivered to Al-Assad Hospital and the Deir-ez-Zor Directorate of Health. • In February, a rapid health assessment was conducted in the Kisreh sub-district to identify the health challenges encountered by local communities. The assessment highlighted the interconnectedness between health, agriculture, education, and environmental factors. The key findings indicate an urgent need to address issues related to agricultural sustainability, improve healthcare services, particularly for women, and mitigate environmental risks. • In partnership with 3 NGOs, 57,824 beneficiaries received medical consultations, including primary and secondary healthcare services as well as MHPSS.
Northeast Syria (NES) - Qamishli Hub	<ul style="list-style-type: none"> • WHO distributed three tons of medical supplies to Al Hasakeh DoH and health partners in January 2024. • Additionally, WHO provided secondary and trauma services to 1,465 beneficiaries at Al Hikma Hospital. • During the month of February, water quality monitoring was carried out in 11 camps, 51 shelters (12 in Ar-Raqqa and 39 in Al-Hasakeh), 37 water stations, and 49 boreholes. A total of 759 water samples were tested with 0% bacterial contamination detected, indicating that all samples were safe.

	<ul style="list-style-type: none"> • The EPI/measles response campaigns in four camps - Talae, Tweina, Ayn Khadra, and Tal Aswad - concluded in January 2024. The campaigns supported the efforts to control the outbreak and increase vaccination coverage. Over 1,500 children under the age of five were vaccinated. • The subnational health sector in NES worked to address the gap in assistance with medical referrals by 1) proposing information management initiatives for integrating the existing response mapping across NES camps and beyond; 2) highlighting that the current system is not sustainable and will lead to continued morbidity and mortality; 3) collaborating with the protection sector and shared a variety of deliverables regarding referral support, including important requests and recommendations; and 4) additionally, developing an initial draft of an inter-sector advocacy paper on medical referrals in NES.
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WHO Gaziantep Field Presence for the Cross-Border Response _ Northwest Syria (NWS)

Situation Update

- Since hostilities escalated in October 2023 to February 2024 120 civilians have been killed and some 424 others injured, according to local health authorities. Women and children account for almost half of the injuries and the majority of deaths.
- In January 2024, flash floods affected an estimated 9,743 people while 2,843 people lost their homes, including those in shelters after surviving last year’s devastating earthquakes.
- Over 2 million people in northwest Syria are living in 1,556 IDP sites. 80% of the population living in camps are women and children and over 91,000 IDPs are reported to be persons with disabilities.
- Lack of funding is a major challenge for health services in northwest Syria. Health facilities are being compelled to downsize operations, close down departments, or reduce working hours. Due to the lack of funds, 1,103 end-stage renal disease patients may lose access to life-saving dialysis sessions and be at risk of death.

Northwest Syria Response

- Since January 2024, WHO has undertaken 21 truckloads of cross-border deliveries to northwest Syria containing emergency kits and essential medicines. In 2023, WHO delivered 145 truckloads of emergency kits and essential medicines through cross-border operations from Türkiye to northwest Syria, contained supplies for over 7 million treatments, including essential medicines for communicable and non-communicable diseases, life-saving consumables, ICU medicines, and trauma kits. WHO supported over 40% of health facilities in northwest Syria with medicines.

- On 10 January, WHO conducted the first UN Agency Mission to northwest Syria in 2024. The mission primarily focused on overseeing the incorporation of mental health services into the local health system in the Harem district in Idleb Governorate. Additionally, WHO monitored the stocks of supplies and ensured the implementation of protocols for storage conditions and pharmacy management in three health facilities. Furthermore, WHO cross-verified the measures taken in response to findings from third-party monitoring. Such missions remain crucial for the effectiveness of health response in northwest Syria. In January alone, WHO conducted six successful missions into northwest Syria.

January and February WHO Cross-border Response
401,075 Treatment courses provided
42,880 Trauma cases delivered
139 Tonnes of health supplies delivered

High-level interagency advocacy mission

- On 25 February, WHO Gaziantep Field Presence Office participated in a UN inter-agency mission to northwest Syria led by the UN Deputy Regional Humanitarian Coordinator for the Syria Crisis ahead of the one-year mark of the earthquakes that struck Türkiye and northern Syria in February 2023. The mission included

a visit to a WHO-supported in-patient rehabilitation centre in Azaz district in northwest Syria where 990 medical consultations, 2,200 physiotherapy sessions, and 1,800 psychosocial support sessions were provided following the earthquake. The majority of injuries resulting from the earthquake included spinal cord injuries, amputation, traumatic brain injuries, and orthopedic conditions requiring specialized interventions and long-term rehabilitation. In NWS, more than 23,000 people were provided with rehabilitation services following the earthquake.



WHO transshipment into northwest Syria in February 2024

Training on Influenza-like Illness and Severe Acute Respiratory Infection

- WHO, together with a health partner, conducted a 2-day training on responding to outbreaks of influenza-like illness (ILI) and severe acute respiratory infections (SARI). The training aimed to enhance the detection, confirmation, and case management system for ILI and SARI cases and reduce morbidity and mortality rates. Key actors from different response pillars participated and received electronic quick reference guides. Selected participants will lead cascade training sessions for field officers at their respective duty stations.

Harmonized Health Facility Assessment (HHFA)

- In February, WHO in collaboration with King's College London commenced preparations for a Harmonized Health Facility Assessment (HHFA) to strengthen strategic planning, health system stewardship, and healthcare workforce planning in northwest Syria. This thorough assessment collects crucial information guiding decision-making across three key areas; including validating and enhancing the existing HeRAMS information; establishing and overseeing a 'quality assurance' process with healthcare providers to evaluate the feasibility of expanding new services at

specific health facilities, thereby enhancing geographical coverage and facilitating evidence-based geographical planning of facilities and services.

Strengthening Surveillance of Attacks on Health Care

- On 24 and 25 January, WHO conducted training sessions for 35 focal points on surveillance system for healthcare attacks (SSA) in order to boost the quality, completeness, and timeliness of reporting attacks on healthcare in NWS, as well as to raise awareness about SSA initiative as an advocacy tool to protect health staff and assets.

Capacity building for the use of psychotropic drugs

- WHO launched a capacity-building programme for pharmacists and mental health staff in handling psychotropic drugs. WHO's ultimate goal is enhancing access to secure, accredited, and cost-effective medical psychotic supplies through a comprehensive review of the essential psychotropic medicine list, aligning it with the latest WHO guidelines and models. Additionally, the programme will ensure that partners are thoroughly briefed on the minimum prerequisites outlined in the Standard Treatment Guideline. The first beneficiaries of the training will be the mental health hospital staff.

Prevention of sexual exploitation and abuse

- On 27 February, WHO led a workshop for 20 focal points on prevention of sexual exploitation abuse (PSEA) among health cluster partners in northwest Syria. The workshop aimed to enhance the coordination and implementation of policies for the prevention of sexual exploitation, abuse, and harassment at health facility and hospital levels. WHO trained 300 focal points and 60 trainers in PSEA activities in northwest Syria.

Training on chemical events preparedness and response

- WHO delivered a 5-day training for 30 healthcare professionals on chemical events preparedness and response, equipping participants to navigate and respond effectively to various chemical emergency scenarios. The insights and expertise gleaned from this training session will be cascaded down to frontline health workers operating within northwest Syria.



Practical exercises undertaken during the chemical preparedness and response training

Standardizing pharmaceutical lists

- WHO undertook a collaborative mechanism to establish a standardized pharmaceutical master list in northwest Syria, aiming to streamline access to medicines across health facilities. This involved gathering data from various partners and meticulously refining the lists to eliminate duplications. In addition, WHO recently updated Essential Medicines for 2024 through consultative meetings and feedback from health facilities. This aligns with WHO's global objective of achieving a 60% increase in the utilization of accessible antibiotics by 2024.

Disease prioritization exercise

- A two-day disease prioritization exercise for the efficient detection and response to communicable disease threats and outbreaks was conducted in February with the technical support of WHO EMRO in coordination with partners, World Vision, Assistance Coordination Unit, and Relief International.

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](#)

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