



Key figures

- 167,768**
Treatment courses provided
- 1,250**
Trauma cases delivered
- 1,105**
Healthcare providers trained
- 43,535**
Outpatient consultations provided
- 158.19**
Tonnes of health supplies delivered
- 68 %** of sentinel sites submitted weekly disease surveillance reports
- 70 %** of disease alerts were responded to within 72 hours



A beneficiary receives health services at Al-Qamishli National Hospital

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

Influenza-like illness (ILI)	150,032 (53.41%)
Acute Diarrhea (AD)	111,528 (39.71%)
Leishmania	6,590 (2.35%)
Acute Jaundice Syndrome	4,399 (1.57%)

Highlights

- On 10th July, WHO announced the official handover of key units in Al-Qamishli National Hospital to the Ministry of Health (MoH). The units were rehabilitated as part of the Project for Strengthening Health Care Services, an initiative, supported by the people of Japan. The initiative aims to enhance the resilience and sustainability of health facilities in Syria. The inauguration ceremony was attended by the Syrian Minister of Health, the United Nations Resident Coordinator and Humanitarian Coordinator for Syria, the head of the WHO Al-Qamishli sub-office, and senior Syrian officials. As part of the project, WHO acquired and distributed medical equipment to enhance the hospital’s diagnostic capabilities. This equipment encompasses a computed tomography (CT) scanner, magnetic resonance imaging (MRI) machine, colour Doppler ultrasound scanner, cardiac diagnostic machine, C-arm machine, X-ray unit for the operating theatre, and a mobile digital radiographic X-ray unit. The project also fully restored the hemodialysis unit as previously reported in November 2023.

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 (Al-Hassakeh, Ar-Raqqa, and Deir-ez-Zor), Dara’a, Quneitra, Aleppo, Idlib, 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, and Tartous governorates during July 2024.
- Hostilities continue in rural areas of northeast Syria (NES), causing instability, and insecurity and threatening the safety of both civilian populations and security forces. In Deir-ez-Zor, the security incidents increased in July, and recurring incidents of small arms fire (SAF) occurred on both banks of the Euphrates River, resulting in material damage to property. The ongoing violence raised concerns about the safety of humanitarian workers and the continuity of their operations in the region.

Expanded Program on Immunization (EPI)

- On 21 July, the Syrian MoH, with support from WHO, UNICEF, and Gavi, the Vaccine Alliance, initiated the second round of Big Catch-Up (BCU) vaccination activity across all Syrian governorates. The activity aimed to reach children under the age of five who have either never been vaccinated or are under-vaccinated. During the activity, all routine vaccines and vitamin A supplementation were administered based on children's vaccination status. In this round, a measles campaign was also carried out in 68 districts at the subnational level. The focus was on areas with low routine vaccine coverage, recent measles cases, and/or a high number of children who were susceptible to the virus. During this round, children under the age of five were screened and areas that were missed during the initial BCU activity were covered. Representatives from GAVI, WHO, and UNICEF conducted field visits to Homs and Hama to supervise the implementation of the activity, jointly with MoH.
- WHO organized key workshops, including the quarterly review meeting for EPI teams and the surveillance team, which provided an opportunity to assess progress and strategize for the upcoming months.
- The MoH agreed to incorporate the integrated management of childhood illness (IMCI) and nutrition services into the mobile vaccination teams' outreach activities for the first time this month.

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

- In cooperation with the MoH, and the BASMA Association (an NGO that supports medical services for children with cancer), WHO organized the Global Initiative for Childhood Cancer (GICC) stakeholder workshop on 14-15 July. Approximately 100 health professionals from MoH, WHO, and St. Jude Global Alliance convened to address the challenges of childhood cancer care in Syria. The meeting deliberated on a plan to improve diagnosis, treatment, and care in alignment with WHO's Global Initiative for Childhood Cancer and Cure All Framework. The workshop involved eight participants who engaged in discussions shared their experiences, and offered inspiration – [link](#)
- WHO supported the Ministry of Health in conducting four supervisory visits to smoking cessation clinics in Damascus, Rural Damascus, and Qunitera.
- In coordination with the MoH focal point, WHO completed inputs for the 10th edition (2025) of the WHO Global Tobacco Epidemic Report (GTCR X).
- With WHO support, 25 healthcare workers from the MoH in Damascus received training on elderly home care.
- WHO dispatched lifesaving medicines, including PHC/NCD medicines, to the MoH at the central level, and to the Directorate of Health (DoH) in Hama, Aleppo, Latakia, Al-Hassakeh, and Ar-Raqqa governorates, in addition to 2500 test strips for Glucometer devices delivered to Syrian Arab Red Crescent's (SARC) Aleppo branch.

Secondary Health Care (SHC)

- WHO supported the training of 50 health workers, hospital managers, and infection, prevention, and control (IPC) staff from Ibn Al Nafis Hospital, Cardiovascular Hospital, Surgical Ophthalmology Hospital, and the Surgical Kidney Hospital in Damascus on patient safety and quality assurance criteria.
- WHO dispatched:
 - Lifesaving medicines, IV fluids, and 11,613 hemodialysis sessions for adults to several hospitals in Syria. This includes 483 diagnostic and operational devices delivered to the DoH and the Paediatric Hospital in Aleppo. Additionally, 15 oxygen cylinders (40L) to Al-Assad Hospital in Deir-ez-Zor, 1 portable X-ray unit to Hama National Hospital, 1 Anesthesia unit to the As-Salamiyah National Hospital in Hama, and 5 Fingertip Pulse Oximeter to Kalasa primary health care center in Al-Hassakeh, 4 wheelchairs for children and 1 basic walker for the Physical Rehabilitation Center to the MoH in Damascus.

- IPC supplies, including 57 indicators for sterilization quality control of medical equipment, 290 bottles of disinfectant solutions for surface, utensils, and 300 respirator masks to Al-Assad Hospital in Deir-ez-Zor, camps in Al-Hassakeh including Al-Hol, Roj, Areesha, and Twehina, as well as Mahmoudly Camp in Ar-Raqqa.

Trauma Care

- WHO conducted two 5-day workshops 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 75 health professionals from the Ministry of Health with the skills and knowledge necessary to respond to human-made and natural emergencies. MIMMS is a comprehensive tool that supports a systematic approach to disaster medical management, including the planning, implementation, and evaluation of medical care during emergencies. The training emphasized on-the-scene management and practical skills, providing a standardized approach to medical management and support. MIMMS can also be used to track the performance of health systems during emergencies, helping to ensure access to life-saving health services.
- WHO, in cooperation with the MoH, facilitated 6 training courses on disability and physical rehabilitation in Damascus. A total of 150 health workers, including prosthetics and orthotics technicians, physiotherapists, and physiatrists received training on subjects related to disability.

Nutrition

- A total of 12,768 children under the age of five were screened for malnutrition across 981 health centers.
- A total of 3,232 cases of acute malnutrition were identified, including 671 cases of severe acute malnutrition (SAM) and 2,417 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. - 16,188 Mental Health Gap Action Program (mhGAP) and specialized consultations at the PHC level. - 20,945 basic psychosocial support services and 461 therapeutic psychological interventions. - 539 therapeutic psychological interventions, with 55 cases referred to psychiatrists.
Online MHPSS-services	<ul style="list-style-type: none"> - 425 MHPSS online services were provided for those in need of psychological support.
Engagement through MH experts in the field	<ul style="list-style-type: none"> - 16 field visits. - 44 supervision sessions delivered to health and community workers. - 233 health and community workers supervised. - 4 MHPSS trainings conducted benefiting 73 workers.

Tuberculosis (TB) & HIV

- In cooperation with the MoH, WHO continues TB screening activities in prisons in the governorates of Damascus, Rural Damascus, Homs, and Aleppo. These activities follow two preparation workshops conducted in June and July.
- TB mobile clinics continued to operate in Aleppo, Deir-ez-Zor, and Rural Damascus. A total of 845 beneficiaries attended 26 TB awareness sessions, and 40 suspected cases were tested for TB, resulting in 6 confirmed cases.

Neglected Tropical Diseases (NTD)

- In northeast Syria, no unusual increase in leishmaniasis cases has been detected so far. WHO delivered 6,500 ampoules of meglumine antimoniate (a medicine used to treat leishmaniasis) to the affected areas.
- Additionally, WHO provided the central public health laboratory with 240 rapid tests to facilitate the early detection and treatment of the deadly visceral leishmaniasis disease.

Health Systems Strengthening

- WHO Syria, the WHO Regional Office for the Eastern Mediterranean (EMRO), WHO Headquarters, and experts from the Swiss Tropical and Public Health Institute organized a 2-day workshop to support the Syrian MoH in strengthening

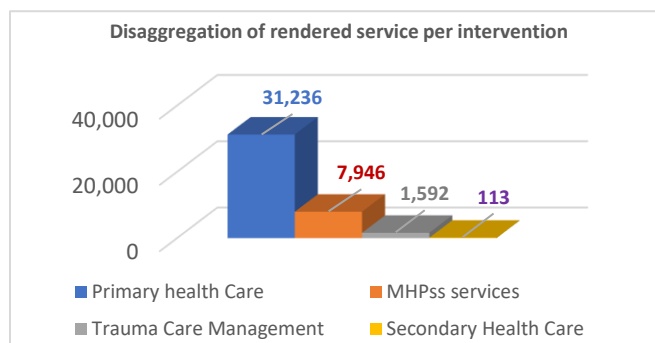
mortality surveillance, data management, and the civil registration and vital statistics (CRVS) system. The workshop was attended by 60 participants and included business process mapping to outline the mortality event and the role of all stakeholders.

Preventing and Responding to Sexual Misconduct (PRS)

- WHO PRS team co-led and facilitated a training of trainers (ToT) for the in-country network (ICN) which had 26 participants from several UN agencies. Additionally, WHO conducted 2 workshops on the 2018 protocol regarding allegations of PRS involving 27 participants from WHO implementing partners, as well as the new and broader WHO policy on addressing sexual misconduct (PASM).
- At the sub-national level:
 - WHO supported sexual exploitation and abuse (SEA) risk mitigation exercise for health partners in northeast Syria.
 - WHO’s sub-national focal point from Aleppo, represented WHO, shared lessons learned and best practices with PRS focal points from different UN agencies from all over Syria at the ICN ToT. Additionally, sub-national focal points from Homs, Lattakia, Aleppo, Deir-ez-Zor, and northeast Syria took part in planning and brainstorming sessions at the ICN ToT.

Community Engagement (NGOs)

- 2 WHO implementing partners in Aleppo operated 3 medical mobile teams (MMTs) providing primary and secondary trauma care, MHPSS services, telemedicine consultations, and conducting awareness activities for underserved populations.
- A total of 40,887 healthcare services were supported during the reporting period.



National Health Sector Coordination

- WHO conducted the health and nutrition sector consultations for ECHO 2025 planning, and shared key points of discussions and presentations.
- The Syrian Humanitarian Fund (SHF) first Standard Allocation was launched with USD 3.5 million for health – out of USD 30 million.
- Health sector prepared draft sector prioritization for USD 2.7 million as part of a planned Reserve Allocation of USD 10 million for winterization.
- WoS CERF Underfunded emergency was initiated with USD 5.5 million for health out of \$20 million USD. 11 under-served sub-districts were prioritized.

WHO Syria Sub-Offices

Aleppo Hub	<ul style="list-style-type: none"> • WHO worked on the implementation of the second round of Big Catch-Up vaccination activity, which began on 21 July 2024. 69 fixed points, 394 mobile teams, and 197 vehicles were mobilized. Additionally, WHO teams visited Ashrafieh, Khaldieh, and Al Sukaari health centers to monitor the process, with a special focus on zero-dose children. The related IEC materials were distributed to WHO implementing partners as part of the community mobilization plan. • WHO has launched three emergency and first aid centers in Arran, Maskanieh, and Al Khafseh aimed at enhancing the referral system in remote areas of Aleppo Governorate. During the reporting period, 15 cases were transferred to Al-Razi and Aleppo University Hospitals. • WHO's response included the following health services: <ul style="list-style-type: none"> ○ 8,000 outpatient consultations
-------------------	---

	<ul style="list-style-type: none"> ○ 16 remote areas and villages received support with basic health care services ○ 5,300 treatment courses ○ 1,200 mental health consultations ○ 36 cases referred for specialized treatment ○ 4,300 people reached with awareness activities on health education and promotion.
Lattakia Hub	<ul style="list-style-type: none"> ● WHO conducted field visits to Al Haffeh and Tishreen Hospitals in Lattakia to assess the development of the health information system and to ensure the installation and functionality of the network-attached storage (NAS) and other provided equipment. ● WHO conducted monitoring visits to 12 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, Alert and Response (EWARS), and nutrition. ● WHO conducted supervisory visits to the vaccination sites to follow up on the implementation of the Big Catch-Up vaccination activity from 21-25 July, in Lattakia Governorate and Tartous. ● WHO transported 1.1 tonnes of medicines, medical supplies, and equipment to public health facilities in Lattakia and Tartous.
Homs Hub	<ul style="list-style-type: none"> ● WHO carried out the second round of the Big Catch-Up vaccination activity in Homs, Hama, and Idleb Governorates. ● On 23 July, WHO took part in a high-level joint mission with WHO, UNICEF, and GAVI, the Vaccine Alliance to visit Al Rastan and Zafrane areas in north rural Homs, and Wadi Al Dahab health center in Homs City. ● The new CT scan machine donated by WHO to Al-Basel Medical Complex in Hama was put in service. 55 patients received service during the reporting period.
Deir-ez-Zor Hub	<ul style="list-style-type: none"> ● In collaboration with the DOH, ongoing awareness activities are being conducted to combat the indiscriminate use of antibiotics, noting that most typhoid cases in Marat are mild, focusing on preventing the use of contaminated water for household needs. ● The second round of Big Catch-Up vaccination activity was successfully carried out in Deir-ez-Zor Governorate from July 21-26, 2024, covering areas from Maadan to Al-Bukamal. The activity targeted high-risk areas and nomadic populations, with coordinated efforts across all health districts. 7 supervisory visits were conducted by WHO focal points to follow up on the process of work and provide the needed support. ● In cooperation with the Early Warning, Alert Response System (EWARS) program, WHO conducted field visits to the reporting sites in Deir-ez-Zor.

Coordination:

- WHO attended the nutrition sector sub-national coordination meeting at the Directorate of Health and the NES camps coordination meeting conducted in Washokani camp and shared WHO updates.

EPI:

- In cooperation with the Directorate of Health, a comprehensive plan was developed to guide the implementation of the second Big Catch-Up (BCU) activity.
- In Ar-Raqqa Governorate, the second round of the BCU vaccination activity was successfully carried out over five working days across all health districts, except for Tal Abiad.
- On 14 July, the WHO team in Qamishli met with UNICEF teams to discuss cross-cutting issues, especially EPI activities and shared the main outcomes of the initial BCU vaccination activity. A subsequent meeting was held to prepare for the second round of the vaccination activity and to outline the related RCCE activities.
- The WHO team conducted a mission to the Ar-Raqqa city and Debsi Faraj area, met the DoH, and participated in the regular Ar-Raqqa sub-national health sector meeting.

Camps:

- WHO provided technical support to Al-Hol camp administrations to facilitate emergency referrals to area hospitals and conducted an assessment of trauma management needs in the field hospitals of Al-Hol camp.

Other health response activities:

- WHO provided technical support to address increased cases of substance use disorders in the child protection area at the Areesha camp, exploring evidence-based interventions, needs assessment, referral mechanisms, management and rehabilitation strategies, prevention, promotion, and capacity building.
- WHO developed a Risk Communication Community Engagement plan for the second round of the Big Catch-Up Vaccination activity including, small community meetings, and capacity building for community and health workers at the Directorate of Health and Al Hol camp level.
- In July, WHO distributed 10.2 tons of medical supplies to health facilities and partners across NES as follows:
 - Leishmaniasis: Distributed 6,500 ampoules of Glucantime and 810 LLINs to health facilities in AL-Hasakeh, Manbij, Kobani, and Ar-Raqqa.
 - Scabies: Provided scabies treatment to health partners in the camps of Al Hol, Areasha, Mahmodly, Twehina, Roj, Newroz, and other facilities in Al-Hasakeh and Deir ez-Zor.
 - Cholera Preparedness: As part of our preparedness plan for potential cholera outbreaks, WHO distributed 650,000 chlorine tablets, medical kits, and medicines to ensure effective cholera response capabilities.
 - Psychotropic medications: Supplied additional medications to Al-Hasakeh, Aleppo, and Ar-Raqqa clinics.
 - Nutrition: Supplied nutrition scales to the Department of Health in Al-Hasakeh and Qamishli National Hospital.
- WHO conducted water quality monitoring in 11 camps, 49 shelters, 37 water stations, and 5 boreholes. A total of 2,806 water samples were tested, 40 (1.4%) of which showed bacterial contamination.

Sub-national health sector coordination in Qamishli/NES:

- The Health Sector prepared a draft of the health sector briefing for the European Civil Protection and Humanitarian Aid Operations (ECHO) sector consultations for 2025.

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.
- On 1 July, demonstrations characterized by violence and road blockades occurred in Northern Aleppo, primarily in the towns of Azaz, Al-Bab, and Al Ra’ee, following unrest in the region.
- On July 2, disruptions caused fuel shortages, internet outages, limited hospital operations, closure of financial services, and temporary closure of border crossings closures including Bab Al-Hawa, Bab Al-Salam, and Al Ra’ee. 30 NGOs temporarily suspended humanitarian activities in Afrin for three days.
- The UN resumed its operations by July. All three border crossings were operational by July 9.
- The decline in funding continues to challenge northwest’s sustained provision of healthcare services. Many health facilities are being forced to downsize operations, close departments, or reduce working hours.
- By the end of July, 112 health facilities, including 34 hospitals, had fully or partially suspended operations. At current funding levels, an estimated 230, or nearly half of all functional health facilities are projected to face full or partial closures by December 2024.
- Due to a lack of funds, water and hygiene services were suspended in 188 camps in Idleb and 190 camps in northern Aleppo. As temperatures continue to rise, the health impact is significant with a noticeable increase in cases of acute diarrhea observed since June, exceeding the usual rate for the past four years. In July, nearly, 2 000 cases of dehydration were reported from Afrin district of northern Aleppo alone.

Northwest Syria Response

- Since January 2024, WHO has delivered 65 truckloads of cross-border deliveries to northwest Syria. The Cargo contained emergency kits and essential medicines.
- WHO conducted six missions to northwest Syria in July, including three inter-agency missions with UNOCHA.

Key Figures January to July 2024 WHO Cross-border Response	
3,229,086	Treatment courses provided
42,880	Trauma cases treatments delivered
541.61	Tonnes of health supplies delivered

Large-scale scabies response underway in northwest Syria targeting 71 camps and 7 communities

- WHO carried out a comprehensive scabies community survey exercise in northwest Syria in December 2023. This survey revealed a high prevalence of scabies, surpassing the 10% community transmission threshold set by WHO. Higher rates of scabies were reported in camps. People living in camps were found to be 7 times more likely to contract scabies than people living in the wider community. Children, the elderly living in resource-poor areas, people with compromised resource-poor areas, and people with compromised immune systems are at higher risk of infection.
- On 16 July, WHO collaborated with the United Nations Children’s Fund (UNICEF) and Health and the Water, Sanitation, and Hygiene (WASH) Cluster partners to launch mass drug administration based on permethrin.
- The campaign lasted for 21 days and targeted more than 180,000 people in 71 camps and 7 communities. Partners also distributed UNICEF-procured hygiene kits and trained community workers and hygiene promoters in how to treat scabies and prevent their further spread. This large-scale response to scabies has been made possible thanks to financial support from European Union Humanitarian Aid.



Community health workers 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 health referral system in NWS

- In July, WHO provided funding to enhance the health referral system in northwest Syria by providing eight ambulances. This support helps to significantly improve the system's ability to respond to emergency cases and facilitates access to health services for those in need.
- WHO is also collaborating with Toronto University to optimize the distribution of ambulances in northwest Syria, ensuring that available resources effectively cover the entire region.

Suicide prevention campaign launched

- In July, WHO, in partnership with Al Ameen Organization, launched a suicide prevention campaign. The campaign aims to reduce suicide and suicidal behaviors in northwest Syria by increasing awareness, promoting understanding of risk factors, encouraging help-seeking behavior, and advocating for mental health policies. In addition, the campaign focused on building the capacity and equipping media influencers, health staff, teachers, parents of school children, and community leaders to identify at-risk individuals and provide immediate support.

Capacity building efforts

- WHO conducted a simulation exercise to provide a comprehensive assessment of cholera response capabilities in northwest Syria.
- WHO, in partnership with IOM and Hope Reveal Organization, conducted a 2-day resilience and stress management training for 15 managers and investigators of sexual exploitation and abuse incidents from the PRS Network in northwest Syria, aimed at enhancing participants' resilience and equipping them with skills to manage stress, and provide better support to those in need of these services.
- WHO and health partners conducted training sessions

for pharmacists, pharmacy technicians, and warehouse officers to cover existing gaps in the region. The goal was to ensure best practices in stock management and quality care in pharmacies at health facilities.

Assessing the impact of funding shortfalls

- On 23 July, a UN delegation led by OCHA, consisting of WHO and IOM, crossed to northern Aleppo to evaluate the effects of funding shortfalls. The agencies met with families residing in a dignified shelter camp in Afrin, and health workers and patients at a maternity hospital in Raju. Food and sanitation support to the camp has been discontinued due to lack of resources, and the hospital, which serves nearly 50 000 people, only has funding secured until the end of July. Despite these challenges, a common message was shared with the UN delegation: "Above all else, the people in northwest Syria want peace, jobs, and livelihood opportunities."



A midwife tends to a newborn at Raju Maternal Hospital, which is at risk of suspending operations without increased and sustained funding. Photo: OCHA/Ali Haj Suleiman

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