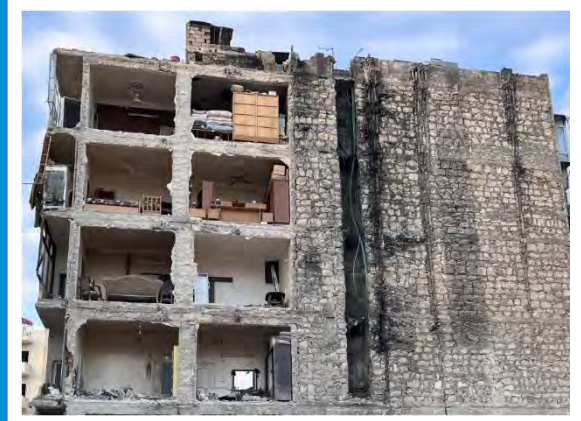




**World Health Organization**  
Syrian Arab Republic

## SYRIAN ARAB REPUBLIC RESPONSE TO EARTHQUAKE

SITUATION REPORT #8 (13-19 MARCH 2023)  
23 MARCH 2023



**4 MILLION**  
PEOPLE AFFECTED



**2 MILLION**  
SEVERELY AFFECTED



**346,800**  
DISPLACED



**4+**  
GOVERNORATES AFFECTED

The Secretary-General stated that. “Syrians suffered yet another tragedy this year. The recent earthquakes hit as humanitarian needs had reached their highest levels since the beginning of the conflict and with economic conditions worsening, taking a toll on communities already ravaged by war and displacement”.

### HEALTH CONCERNS

- **Mental health needs** continue to increase, mental health and psychosocial support (MHPSS) has been reported as the most needed service.
- **Maintaining essential services** especially for elderly and people with chronic diseases requiring essential NCD treatment
- **Overcrowded living conditions** poor WASH services resulting in increased reported cases of scabies, lice and diarrhoea.
- **Exacerbation of pre-existing outbreaks** in affected areas:
  - o Cholera (all affected governorates, especially Aleppo)
  - o Hepatitis A outbreak in coastal area
  - o Measles

### HIGHLIGHTS

- In Syria, Latakia, Hama and Aleppo governorates are the worst affected areas, with further impact reported in Tartous.
- WHO is leading the health component of a Post Disaster Needs Assessment (namely Syria Earthquake Rapid Needs Assessment (SERNA)) to assess and quantify the health sector damages and losses, as well as recovery needs
- WHO participated in a joint donor field visit to Latakia organized by OCHA. The visit aimed to see first-hand the impact of supported projects, in addition, to observe the wider humanitarian response to the earthquake. Delegations from Italy, Sweden, Switzerland, Norway and Spain took part in the mission.

## SITUATION UPDATE

More than 1 month ago, on 6<sup>th</sup> of February, two earthquakes hit southern Türkiye and northern Syria border at a magnitude 7.8 and 6.7 respectively. The earthquakes were followed by aftershocks across the region. Rapid assessments that have been carried out and the immediate response that followed, have reported on significant damages in the areas of southern Türkiye and northern Syria. More importantly, the earthquakes have had a momentous impact on the people in the affected areas. On 7 February 2023, WHO graded this event at the highest level of Grade 3.

MOH has reported 2537 injuries and 1414 deaths in the governorates of Aleppo, Latakia, Hama, and Tartous, with additional reports received at local levels. 31 health workers have reportedly died – 16 doctors and 15 pharmacists. The greatest number of injuries were reported from Aleppo, Latakia, and Hama.

The Syrian Ministry of Health (MoH) continues to coordinate its response via the activated Emergency Operations Centre (EOC) under the chairmanship of the Deputy Minister. In all affected governorates, public and private health facilities as well as medical outreach teams have been providing essential health services at collective shelters and host communities. WHO and health partners have scaled up response in affected areas through deployment of mobile medical teams and clinics, provision of life-saving and medical supplies and specialized service delivery such as MHPSS, nutrition, immunization, communicable and noncommunicable diseases.

As reported by OCHA (9 March), since the first earthquake of 6 February, 77,234 families, or 364,854 people, have been newly displaced in Aleppo (38,649 families), Latakia (36,312), Homs (748), Tartous (656), Hama (346), Rural Damascus (298), As-Sweida (83), Deir-ez-Zor (68), Dar'a (64), and Damascus (10). [OCHA Situation Report No3 \(9 March\)](#)

Priority response actions are focused on maintaining essential health services as well as expanding mental health services tailored to needs, distribution of life-saving and essential supplies and services especially for NCDs, preventing outbreaks and disease transmission through vaccination and risk communication.

## PUBLIC HEALTH IMPACT

- WHO, along with partners, is leading the health component of a Post Disaster Needs Assessment (namely Syria Earthquake Rapid Needs Assessment (SERNA)) to assess and quantify the health sector damages and losses, as well as recovery needs. Initial results point to 56.7 million USD in damages and nearly 208.3 million USD in losses. Overall, an estimated 265.6 million USD is needed to address approximately 60% of the damages and losses, and build-back-better: 116 million in the first year and 149.6 million in years 2 and 3.
- Access to safe drinking water and WASH services remains a concern in shelters, especially in Aleppo and Hama. Contamination has been observed mostly at household level in jerry cans and water tanks. This heightens the risk of water-borne disease and requires WASH interventions to improve access to safe drinking water together with risk communication efforts to prevent disease and use of contaminated water.
- In earthquake affected areas, early warning, alert, and response system (EWARS) sites have reported a slight decrease in influenza like illness (ILI), acute diarrhea and leishmaniasis, in Aleppo and Latakia, while lice and scabies increased in Aleppo and Hama. Disease trends underscore the need for improvement of WASH services in order to prevent transmission.
- There are concerns regarding possible exacerbation of pre-existing cholera and hepatitis A outbreaks, especially with overcrowded living conditions.

- Mental health and psychosocial support services continue to be reported as a major need, as many families and children experienced trauma and are still presenting significant distress and fear to return homes even if the structure has been assessed and confirmed as safe.
- The need for NCD medication remains a priority, where many elderly and patients with chronic diseases require their monthly supply of NCD medicine to reduce risk of complications while health facilities and mobile teams are struggling to meet the surge in demand.
- Across Hama, Homs and southern Idleb, there are reported shortages of services at secondary health care level due increased load and backlog of surgeries, shortage of health human resources, overuse/disruption of medical equipment and shortage of medical supplies
- Numerous medical devices and equipment require replacement and/or maintenance after the earthquake.
- The earthquake has further highlighted the weaknesses of an overburdened and overused health system after 12 years of crisis. The system is no longer resilient to withstand further crises, which increases the vulnerability and risk of lives lost in case of another emergency.

## RESPONSE PILLARS:

### *Leadership and Coordination*

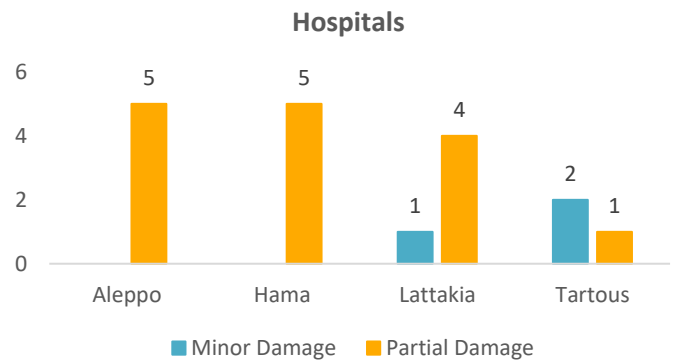
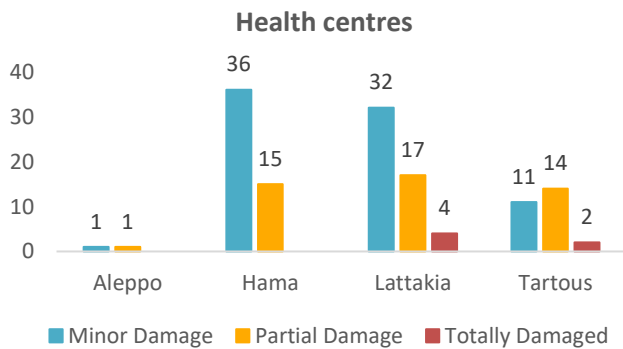
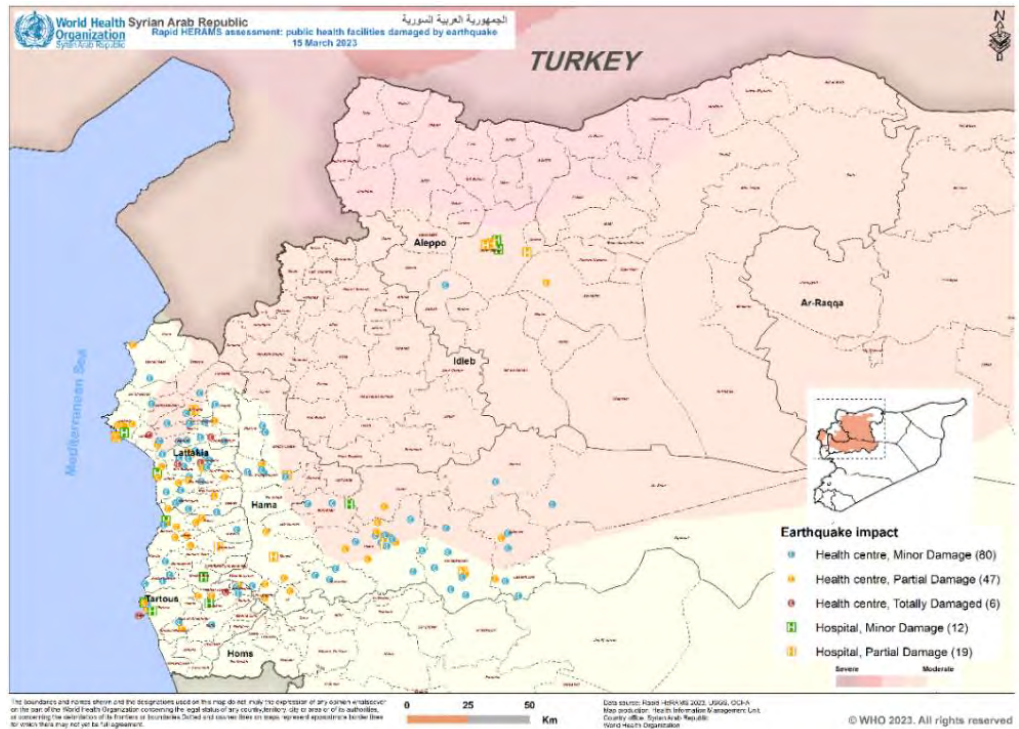
- The emergency health response is being led by the MoH and Directorates of Health (DoH) at governorate level, and the Emergency Operations Center has been fully activated at the MoH while DoH works closely with emergency operations rooms established at governorate level.
- WHO has activated a full-scale incident management response, activating all pillars under the global Emergency Response Framework. A detailed operational plan has been developed.
- A total of 7 surge personnel are currently deployed to Damascus and Aleppo, while 3 local staff have been re-deployed to Latakia, Hama and Aleppo. To bolster sub-national capacity, two National Public Health Officers have joined the WHO team in Latakia and Homs, in addition to programme support staff in Latakia.
- WHO is leading the health sector component of a multi-sector post-disaster needs assessment aimed at bringing together multiple assessments to estimate the impact, including damage and loss, of the recent series of earthquakes and by defining an inclusive recovery strategy including its funding implications.
- WHO participated in a joint donor field visit from 19 to 21 March to Latakia organized by OCHA. The visit aimed to see first-hand the impact of supported projects, in addition, to observe the wider humanitarian response to the earthquake. WHO's health point at Sport City collective shelter and Latakia National Hospital which has benefited from WHO interventions under Syrian Humanitarian Fund (SHF) and Central Emergency Response Fund (CERF). Delegations from Italy, Sweden, Switzerland, Norway and Spain took part in the mission.
- In Homs, WHO participated in the SYNAT [Syria Needs Assessment Tool] training and assessment Package for Earthquake-affected communities outside collective shelters. The main purpose of the assessment is to obtain quantitative data and information to inform priority humanitarian needs of affected populations outside of collective shelters and in affected communities.
- The weekly coordination meeting was conducted with the Directorate of Health in Hama to follow up the response activities in the shelters and affected locations and identify health gaps.
- In Aleppo, two intersectoral mission were conducted to the hard-to-reach areas in Fafin/Tall Refaat enclave and Sheikh Maqsood neighborhood to assess the aftermath of the earthquake.
- Coordination meetings were held with DoH Aleppo, SARC and partners regarding coordination of the response, health priorities and rehabilitation needs of key health care facilities.
- WHO is partnering with 29 NGOs (27 national and 2 international) to scale up provision of primary health care and MHPSS services at shelters and host communities.

**Information Management and Surveillance**

**Information Management and Assessments:**

WHO completed a rapid HeRAMS assessment dedicated to assessing damage as well as the impact of the earthquake on health facility functionality and availability of services. Findings of the HeRAMS assessment specifically tailored to assess health facilities after the earthquake, out of the 34 hospitals assessed, 19 hospitals reported damages, including structural and nonstructural cracks, of which 1 hospital had a partially collapsed section. Moreover, 12 hospitals had minor damages or were intact (of which 7 reported no damages). Three hospitals were not functioning prior to the earthquake and did not report into the assessment.

The primary health centers assessed included 673 facilities, out of which 133 reported damages. Six health centers are reported to be partially collapsed (with more than 40% of damage extent on the building, which is considered as fully damaged). Forty-seven (47) health centers were classified as partially damaged, while 80 were with minor damages or intact.



### **Disease Surveillance:**

In earthquake-affected areas, 461 EWARS sites in Aleppo, Hama and Latakia are reporting, of which 381 sites have reported (82.6% completeness) in week 10. Forty-one (41) Rapid Response Teams (RRTs) are deployed in Aleppo, Hama, Latakia to verify and investigate alerts reported. Last week 22 alerts were reported and are under verification or investigation.

In the epidemiological week 10, the most detected concerns by EWARS were, in order of frequency and percent change in comparison to week 9:

- Aleppo – ILI (15% decrease), acute diarrhea (11% decrease), leishmaniasis (0.5% increase), lice (85% increase) and scabies (33% increase).
- Latakia – ILI (19% decrease), acute diarrhea (4% decrease), lice (50% decrease), scabies (49% decrease) and acute jaundice syndrome (66% decrease).
- Hama – ILI (9% increase 8), acute diarrhea (10% increase), leishmaniasis (18% increase), SARI (15% decrease) and Lice (11% increase),

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

#### **Essential Health Services:**

As part of sustaining the essential health services and trauma care, WCO has delivered medications and supplies to cover more than 91,367 treatments to 15 health facilities and public hospitals in the affected areas. This includes life-saving and essential medicines, 12 different types of NCD kits medical to provide an adequate provision of life-saving interventions and sustain health care provision for patients in needs.

WHO has deployed 30 mobile medical teams (MMTs) via WHO standing partnerships with NGOs to affected communities in Aleppo, Latakia, Hama. Last week, 29 mobile medical teams in Aleppo (13) and Hama (16) governorate provided 4,841 outpatient consultations in 71 shelters as well as affected communities, additionally 540 beneficiaries were reached with risk communication and health education activities.

**Trauma and disability:** 25 health workers from Damascus were trained on disability and rehabilitation at the MOH Centre for Prosthetics and Rehabilitation in Damascus. Field visits were conducted to Latakia national hospital to assess surgical and trauma capacity and identify priority needs.

**Mental Health:** WHO continues to co-chair the MHPSS technical working group in Syria while also supporting the operation of 125 MHPSS teams and providing psychotropic medication in Aleppo, Hama and Latakia providing over 515,000 mental health services. Capacity of 100 doctors and 100 nurses was built in Aleppo and Hama on mhGAP integrated guideline for emergency situations and psychological first aid. Adaption on Psychological First Aid training is ongoing to serve all sectors not only health.



*WHO supported mobile teams providing MHPSS services in a shelter in Aleppo*

**Nutrition and Child Health:**

- Thirty-five (35) national mobile teams, deployed in shelters, screened a total of 4,661 children under 5 years in Aleppo, Latakia, Hama and Idlib for malnutrition 40 GAM cases of malnutrition were detected and referred for treatment. Additionally, over 1,300 mothers were provided with Infant and Young Child Feeding (IYCF) counselling.
- The national nutrition surveillance programme has also been providing services to affected population, operational in 290 health centers in affected areas. Nutrition surveillance is available in 55 health centres in Aleppo, 103 in Latakia (of which 6 are no longer providing services due to major damage and 45 are struggling to provide services due to partial damages from the earthquake), 130 centres in Hama and two in Idlib. Overall, 7,335 children were screened at health facilities, 139 cases were detected with GAM malnutrition and referred for treatment.
- Additionally, 2088 mothers were provided with IYCF counselling. Of screened cases at facility level, 24 cases of complicated severe acute malnutrition were admitted in stabilization centers and 6 patients were discharged.
- A total of 5,140 IMCI services were presented through 43 national mobile teams , 14 were referred to hospitals.

**Surveillance:**

Last week, 2 training workshops were carried for 60 deployed RRTS in earthquake affected areas on disease case definitions, thresholds, and investigation of water- and food-borne diseases.

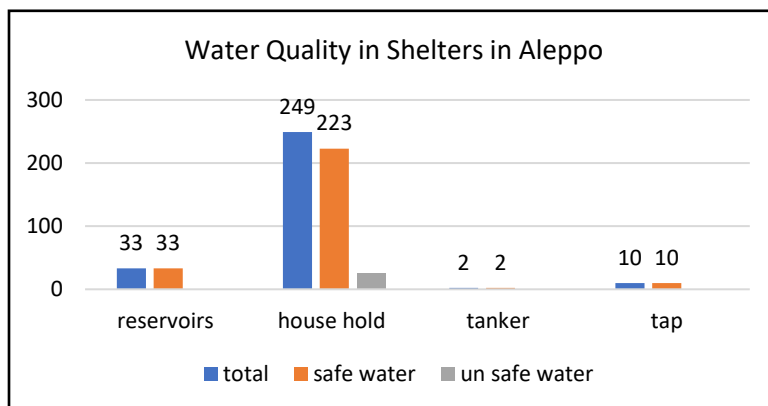
WHO has scaled up the capacity of public surveillance officers and NGOs on EWARS reporting. Since the earthquake on 6 Feb:

- WHO trained 111 NGO health workers from Aleppo(66) and Latakia(45) - deployed as part of MMTs - to report to EWARS.
- Four training workshops were carried for 130 newly deployed RRTS on disease case definitions, thresholds, and investigation of water- and food-borne diseases.

**WASH and IPC:**

WHO is providing technical support to the national Infection Prevention and Control (IPC) sectoral committee to develop a national IPC action plan, in line with Pandemic fund proposal.

WHO continues to monitor water quality in shelters, last week, 294 drinking water samples from 23 shelters were collected, of which 26 samples presented bacterial contamination (8.8%). The contamination has been observed at the household level (mainly jerrycans and tanks).



In most of the shelters in Aleppo, WASH facilities require maintenance, the reservoirs in the shelter are in good form and are protected by a cover. WHO supported multi-sectoral national teams in Aleppo have carried out visits to 8 shelters to monitor water quality and water purification tablets were distributed to the 8 visited shelters, utilized to disinfect water provided from water source at the shelter.

In Hama, 40 samples were collected and analysed, of which 14 samples (35%) were contaminated—mainly the samples collected from the water tanks. 10,000 chlorine tabs donated by WHO were delivered by DOH to the shelters with contaminated water tanks.

**Risk communication and community engagement:**

WHO, in partnership with International Federation for Red Cross and Red Crescent Societies (IFRC) and Syrian Arab Red Crescent (SARC), conducted a two days Training of Trainers (TOT) for 35 members of SARC volunteers from different governorates to roll out the community health outreach package. The training aimed to equip a cadre of community health outreach teams on their roles and responsibilities, as well as supporting information on:

- Health education on health hazards, WASH and faecal-oral diseases, MHPSS, respiratory, measles and EQ-exacerbated health risks;
- Supporting community-based initiatives, as well as distribution of supplies;
- Identification and referral of individual in need of health services; and
- Collection of community feedback.

Based upon this initial TOT, cascade training at governorate level is now under coordination between WHO and SARC. Further roll out of the training to community health workers and WHO-supported NGOs and implementation of community outreach is planned at governorate level in the coming weeks.

Eight new communication products and messaging on fire prevention and burn management in Arabic and English have been developed in response to emerging health issues. WHO continues to conduct weekly social listening to detect emerging issues, needs and concerns coming from online digital platforms, including social media, mass media and online search platforms.



**PRSEAH:** The PRSEAH focal points at the WHO Country office conducted a refresher online awareness session targeting 120 participants from NGOs; both staff or volunteers on the Prevention and Response to Sexual Exploitation, Abuse and Harassment in the affected areas. The awareness raising is part of the policy of WHO on sexual abusive conduct including sexual exploitation and abuse and to ensure NO harm for beneficiaries.

**Procurement and Logistics**

- Between 13-19 March, medical supplies valued at US\$ 103 000 and weighing 13 metric tonnes were delivered to 15 health facilities in Aleppo, Latakia, and Homs.
- In response to the earthquake and based on MOH and WHO assessed needs, WHO has requested additional kits, life-saving and essential medicines, and medical equipment to sustain health supply chain to earthquake affected areas. Supplies for over 5M (acquired via WHO’s Contingency Fund for Emergency) are in the pipeline.

## CHALLENGES

- Closure collective shelters and continuous movement of displaced families.
- 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 and first responders.
- Significant distress and fear within the affected population, with households not returning to residences.
- Ongoing fuel crisis has hindered response efforts.
- 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 the most affected populations.
- Facilitated entry and distribution of medicines, supplies, equipment, and surge support staff.
- Continuity of health care services, especially for women, children, elderly, and persons with NCDs.
- Ensured access to MHPSS for the affected population, particularly children.
- Noncommunicable diseases treatment.
- Fuel for response to enable ambulance transport, MMTs, community outreach, as well as continuous electricity at hospitals and health facilities.
- Support to partners, in particular NGOs providing immediate services, to ensure supply of sufficient safe water and continuation of essential health services.

## FUNDING NEEDS FOR IMMEDIATE RESPONSE

For the first 3 months, WHO estimates it will require 18 million US\$ for immediate response needs in Syria. Further resources will be required to support repair and rehabilitation of affected health facilities, as well as respond to anticipated outbreaks and the longer-term health needs of those affected by the crisis.

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To support WHO's response in SYRIA, please visit:

<https://earthquakeresponse-turkiyesyria.who.foundation/>

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