

WHO Syria estimates it needs 18 million USD to respond to the immediate needs. https://www.who.int/publications/m/item/who-flash-appeal--earthquake-response-in-t-rkiye-and-whole-of-syria

WHO's initial response to the earthquake in the Syrian Arab Republic has been made possible thanks to the generous contributions from the Organisation's Contingency Fund for Emergencies (CFE) as well as the US Bureau of Humanitarian Assistance. WHO wishes to thank all donors who have contributed to the CFE, including USA, Germany, Norway, and Canada, among many others.

# **HEALTH CONCERNS**

- AFTERCARE FOR TRAUMATIC INJURIES, PSYCHOSOCIAL SUPPORT, and NCD CARE – including MEDICATIONS, are immediate health needs.
- CONTINUITY OF ESSENTIAL HEALTH SERVICES is critical to prevent excess mortality and morbidity.
- More than 91 HEALTH FACILITIES are reportedly damaged so far, including at least 7 hospitals, with assessments ongoing.
- 3 PRE-EXISTING OUTBREAKS IN AFFECTED AREAS:
  - Cholera (all affected governorates, especially Aleppo)
  - o Hepatitis A outbreak Latakia
  - Measles (northeast Syria)

# HIGHLIGHTS

- → A 7.7 magnitude earthquake struck southern Türkiye and Syria in the early morning of 6 February 2023. Thousands of aftershocks occurred in the days that followed.
- → In Syria, Latakia, Hama and Aleppo governorates are the worst affected areas, with further impact reported in Tartous and Deir ez-Zour.
- → As of 17:00, 15 February, 1 414 deaths and 2 357 injuries have been recorded in Aleppo, Latakia, Hama, and Tartous governorates, with the death toll expected to rise.
- → More than 300 buildings were damaged and rendered unhabitable
- → By 14 February, two flights had landed in Damascus carrying between them over 70 tons of medical supplies and equipment.
- → Sub-national Trauma Working Group held in Aleppo to discuss lessons learned and next steps.

### SITUATION UPDATE



WHO visits to IDP sites in Aleppo. Credit WHO

In the early morning of 6 February 2023, a magnitude 7.7 earthquake struck southern Türkiye near the northern border of Syria. The earthquake was followed 11 minutes later by a magnitude 6.7 aftershock. Many aftershocks continue to be felt across the region. Whilst the impact is still being assessed, initial reports evidence significant damage in the areas of southern Türkiye and northern Syria.

In response, the Syrian Ministry of Health (MoH) activated its Emergency Operations Centre (EOC) on 6 February 2023 under the chairmanship of the Deputy Minister. In all affected governorates, public and private health facilities and medical convoys have been repurposed to support the response and are being managed by the National Ministry of Health (MoH) and

Directorates of Health (DoH) at governorate level. Support has been directed to affected areas, with medical convoys, including 28 ambulances and 7 mobile clinics, deployed from the health directorates of Damascus, Rural Damascus, Quneitra, Homs, Tartous, Aleppo and Latakia.

As of 15 February 2023, 2,357 injuries and 1,414 deaths have been recorded in the governorates of Aleppo, Latakia, Hama, and Tartous, with additional reports expected as search and rescue efforts continue.

Due to damaged buildings and the fear of returning to their homes, hundreds of thousands of people have been displaced and sheltering in vehicles, public parks, mosques, schools, and other community centres. More than 250 collective shelters have been set up in Aleppo, Hama, Tartous and Latakia., Internally displaced persons in affected governorates are reflected below as per UNOCHA figures from 14 February:

	Aleppo	Hama	Latakia	Tartous
Displaced (all)	183,000 indiv	250 families	Not provided	443 households from inside Tartous 318 households from outside Tartous
IDP in shelters	104,047 indiv	174 families	173,065 indiv	Not Provided

Priority response actions include distribution of life-saving and essential supplies and services such as health care, water and hygiene, shelter, and protection. Scabies, lice and acute watery diarrhoea already being reported. Currently, a joint needs assessment is being conducted to better understand the full extent of the impact and needs. On 7 February 2023, WHO graded this event at the highest level of Grade 3.

### Impact

#### Latakia and Tartous

Governorate	Deaths	Injuries
Latakia	638	958
Tartous	0	48

- At least 105 buildings collapsed, 1500 are partially destroyed, and 16 schools are partially damaged.
- Displaced people are currently housed in collective shelters, nearby hotels, villages and governorates.
- 30,000 individuals (6,000 households) are accommodated in 50 collective shelters.
- Majority of trauma patients treated in Tishreen University Hospital, Latakia National Hospital and Jableh Hospital.
- Health concerns in collective shelters: NCDs, dermal infections, eye infections, respiratory infections, lice, scabies, among others.



WHO in the heart of shelter assessment and support in Latakia. Credit WHO

#### Aleppo

Deaths	Injuries
451	714

- Aleppo population in need: 1.3M (intersectoral).
- Trauma cases admitted: 41 cases at Al Razi Hospital, 5 in ICU; 43 cases at Aleppo University Hospital, 6 in ICU.
- Earthquake response shifted to massive displacement response with more than 200,000 IDPs currently estimated.
- 175 shelters (mosques, churches, schools, sports stadiums) are currently operational.
- Challenges include insufficient shelter solutions and transient populations at existing shelters.



Subnational trauma working group held in Aleppo. Credit: WHO

#### Hama:

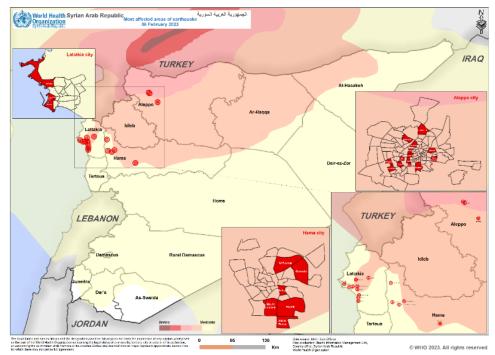
Deaths	Injuries
51	75

- Homs has begun receiving IDPs: 429 families from Hama, in addition to 129 families from Aleppo.
- Hama reported damages (total and partial) include: 7,150 houses, 265 schools, 131 water tanks (12 totally), 116 government buildings, as well as 500 evacuated houses affecting 2,600 families.
- An assessment conducted by DOH showed that 59 PHCs were damaged, 3 hospitals were affected (Sqelbiya and Salamiya General Hospitals and Hama National Hospital).

#### Deir ez-Zour

Deaths	Injuries
0	1

- Families have been evacuated from 16 buildings while 568 households are displaced from damaged homes.
- Collective shelter currently lacks heating facilities. IDPs are living with community members and families.
- Intersectoral UNOCHA team has requested Governor's Office to conduct intersectoral assessments for estimation of damage of earthquake.
- Governor's Office also requested that mobile medical teams be deployed to support those sleeping in public spaces, particularly outdoors.
- Risk communications and MHPSS support have been identified as highly needed.



# **Public Health Impact**

- Immediately following the earthquake, trauma-related deaths and injuries from collapsed building and debris were reported.
- Within the affected areas, the number of trauma and injury cases has declined following a tremendous surge in the immediate aftermath of the earthquake. Additional needs related to plastic and orthopaedic surgery, as well as provision of physical rehabilitation, prosthetics and assistive devices are expected.
- Response efforts are now moving from response and recovery to a focus on serving the needs of IDPs.
- Prior to the earthquake, 1120 public health facilities were included in quarterly HeRAMS, of which only 28 public hospitals and 540 primary health centres (PHCs) were fully functional and 15 public health hospitals and 80 PHCs were partially functional. Assessments are ongoing to determine the extent of the damage on facilities, with at least 91 facilities reportedly damaged, including at least 7 hospitals (4-Latakia, 3-Hama).
- Persons exposed to harsh weather because of displacement and/or damage to their accommodation are at high risk for hypothermia. With thousands of people displaced and cold weather conditions, shelter needs are top priority at this time.
- Due to crowded conditions in existing shelters, there is heightened risk of outbreaks and disease transmission, including spread of respiratory illness such as COVID-19 and influenza, as well as those related to pre-existing outbreaks of cholera, hepatitis A and measles.
- Mobile teams are receiving frequent requests from displaced and affected persons to supply and/or replace their non-communicable disease (NCD) medications as many have lost their monthly regimen during the earthquake, and local primary health care centres (PHCs) are struggling to meet the surge in demand.
- Mental health support is a priority need due to the extreme trauma and stress resulting from the earthquake on affected populations, particularly children and the response workforce.
- Significant damage to the water networks has been reported to above-ground infrastructure with dozens of tanks reportedly collapsed or fully damaged; WASH assessments continue. Turbidity, contamination, and reduced functionality have been reported. WHO anticipates increased risk of waterborne illness, including exacerbation of pre-existing cholera and hepatitis A outbreaks.

# **RESPONSE PILLARS**

# Leadership and Coordination



WHO visits mobile medical teams operating in Latakia Credit: WHO

- The emergency health response is being led by the MoH and DoH at governorate level, and the Emergency Operations Center has been fully activated at the MoH.
- On 7 February, WHO co-chaired the first humanitarian health sector meeting within 24 hours of the earthquake and is co-leading the health sector with the MoH. Regular response coordination meetings are ongoing at national level, in Aleppo, Hama and Latakia, and WHO took part in two inter-sector field missions in Latakia to the collective shelters.
- On 11 February, the Director General of WHO arrived in Aleppo, together with a team of experts, on a charter flight delivering 34.1 M tons of medical supplies and equipment.
- On 14 February, the IASC declared a Humanitarian System-Wide

Emergency Activation for 6 months. WHO has activated a full-scale Incident Management (IM) response involving all pillars under the global Emergency Response Framework and is mobilizing the necessary operational capacities and resources to bolster earthquake response.

• A media briefing with WHO leadership took place on 12 February 2023 and can be accessed at: <u>https://twitter.com/i/broadcasts/1zqKVPWArNmJB</u>

# Information Management and Surveillance

- WHO is closely coordinating with surveillance teams and rapid response teams to ensure ongoing surveillance and detection, as well as readiness for any surge in infectious disease cases, especially in affected areas.
- EWARS system is functioning at the affected areas for early detection of threats related to infectious diseases with a total of 237 reporting sites at the affected sub-districts. During week 6, the following were reported:

- Aleppo: 117 out of 187 sites reported into EWARS (63% completeness, 100% timeliness). Influenza-like illness was the most commonly reportedly condition followed by acute diarrhea, leishmaniasis, lice and scabies.
- Latakia: 84 out of 132 sites reported into EWARS in week 6 (63% completeness, 100% timeliness). Influenza-like illness was the most commonly reportedly condition followed by acute diarrhea, lice, severe acute respiratory illness (SARI) and suspected tuberculosis
- Cholera: WHO supported the affected governorates with investigation kits (13) and laboratory kits (10).
- WHO has scheduled meetings for the EWARS teams on 19-20 and 22-23 February to strengthen EWARS and disease surveillance. .
- Assessments: In Latakia, WHO conducted health assessments in 12 shelters and at Latakia National Hospital and Jableh Hospital.

### **Procurement and Logistics**

- Within the first 24 hours of the response, WHO dispatched essential medicines and supplies to Aleppo, Homs, Hama, Tartous and Latakia, in addition to the Syrian Arab Red Crescent (SARC). Supplies provided 102,415 treatments for 300 trauma cases, in addition to 550,00 water disinfection tablets.
- By 14 February 70 tons of medical supplies and equipment have been delivered to Damascus. A third flight with more equipment is expected in the following days.
- NCDs treatments including hemodialysis sessions which are also vital for treatment of crush injuries are in the pipeline for procurement, to support continuation of essential services to affected populations.
- In Hama, WHO delivered supplies to DoH Hama, as well as 5 health districts (Sqelbiya Salamiya Hama south district Soran Hamrat), and 2 hospitals.



Mobile medical teams providing care at IDP shelter. Credit: MOH

### **Health Operations and Technical Expertise**

• **Trauma:** Rapid assessments of the public hospitals in Aleppo and Latakia are complete. Technical support was provided to medical teams receiving trauma patients. Trauma kits are prepositioned mainly in Aleppo University Hospital and Razi Hospital. In Aleppo, WHO convened a sub-national Trauma Working Group. Representatives from DOH, Al Razi Hospital, Aleppo University Hospital, ICRC, SARC, and 2 local NGO hospitals took part in discussions regarding lessons learned from earthquake response.

• Mental Health and Psychosocial Support (MHPSS): WHO is focused firstly on support staff and their families in this challenging time. In its coordination role for the MHPSS working group, WHO is mobilizing local stakeholders and sectors, including MoH, NGOs, as well as child protection services, to provide MHPSS support to affected communities. WHO also provided technical support to MoH Mental Health (MH) department in drafting a MHPSS emergency response plan, with 11 key messages for coping with stress caused by the earthquake adapted and shared with MoH for

clearance. MoH has approved MHPSS earthquake-response interventions to allow 57 teams (394) of health and community workers from earthquake affected areas to be trained on PFA, BPS, SMHP, and mhGAP. WHO is working to add 10 MHPSS mobile teams in coordination with NGOs in Latakia, in addition to the 14 teams already working with DOH and MOE, to expand the reach of MH services across affected areas and complement mobile medical teams (MMTs) providing integrated primary care services. Finally, 25 Ministry of Education personnel finalized their training in Damascus on psychological first aid (PFA) and how to communicate key messages to children and their caregivers in a non-stigmatized, innovative manner.

Surveillance and Outbreaks: EWARS system is functioning in the affected areas for early detection of
infectious disease threats with a total of 237 reporting sites in the affected sub-districts. WHO is working with
MoH and DoH counterparts to assess the needs for strengthening disease surveillance in the affected
governorates. RRTs will be supported with chlorine tablets, DOHs will be supported with rapid diagnostic kits
for cholera and COVID-19, as well as medicines for treatment of acute diarrhea including IV fluids, antibiotics,
and ORS. Thirty-five RRTs are currently in the affected areas: 12 in Aleppo, 8 in Hama, 7 in Latakia, and 8 in

Tartous. There are no reports of infectious diseases of concern in GoS-affected areas since the earthquake struck.

- WASH: WHO focal points continue to monitor water quality and prepare for impacts on water infrastructure. Approximately 550,000 water disinfection tablets were deployed to affected areas along with brochures regarding how to utilize them.
- Essential Health Services: Coordination is ongoing with MoH counterparts to identify a list of medicines urgently required to sustain response at the primary healthcare level. WHO is supporting the provision of the basic package of health care services including primary care, NCD care, reproductive health, and psychosocial support for IDPs in shelters. WHO NGO partners are currently operating 7 MMTs in Aleppo and 7 in rural Hama. MMT operations in Latakia are expected to begin in the coming days. TB and HIV programs are working to connect with affected patients and ensure delivery of new medicine supplies for patients under treatment.
- **Nutrition:** Thirty-one (31) mobile teams are conducting nutrition efforts in Aleppo, Hama, Idlib and Latakia.
- Risk Communication and Community Engagement: WHO is finalizing integrated health risk communication
  messaging (see below) with pending dissemination via radio, SMS, and direct community outreach, as well as
  health responder outreach package, for roll out via NGO partners. A health community feedback mechanism
  is being developed to capture community questions, concerns, and requests. WHO is also conducting daily
  social listening to detect emerging issues, needs and concerns coming from online digital platforms, including
  social media, mass media and online search platforms.



# **CHALLENGES**

- Dynamic and evolving situation on the ground.
- High risk of:
  - Spread of water- and food-borne diseases due to disrupted water supplies, including exacerbation of ongoing cholera and Hepatitis A (pre-existing outbreaks).
  - Disease transmission in crowded shelter conditions, including respiratory illness, measles.
  - Significant mental distress and disorders, especially among children.
- Harsh winter weather and extreme cold temperatures complicate search and rescue efforts, as well as shelter solutions.
- Significant distress and fear within the affected population, with households not returning to residences. Likelihood of rumors and misinformation increasing as situation evolves.
- Ongoing fuel crisis has hindered response efforts.
- NCD medications and supplies are missing in the local market while needs have increased among IDPs.

### **PRIORITY NEEDS AND ACTIONS**

- New resources to accelerate flow of aid and assistance to affected areas.
- Unhindered access to most affected populations.
- Facilitated entry and distribution of medicines, supplies, equipment, and surge support staff.
- Continuity of health care services, especially for women, children, the elderly, and persons with NCDs.
- Ensured access to MHPSS for the affected population, particularly children.
- Fuel for response to enable ambulance transport, search and rescue, MMTs, community outreach, etc.
- Support to partners, in particular NGOs providing immediate services, to ensure supply of sufficient safe water and continuation of essential health services.
- Noncommunicable diseases treatment as immediate asks.

# **CONTACT INFORMATION**

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