

# Whole of Syria Earthquake Response Situation Report

Period of report: 13-19 February 2023

## 1. EVENT HIGHLIGHTS

10 800+



INJURED

5900+



DEATHS

7.1m+



AFFECTED  
POPULATIONS

453 000+



DISPLACED

- *All figures are estimates*

### Priority needs

- Urgent need of medicines for primary health care (PHC) facilities, hospitals and specialized centres, and management of noncommunicable disease (NCDs);
- Maintain continuity of care in the face of significant disruptions to essential health services, referral networks and specialized health services in Northwest Syria (NWS);
- Scale up of mental health and psychological support (MPHSS), especially to older people, children and women. Needs have increased in all areas in Syria.

### Priority concerns

- Thousands of people are currently housed in overcrowded collective shelters, many without adequate access to sufficient safe water, sanitation and hygiene measures;
- Temporary disruption of infectious disease surveillance systems and laboratory capacity;
- Risk of increase of waterborne diseases due to over-crowded settings, extensive damage to water and sanitation infrastructure, and conflict-inflicted damage and disruption to cholera treatment infrastructure;
- Potential for a surge in respiratory illness, including COVID-19, with only 12% of the overall population having received two or more doses of COVID-19 vaccine;
- In NWS, suspension of routine immunization services at 93 immunization centres and suspension of emergency vaccination campaigns for measles, polio and cholera due to the earthquake.

### Key WHO Actions

- Based on initial needs assessment, launching a revised flash appeal for immediate and urgent health needs with a preliminary estimated funding requirement of US\$ 33.7 million for the Whole of Syria;
- Providing over 175 health facilities with essential medicines, kits and consumables to facilitate treatments for 3.25 million patients;
- Chartering 6 flights to provide medical supplies and equipment to earthquake-affected areas;



WHO supplies leaving the warehouse in Sarmada, Idlib Governorate, Syria ©HiHFAD

- Establishing health sector coordination meetings within 12 hours at national and sub-national levels;
- Activating an incident management team and developing an operational response plan;
- Participating in three interagency cross-border missions to Northwest Syria between 14 - 18 February, entering Syria through Bab-Al-Hawa and Bab-Al-Salama crossings. These visits were the first opportunity for WHO to have physical presence in Northwest Syria since 2020, and led to scale up of WHO's support to earthquake-affected populations;
- Securing 3 months of funding for 3 Tuberculosis (TB) Centres in Northwest Syria.

## 2. SITUATION UPDATE

A 7.8 magnitude earthquake struck southern Türkiye and the Syrian Arab Republic (hereafter Syria) in the early morning of 6 February 2023. The epicenter was identified as Gaziantep near the Türkiye-Syria border. Thousands of aftershocks have followed, including a 6.4 aftershock on 20 February 2023.

As of 23 February, the Syrian Ministry of Health (MoH) had reported 1414 deaths and 2357 injuries in Aleppo, Latakia, Hama, and Tartous governorates. The death toll is expected to rise as recovery operations continue. In Northwest Syria, as of 19 February, 4500 were estimated dead and 8400 injured. The most affected areas are Harim and Salqin in Idlib Governorate and Afrin in Aleppo Governorate, where the highest number of deaths has been recorded.

A total of 146 health facilities have been damaged, with two completely destroyed, including 55 health facilities in Northwest Syria (Figure 1). In Aleppo, Hama and Latakia collectively, 91 health facilities are reported to have been damaged, including at least 7 hospitals.

In Aleppo, Latakia, Tartous, Hama, and other affected areas, governmental authorities report that at least 714 buildings have been destroyed with hundreds more damaged and rendered uninhabitable. In Northwest Syria, over 1700 buildings have been destroyed and 8000 buildings damaged.

Overall, more than 363,000 persons have been displaced, including [at least 90,000 people who have fled their homes in Northwest Syria](#). Further displacements are still being recorded. Displaced people are mainly leaving Jandairis, Salqin and Harem, moving towards Idlib and Dana. Many displaced people are housed in collective shelters. Essential services including shelter, food, water, hygiene and sanitation, and health are

critically needed. Immediate health needs are for aftercare for traumatic injuries, mental health and psychosocial support, and care for non-communicable diseases – including medications. Continuity of essential health services is critical to prevent excess mortality and morbidity.

Affected areas in Northwest Syria still report supply and resource gaps in managing both the victims of the earthquake as well as routine health services. Coupled with freezing temperatures, and a lack of safe water, sanitation and hygiene facilities are exposing the population to an increased risk of water-borne diseases. Surveillance and response systems for the cholera outbreak have resumed, but gaps persist. Needs on the ground remain vastly unmet.

Syria was already experiencing a protracted crisis due to armed conflict and socio-economic decline that had resulted in a severe deterioration of living conditions. The disrupted health system was overstretched due to the COVID-19 pandemic, an ongoing cholera outbreak and 12 years of war. Nearly a quarter of all hospitals and one third of all primary health care centres were non-functional and unable to respond to the growing health needs. As per the [OCHA Flash Appeal](#), in a country where only 59% of hospitals, 57% of primary health care facilities and 63% of specialized centres were fully functional before the earthquake, this further tragedy will exacerbate the deterioration of basic services, and significantly delay any scope for recovery.

In earthquake-affected areas, there were already three pre-existing disease outbreaks:

- Cholera (all affected governorates, especially Aleppo and Idlib)
- Hepatitis A (Latakia)
- Measles

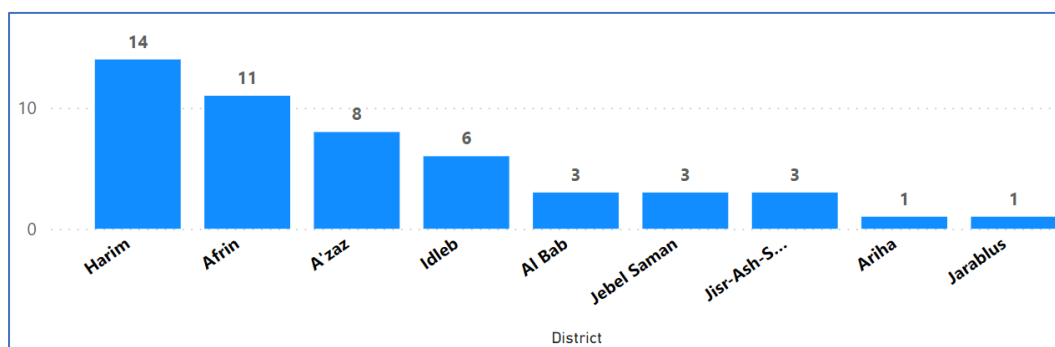


Figure 1: Number of health facilities in NWS damaged or destroyed by the earthquake as of 16 February 2023.

Public health and health services are slowly resuming but remain disrupted, including disease surveillance programmes.

Hospitals and health facilities lack medical consumables, orthopedic surgical equipment, anesthetics, ventilation devices, but also blankets and beds, intravenous fluids, blood and oxygen. Local populations, including health workers who have been involved in the immediate response, have been impacted by the collapse of their homes, schools and hospitals, and the deaths of family and loved ones. At least 13 health care workers in Syria have died.

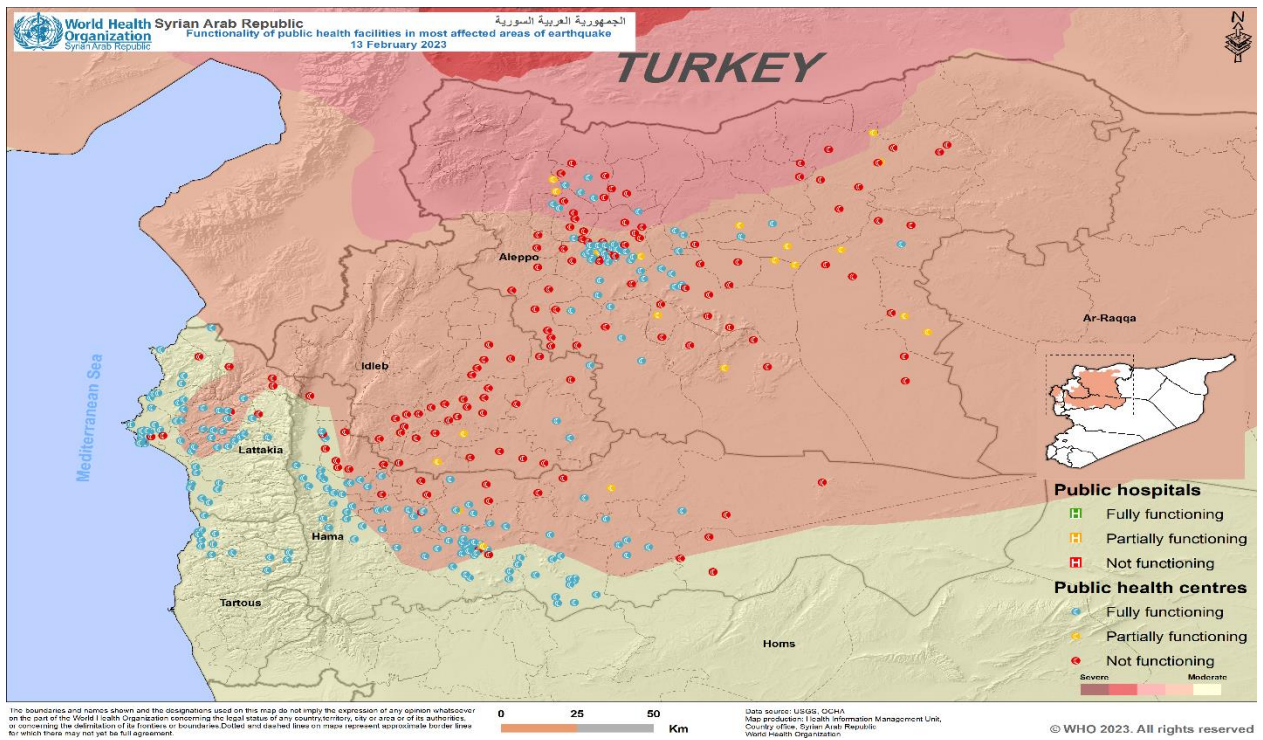


Figure 2. Distribution of public health facilities in earthquake-affected areas according to HERAMS Syria.



### Distribution of health facilities in North West Syria February 2023

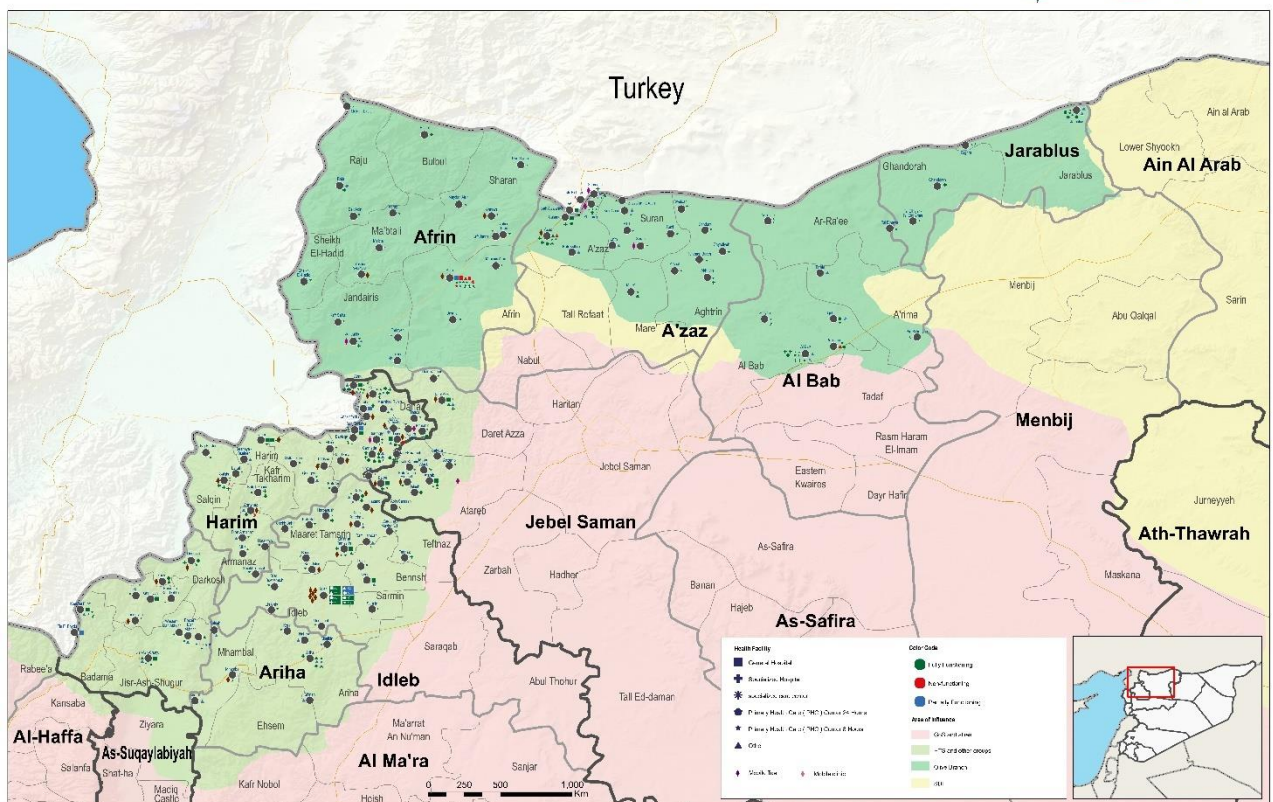


Figure 3: Map displaying functionality of health facilities in Northwest Syria as of 19 February 2023. ©WHO

## Public health concerns

WHO's goal is to save lives in the immediate aftermath of the disaster, to mitigate downstream health consequences, including negative impacts on mental health and wellbeing, and to rapidly restore essential health services and public health functions across all earthquake-affected populations.

### Key public health concerns and impacts:

- Trauma-related deaths and injuries from collapsed building and debris, and additional needs related to plastic and orthopaedic surgery, as well as provision of physical rehabilitation, prosthetics and assistive devices;
- Exposure to harsh weather because of displacement and/or damage to accommodation placing people at high risk of hypothermia;
- Crowded conditions in existing shelters heightening the risk of outbreaks and disease transmission, including respiratory illnesses such as COVID-19 and influenza, and pre-existing outbreaks of cholera, hepatitis A and measles;
- Severe lack of medicines in PHC facilities, hospitals and specialized centres;
- Lack of medications for non-communicable disease as many have lost their monthly regimen during the earthquake, while local primary health care centres are struggling to meet the surge in demand;
- Tremendous mental health impact due to sudden loss and devastation striking a society already affected by years of conflict, extreme trauma and stress having particularly affected children and the workforce.
- Increased risk of waterborne illness, including exacerbation of pre-existing cholera and hepatitis A outbreaks, due to significant damage to the water network and disruption to cholera surveillance and treatment centres;
- Significant disruptions to essential health services including maternal and neonatal care hospitals), nutrition stabilization centres, blood banks and specialized services, dialysis and tuberculosis centres;
- Incomplete reporting under the electronic sentinel surveillance systems EWARS and EWARN (Early Warning, Alert, and Response System, and Network) across all affected areas, and disruptions to laboratory services in Northwest Syria.
- Suspension of routine immunization services at immunization centres across Northwest Syria, and of emergency vaccination campaigns for measles, polio and cholera.

### 3. ACTIONS TO DATE



*WHO visiting the outpatient department at IDA's Maaz Hospital in Azaz. © OCHA/Madevi Sun-Suon.*

#### Leadership and coordination

- WHO activated the Incident Management Team (IMT) at the three levels of the organization and deployed surge support teams to earthquake-affected areas in the Whole of Syria (WoS).
- In consultation with Cluster Coordinators across the response areas, the WoS Health Cluster developed an overall high-level health response plan for the earthquake to ensure a harmonized health sector response across different areas and partners.
- WHO continues to increase its operational presence on the ground through regular interagency visits to affected areas. A total of 11 surge personnel has been deployed to increase the capacity and capabilities of the WHO Field Office in Gaziantep. Additionally, 71 health facilities and specialized services have been identified to receive further support by WHO, with 22 of them as top priority. WHO Syria Country Office, together with the Ministry of Health, has activated the national and regional surge response with immediate deployment of a trauma specialist and two MHPSS experts. In addition, health facilities providing services have been fully updated to strengthen referrals.
- WHO leads the Health Cluster for Northwest Syria, coordinating 55 active health partners. The Health Cluster finalized the mapping of damaged health facilities and results show that [55 health facilities were damaged in 34 sub-districts](#) and that 12 health facilities were pushed to suspend their operations, especially in Harim and Afrin. WHO leads the national health sector in Damascus as well as at the field level through its offices in Aleppo, Latakia and Homs/Hama. A total of 42 health sector partners continue to work in the earthquake-affected areas in Aleppo (20), Latakia (15), and Hama (7).
- An Emergency Medical Team (EMT) Coordination Cell has been activated for Northwest Syria and EMTs have been deployed according to needs identified by health partners on the ground and coordinated through the Health Cluster mechanism. EMTs are working alongside local partners to provide immediate medical care for the affected population.

- In Aleppo, Hama, and Latakia, WHO has established partnerships with 12 local and national NGOs to deploy Mobile Medical Teams (MMTs), as well as dedicated MHPSS outreach teams, to serve collective shelters and displaced populations with outpatient consultations and treatments/referrals. Primary care services include reproductive health, care for noncommunicable diseases, MHPSS consultations, child health and nutrition services, leishmaniasis follow up, COVID-19 vaccinations, and follow up for registered patients living with HIV and/or TB.

### Health information and planning

- The Health Sector in Syria has compiled predicted needs from health partners and relevant health authorities to inform a three-month UN Flash Appeal for the Earthquake.
- An operational plan was developed by WHO within two weeks following the earthquake with all the response pillars to respond to needs on the ground.
- In Aleppo, Latakia, and Hama, EWARS is functioning and has been expanded to include collective shelter sites.
- In Latakia Governorate, a total of 84 out of 132 sites reported into EWARS from 5 to 10 February (63% completeness, 100% timeliness). Influenza-like illness was the most commonly reported condition, followed by acute diarrhea, lice, severe acute respiratory illness (SARI) and suspected tuberculosis.
- In Aleppo, a total of 117 out of 187 sites reported into EWARS (63% completeness, 100% timeliness). Influenza-like illness was the most commonly reported condition, followed by acute diarrhea, leishmaniasis, lice and scabies.
- Refresher trainings on EWARS were provided to 45 and 125 rapid response teams (RRTs) in Latakia and Aleppo governorates respectively on case definition and reporting for internally displaced people; responders active in collective shelters, including site focal points and mobile medical teams (MMTs), are being trained on community surveillance – including key signs and symptoms to look out for and how to report them.
- In Northwest Syria, temporary disruptions have been reported in EWARN with a drop in timeliness and completeness in the week following the earthquake.
- WHO has worked with partners to report the total deaths and injuries across Whole of Syria. Key updates for [Northwest Syria](#) are available on the earthquake response dashboard, while updates in Aleppo, Latakia, Hama and related areas are available on the [WHO Syria Earthquake Dashboard](#).
- A rapid, enhanced round of the Health Resources and Services Availability Monitoring System (HeRAMS)<sup>1</sup> is ongoing to establish current functionality levels of health services as well as a comprehensive baseline for damaged health facilities.

### Health operations and technical expertise

- WHO is working with partners as a priority to re-establish early warning surveillance.
- WHO has supported the resumption of 8 cholera treatment centres (CTCs) and is coordinating with partners to activate additional CTCs to scale-up the cholera response in earthquake-affected areas of Northwest Syria.
- Preparation for oral cholera vaccine (OCV) campaign to administer over 1.7 million doses of Euvichol is underway in Northwest Syria. The campaign, delayed due to the earthquake, will begin on 7 March 2023 for 10 working days. Water quality analysis is ongoing, in coordination with the Directorate of Health (DOH) in Homs and Hama governorates. Additionally, 150,000 and 25,000 water sterilization tablets were donated to DOH Hama and DOH Homs respectively for further distribution in the affected areas after the earthquake.
- In Latakia Governorate, 2 RRTs have been deployed to collective shelters to enhance surveillance of communicable diseases. Plans are underway to increase the number of RRTs to 8 teams. In addition,

<sup>1</sup> Health Resources and Services Availability Monitoring System (HeRAMS) is a continuous exercise in Syria which takes place every quarter

in Aleppo, WHO supported the deployment of 4 RRTs to monitor the epidemiological situation of communicable diseases.

- WHO is coordinating the redistribution of MHPSS services to the new reception centres and emergency shelters in Northwest Syria. Assessment shows that the only psychiatric hospital requires urgent financial and technical support. The health workforce involved in the mental health response is also supported with MHPSS counseling offered in cooperation with the Psycho-social Services and Training Institute in Cairo (PSTIC). In Latakia Governorate, MHPSS training was provided to 80 volunteers from 10 NGOs, with 10 dedicated MHPSS teams being deployed to support the affected population. Additionally, in preparation for a MHPSS campaign in schools and communities, workshops on psychological first aid (PFA) were conducted every Tuesday. A total of 232 participants from the Directorate of Health (DOH) and NGOs attended these workshops with dedicated MHPSS teams (Homs – 12, Hama – 11, and Idlib – 2).
- A total of 71 public health care facilities in Northwest Syria have been identified to receive further support by WHO with 8 to be supported urgently and 22 to be prioritized based on the ongoing needs assessed.
- In partnership with the public health care networks in Northwest Syria, WHO has redefined the priority areas targeted by mobile teams and mobile clinics, in order to increase access to healthcare for newly-displaced populations. Over 60 mobile teams and mobile clinics have been assigned to earthquake-affected areas. In addition, the referral system is functional, despite additional needs due to the earthquake that remain to be addressed. The critical needs for referral system functionality were identified and include the immediate maintenance of ambulances.



WHO mobile medical clinics @WHO

- Thirty mobile medical teams were deployed in Aleppo (13), Latakia (10), and Homs and Hama (7) to provide outpatient consultations and medications, as well as integrated care with a focus on child health, mental health and psychosocial support, reproductive health, and non-communicable diseases.
- In Northwest Syria, 100 survivors with crush syndrome were admitted to hospitals and received emergency dialysis sessions to treat acute renal failure. One dialysis center in Jandairis, Afrin, was damaged with patients temporarily transferred to Al-Hedaya centre in Qah. Complete hemodialysis sessions for 3000 adults and 100 children were provided to Aleppo University Hospital and Aleppo DOH.



- Most vaccination teams (102 out of 133) have resumed routine immunization activities in Northwest Syria. Despite some damage to the cold chain facility in Afrin, all five cold rooms available have maintained the required temperature to preserve the vaccines. The cold chain for COVID-19 vaccines in Al-Iman Hospital has been damaged leading to the wastage of 1,735 COVID-19 vaccine doses.
- In Aleppo, Hama and Latakia, DOH vaccination teams have been deployed from local public health centres to nearby collective shelters, and a measles mop-up campaign has also been launched to targeted districts across the country, including locations in earthquake-affected areas.



*WHO staff listening to the grievances of a displaced man in Aleppo @WHO*

### **Risk communication and social mobilization**

- WHO is coordinating with partners to ensure that all the communication materials are in accessible format in order to reach everyone, especially for people with disabilities.
- WHO is leading the development of specific awareness activities focused on earthquake 'literacy'.
- Additional communication messages and awareness materials are focused on cholera and other infectious diseases following the earthquake. Existing community structure mechanisms combined with social media are used to disseminate key messages especially on infectious diseases exacerbated by the earthquake.
- A risk communication technical working group in Syria, co-chaired by UNICEF and WHO, continues to collect and respond to infodemics, and is leading community engagement and development of intervention-specific materials, such as messages for MHPSS awareness, prevention of communicable diseases, and earthquake safety. The platform was established as part of the COVID-19 response and has been repurposed for other emergencies such as the cholera outbreak and now for the earthquake response.
- WHO continues to conduct media briefings to provide updates on the situation.
- Under the health sector coordination mechanisms in affected areas, WHO and partners are finalizing the service directory information, important referral details, and various hotline information to be shared with the affected communities.

- Prevention of Sexual Exploitation and Abuse (PSEA) messaging for earthquake response have been disseminated in English and Arabic to partners.

### Supplies and Logistics

- Between 13 - 19 February, 4 WHO trucks carrying essential medicines and Interagency Emergency Health Kit (IEHK) were shipped to Northwest Syria providing more than 820,000 treatments. Additionally, to address the earthquake survivors' need for trauma care and rehabilitation, WHO distributed 1,884 Trauma and Emergency Surgery Kits (TESK) that can provide care to over 94,000 trauma and surgery interventions in Northwest Syria.
- As of 19 February, WHO has undertaken 11 cross-border deliveries from Türkiye to Northwest Syria amounting to 173 metric tons of medical supplies and emergency kits for the value of US\$ 2.2 to provide treatment to over 4.3 million people.
- Furthermore, three charter flights, containing 108 tons (value of US\$ 854,000) of emergency trauma and surgery kits (TESK), IEHK, tents, generators, pneumonia kits, non-communicable disease kits, cholera kits, and laboratory kits were delivered to affected areas. Additionally, 3 charter flights from the Dubai Hub were received in Türkiye on 8, 12, and 23 February to support the earthquake response in Türkiye as well as in Northwest Syria.

### Resource mobilization

- On 13 February, based on initial needs assessments, WHO launched a revised flash appeal for immediate and urgent health needs with preliminary estimated funding of US\$ 33.7 million, including 15.7 million for Northwest Syria (of which 47% funds have been raised) and US\$ 18 million for WHO Syria Office (of which US\$ 10 million have been raised).
- For WHO Whole of Syria earthquake response, a total of US\$ 6.2 million has been received from the UN Central Emergency Response Fund (CERF) and the US Bureau of Humanitarian Assistance (BHA). Additionally, WHO's Contingency Fund for Emergencies (CFE) has provided a start-up loan of US\$ 11.3 million. Furthermore, an additional US\$ 4.75 million have been pledged for WHO Syria Office.

## 4. Challenges and needs

WHO is focused on the following priorities:

- Preparing for secondary effects of the earthquake including:
  - disease outbreaks;
  - mental health needs;
  - exacerbation of existing health conditions (especially non-communicable diseases) due to exposure to harsh weather conditions and/or interrupted medication supplies; and
  - malnutrition.
- Establishing a more regular presence in Northwest Syria, and ensuring access to essential health care, including non-communicable diseases and post-trauma rehabilitative care by the affected population in all areas of Syria;
- Ensuring access to safe and sufficient water and sanitation amid concern of damage to water systems and an ongoing cholera outbreak; reinforcement of disease prevention, surveillance and response activities in reception centres and amongst displaced populations;
- Detailed needs and damage assessments to define continued targeted support, and to drive the rehabilitation of damaged health facilities in Whole of Syria;
- Activities to ensure access to health services – e.g. establishing MMTs and health posts, continued expansion of primary and secondary health care services to earthquake-affected populations, including rehabilitative services for trauma patients;

- Expanding mental health and psychosocial support to communities and individuals, including targeted interventions for the health workforce;
- Full resumption of routine immunization in all affected areas, and expanded cholera vaccination in Northwest Syria;
- Expanding the capacity of dialysis centres to receive patients from Jandairis;
- Defining needs for supplies and providing essential medical equipment across all affected areas of Syria, particularly materials and devices such as CT scans, MRIs, and X-rays that are essential for trauma and surgical care and diagnosis.