

### Key Figures

#### March

**281,836**

Treatment courses provided

**1,250**

Trauma cases delivered

**1,540**

Healthcare providers trained

**152,789**

Outpatient consultations provided

**475**

Tonnes of health supplies delivered

**95% of sentinel sites** submitted weekly disease surveillance reports

**98%** of disease alerts were responded to within 72 hours



*WHO marks 13 years of the Syrian crisis with renewed commitment and support*

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

Influenza-like illness (ILI)

**335,548 (75%)**

Acute Diarrhea (AD)

**90,787 (20%)**

Leishmania

**8,358 (2%)**

Acute Jaundice Syndrome (AJS)

**5,373 (1%)**

### Highlights

- After entering its 14th year, the Syrian conflict has significantly impacted the healthcare system, with 62% of Syria's hospitals and 53% of its primary healthcare centers fully functional, while 38% of Syria's hospitals and 47% of its primary healthcare centers are either partially or non-functional.
- Since the beginning of the crisis, WHO has delivered nearly 80 million medical treatments, supported over 11 million medical procedures and 3.3 million trauma consultations, and provided training to approximately 178,000 health professionals. WHO will continue to carry out life-saving operations, focusing on the most vulnerable, while also supporting the country's long-term efforts to rehabilitate and rebuild the health system.

## 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 Hassakeh, Ar-Raqqa, and Deir-ez-Zor), Dara'a, Quneitra, Aleppo, Idleb, Latakia, Hama, and Homs.

- Hostilities persist in rural areas of Northeast Syria (NES), contributing to instability and posing a security threat to civilian populations and security forces. In particular, on 26 March 2024, several locations in Al Mayadin and Abu Kamal cities, Ayyash village, and Al Qosour neighbourhood in Deir-ez-Zor City were targeted, resulting in several civilian casualties. Among the casualties was Emad Shehab, a WHO Engineer and WASH focal point, who lost his life when his accommodation was struck during a series of airstrikes across the governorate.

### Expanded Program on Immunization (EPI)

- EPI outreach/mobile teams conducted vaccination campaigns in all governorates to improve coverage in remote and high-risk areas.
- An EPI review and the data quality assessment fieldwork were conducted, with support of WHO’s Eastern Mediterranean Regional Office (EMRO), followed by a debriefing workshop with MoH to present the results.
- WHO began preparation for the Big Catch-Up immunization campaign, including the planning of several workshops and meetings with MoH to update micro-plans.

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

- WHO, in collaboration with MoH and Ministry of Education (MoE) completed data collection for the global students' health survey, involving 2,941 students aged 13-17 in 55 schools across all governorates, focusing on the behavioural risk factors.
- WHO, together with MoH and BASMA Association focal points, facilitated a 2-day regional workshop on the Global Initiative on Childhood Cancer (GICC) between the 3rd and 5th of March in Syria to improve childhood care and survival outcomes based on WHO care guidelines.

### Trauma Care

- WHO conducted several meetings with UNOPS to coordinate the joint project to rehabilitate and equip Homs Grand Hospital where UNOPS is responsible for the rehabilitation work and WHO is responsible for procuring and installing the whole list of needed equipment. These productive meetings were followed by a technical joint meeting in Homs, including the Directorate of Health (DoH), and an agreement was reached on the final list of equipment based on the approved engineering design. WHO already started working with MoH on the specifications of the equipment and will begin the procurement process.

### Nutrition

- A total of 74,460 children under the age of five were screened for malnutrition across 983 primary healthcare centers.
- A total of 1,433 cases of acute malnutrition were identified, including 315 cases of severe acute malnutrition (SAM) and 1,118 moderate acute malnutrition cases (MAM).

### Mental Health and Psycho-Social Support (MHPSS)

In partnership with 3 local non-governmental organizations (NGOs):	<ul style="list-style-type: none"> <li>- 7,705 different MHPSS services were provided, including recreational activities and vocational training.</li> <li>- 158 beneficiaries received from GBV awareness sessions.</li> <li>- 207 beneficiaries received MHPSS awareness sessions.</li> </ul>
Primary Health Care (PHC) centers, outpatient clinics, and specialized facilities provided:	<ul style="list-style-type: none"> <li>- 22,301 psychological interventions at the primary health care (PHC) level.</li> <li>- 18,639 mhGAP and specialized consultations at the PHC level.</li> </ul>
In partnership with the Ministry of Education (MoE):	<ul style="list-style-type: none"> <li>- 183,720 students received MHPSS awareness sessions</li> <li>- 8,909 administrators and teachers received MHPSS awareness sessions</li> </ul>

## Tuberculosis (TB) & HIV

- WHO supported a one-day workshop in Damascus bringing together 25 decision-makers to discuss how stigma and discrimination towards HIV and individuals affected by HIV significantly hinder national HIV response. The aim was to develop national policies in the fight against AIDS and to facilitate the exchange of knowledge and experiences.
- WHO conducted 8 awareness sessions in Damascus and Rural Damascus, targeting 200 youths, focusing on stigma and discrimination, HIV prevention and transmission, and the role of the youth in sharing accurate information on HIV.
- TB mobile clinics continued to operate in Aleppo, Deir-ez-Zor, and Rural Damascus. 428 beneficiaries attended 22 TB awareness sessions and 69 suspected cases were tested for TB, with 8 confirmed.

## Health Systems Strengthening

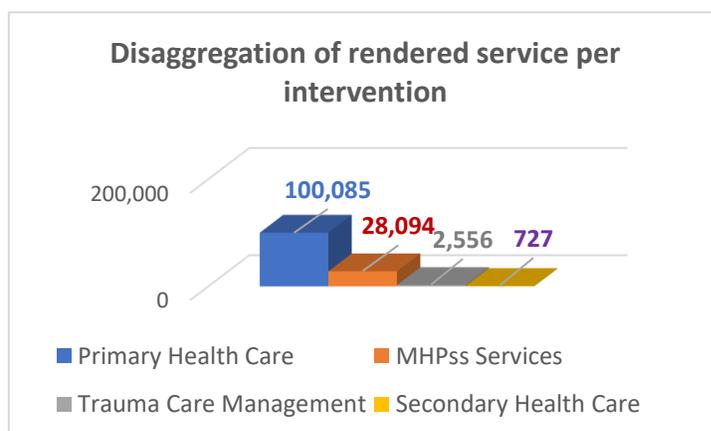
- In collaboration with MoH and other UN partners, WHO has completed the country report as part of the WHO EMRO initiative focusing on promoting the health and well-being of refugees, migrants, and other displaced groups in the region.
- WHO, together with UNFPA, presented reproductive health indicators at the annual meeting of the Reproductive Health Working Group (RHWG), attended by 40 participants.

## Preventing and Responding to Sexual Misconduct (PRS)

- 687 beneficiaries received training, sensitization, and awareness sessions on prevention and response to sexual misconduct (PRS).
- WHO hosted a mission from the EMRO to share best practices, and strengthen links at different levels, discuss solutions with MoH counterparts to enhance the PRS policies and institutions.
- The PRS team conducted a field visit to Aleppo Governorate to strengthen coordination at the sub-national level and deliver awareness sessions to 137 health and community workers from MoH and local NGOs.

## Community Engagement (NGOs)

- 5 WHO implementing partners, operated 9 MMTs, 3 static medical points, and 1 community well-being center across Damascus, Hama, Idleb, Aleppo, and Latakia, providing primary, secondary, and trauma care, as well as MHPSS services to underserved populations.
- During this reporting period, a total of 131,462 healthcare services were supported.



## National Health Sector Coordination

- Health Sector collaborated on developing strategic priorities for the anticipated Syria Humanitarian Fund (SHF) allocation. Additionally, the health sector contributed to the first draft of the Health Sector prioritization, which was prepared for review and consideration. The planned SHF's first standard allocation stands at 25 million USD.
- In coordination with the nutrition sector, the health sector developed key integrated priorities for the expected Central Emergency Response Fund (CERF) allocation for underfunded emergencies (UFE).
- In completing its review of the 2024-2025 Humanitarian Response Plan (HRP) projects, 56 health projects in the UN Humanitarian Country Team area of operations were approved for 92 million USD (this does not include WoS-level projects).

<b>Aleppo Hub</b>	<ul style="list-style-type: none"> <li>• WHO supported an urgent request to supply 3,000 bags of sodium chloride, totaling 3,675 cubic meters, to the DoH.</li> <li>• WHO supported 12 PHC centers in rural Aleppo and 2 public health facilities in the Jabbal Samaan subdistrict to deliver and/or reach:             <ul style="list-style-type: none"> <li>- 22,000 outpatient consultations.</li> <li>- 1,300 beneficiaries with awareness-raising activities.</li> <li>- 1,300 treatment courses to health facilities.</li> <li>- 63 cases referred for specialized treatment.</li> <li>- 83 assistive devices.</li> <li>- 1,200 mental health consultations.</li> </ul> </li> </ul>
<b>Lattakia Hub</b>	<ul style="list-style-type: none"> <li>• WHO conducted assessment field visits to Al Haffeh National Hospital and Tishreen University Hospital to evaluate the implementation of the Health Information Management Systems (HIMS).</li> <li>• 125 health workers from Lattakia and Tartous received training covering various intervention areas, including mental health, surveillance, and primary healthcare.</li> <li>• 2 WHO-supported implementing partners reached 2,500 beneficiaries. Services included primary and secondary health services, MHPSS, physical therapy for people with disabilities, and the distribution of assistive devices.</li> </ul>
<b>Homs Hub</b>	<ul style="list-style-type: none"> <li>• Al Bir Fund Association assisted in providing 4298 MHPSS services, and 2,133 medical consultations, and reached 2,650 beneficiaries by raising awareness sessions in Hama and Idleb.</li> <li>• WHO supported DoH Hama with 2 MMTs to provide primary health services in 20 communities in the Al-Saan and Al-Hamrat areas in the northwest of Hama. 3,289 health services were provided and 4,830 were reached with awareness-raising sessions.</li> </ul>
<b>Deir-ez-Zor Hub</b>	<ul style="list-style-type: none"> <li>• In response to the rising number of patients with waterborne diseases, WHO provided 15 cholera kits to Deir-ez-Zor DoH for treatment support. Additionally, surveillance activities were strengthened within 161 reporting centers established across the governorate to enhance the monitoring efforts. These initiatives aim to reduce the health risks of waterborne diseases.</li> <li>• WHO provided medication for 7000 lice and scabies cases, along with educational materials for DoH and the Department of Education to tackle the increased number of cases.</li> <li>• WHO delivered 15 kits of medications to Deir-ez-Zor DoH and Al-Assad Hospital to strengthen their capacities in managing diabetic cases, due to the increasing number of registered diabetes cases at the specialized diabetes clinic.</li> <li>• Several coordination meetings were held with the management of Al-Assad Hospital to prepare the designated area for installing an oxygen generator station. Field visits were conducted to ensure equipment readiness according to the schedule.</li> </ul>
<b>Northeast Syria (NES) – Qamishli Hub</b>	<ul style="list-style-type: none"> <li>• WHO, together with UNHCR, held a coordination meeting to address the rising number of scabies cases in the camps using a cross-sectoral approach.</li> <li>• On 28 March, WHO organized the NES MHPSS technical working group (TWG) meeting, with the participation of MHPSS stakeholders from different sectors, effectively guiding the group's discussions, fostering collaboration, and ensuring the achievement of joint objectives.</li> <li>• WHO distributed 33 tons of medical supplies to Al Hassakeh DoH and health partners.</li> </ul>

- Additionally, WHO provided secondary and trauma services to 672 beneficiaries at Al Hikma Hospital.
- Water quality monitoring was carried out in 11 camps, 51 shelters (12 in Ar-Raqqa and 39 in Al-Hassakeh), 37 water stations, and 49 boreholes. A total of 967 water samples were tested, revealing a 0.82% bacterial contamination rate.
- In close collaboration with the DoH, the preparations for the Big Catch-Up Immunization campaign were planned jointly.
- In Ar-Raqqa, the routine vaccination activities were implemented according to the annual plan in all established health facilities. In addition, mobile teams conducted 5 days of activities for routine vaccination.

**Sub National Health Sector Coordination Qamishli/NES:**

- Health partners met in Al-Hol Camp to address the suspension of the Al Hikmah contract and developed a plan to mitigate the impact.
- Health Sector also developed an update on all undertaken advocacy efforts to highlight the criticality of urgent support for health referral capacities in north-east Syria: external referrals from Al Hol and Roj camps.
- Developed and proposed a list of trackable actions as part of Al Hol camp's medium-term strategy for 2024.
- In coordination with WHO, UNICEF, WASH sector, and WoS Health Sector, coordinated response around reported water contamination across NES.

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

**Situation Update**

- According to the 2024 Humanitarian Needs Overview (HNO) for Syria released in March 2024, an estimated 4.2 million people in northwest Syria (NWS) require humanitarian assistance, with the majority of them being women and children. Approximately 3.96 million, or an estimated 80 percent of the total population, urgently need health assistance.
- The security situation in northwest Syria has remained unstable with an increase in hostilities during the month of March 2024. Since 5 October 2023, over 450 civilians were injured and more than 110 killed by the escalation in hostilities. An estimated 46% of casualties are women and children.
- Lack of funding remains a major challenge for health services in northwest Syria. By the end of March, seventy-seven healthcare facilities partially or fully suspended their operations. Without additional funding, many more health facilities will cease to operate in the coming months.
- UN-negotiated permissions to utilize the three border crossing points into the northwest were extended by the government of Syria, allowing direct access to 4.2 million people in need in Idleb and northern Aleppo. On average, 2.5 million people were reached monthly last

year with cross-border assistance and protection services.

**Northwest Syria Response**

- Since January 2024, WHO has undertaken 25 truckloads of emergency kits and essential medicines to northwest Syria through cross-border missions.
- In March, WHO cross-border missions continued into northwest Syria with an average of two missions per week.



*Transshipment of medical supplies to northwest Syria with funding from Kuwait*

<b>Key Figures</b> January to March WHO Cross-Border Response
<b>1,086,982</b> Treatment courses provided
<b>42,880</b> Trauma cases treatments delivered
<b>179</b> Tones of health supplies delivered

### Tailor-made training for dialysis centres in NWS

- In an effort to improve the quality of dialysis services, WHO launched a training programme specifically tailored for dialysis centers in the sub-districts of Azaz, Idleb City, and Sarmada. The program focused on practicing and enhancing infection prevention and control measures, as well as updating protocols for emergency situations to ensure quality care. This approach allowed all 17 operational dialysis centers in northwest Syria to access the training without interrupting their ongoing service provision. The training programme reached 101 medical and non-medical staff, including doctors, dialysis technicians, and nurses, covering topics related to infection prevention and control practices (IPC) practices, as well as medical care quality.

### Burn care training to reach thousands of people at higher risk of injury

- The high number of burn injuries in northwest Syria is closely associated with the poor and overcrowded living conditions, as well as the use of unsafe cooking and heating fuel. The risk of burns is especially high in tents, which are highly flammable. Unfortunately, the capacity to manage burn injuries effectively remains critically low. In March, WHO supported a 1-day basic burns care training and a 4-day advanced version in Atmeh, northwest Syria to address this concern. A total of 54 interdisciplinary healthcare staff were enrolled in the trainings to enhance their knowledge and technical

skills in specialized burns care. Training included several practical exercises, plus theoretical knowledge on a broad range of topics such as nursing care, surgical management, nutrition, pain management, rehabilitation, and psychosocial support.



*WHO staff facilitate training on burn care management in Atmeh, Idleb, northwest Syria*

### Updating service mappings

- WHO updated the service mapping of the ambulance system and rehabilitation, prosthetics, and orthotics centers in northwest Syria. The service mapping of the ambulance system will provide a comprehensive understanding of the current distribution of ambulances and coverage gaps. The mapping of rehabilitation services will provide a comprehensive understanding of the current service landscape and enhance coordination among partners and stakeholders. In addition, WHO is conducting a training needs assessment for physiotherapists and physical rehabilitation staff working in the region. This assessment will help to identify existing capacity gaps thereby developing targeted training to improve service quality.

## 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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