

# Whole of Syria Earthquake Response: Situation Report

Period of report: 20-26 February 2023

To support WHO's response efforts, please visit:

[WHO flash appeal: Earthquake response in Türkiye and Whole of Syria](#)

For the latest data/information on the earthquake, please see:

[WHO Earthquake Dashboard for Northwest Syria](#)

[WHO Earthquake Dashboard for Syria](#)

## 1. EVENT HIGHLIGHTS

11,000+



5900+



7.1m+



453,000+



*All figures are estimates, data sources include Syria Ministry of Health, UN Office for the Coordination of Humanitarian affairs (UNOCHA), Camp Coordination and Camp Management (CCCM) Cluster*

### Priority needs

- Urgent need of medicines and medical supplies for primary health care (PHC) facilities, hospitals and specialized centres, and management of noncommunicable disease (NCDs).
- Maintaining continuity of care following significant disruption to essential health services across Syria.
- Increasing mental health and psychological support (MPHSS), especially to older people, children and women, due to increased needs in all areas in Syria.

### Priority concerns

- Significant disruption to essential health services for people displaced by the earthquake and difficulty in providing health care to people currently living in reception centres and collective shelters;
- Rapidly re-establishing care pathways for patients requiring advanced care, including oncology or advanced cardiology services, due to the temporary suspension of medical referrals from Northwest Syria into Türkiye;
- Temporary disruption of cholera treatment centres/units (CTCs/CTUs), Oral Rehydration Points (ORPs), and infection prevention and control (IPC) measures;
- Mental health and psychosocial support (MHPSS) for the affected population, first responders, and people who are experiencing burnout and distress due to continued response efforts; and
- Potential for a surge in respiratory illnesses, including COVID-19, and waterborne and foodborne illness, including cholera.

### Key WHO actions

- A WHO mission involving WHO's Regional Emergency Directors for Europe and the Eastern Mediterranean arrived in Gaziantep, Türkiye to support the expansion of WHO operations into Northwest Syria. The directors traveled into Northwest Syria and were able to visit Harem and Salqin districts in Idleb Governorate, meet partners and visit affected health facilities.

- During the reporting period, WHO supported 37 hospitals, 89 PHCs and other health facilities in Northwest Syria with essential medicines, kits and consumables. Since the 6 February, WHO has already distributed kits and supplies for more than 2.4 million treatments<sup>1</sup>;
- WHO supported the deployment of 30 mobile medical teams (MMTs) and 100 MHPSS outreach teams, in coordination with Directorates of Health (DOH), Directorates of Education (DoE) and local nongovernment organizations (NGOs) in Aleppo, Hama, Latakia and Tartous. In Idleb and northern Aleppo, WHO and the Health Cluster have coordinated the work of 64 mobile clinics and 20 mobile teams, all serving earthquake affected communities.
- Within the Early Warning, Alert and Response System (EWARS), all collective shelter sites have been added to the database to enable regular reporting on any alerts received from Rapid Response Teams (RRTs) monitoring the sites and/or mobile medical teams (MMTs) regularly visiting these locations to provide healthcare. In Northwest Syria, WHO has re-established the functionality of the Early Warning, Alert and Response Network (EWARN) and have reviewed the list of notifiable syndromes to reflect the post-disaster risks.
- Following a drastic drop in tuberculosis (TB) case detection, WHO has activated outreach teams to refer suspected TB cases to reception centres in order to record all patients.

## 2. SITUATION UPDATE



WHO visiting people that lost their home in Idleb. © OCHA/Madevi Sun-Suon.

Over 5900 people have lost their lives and more than 11 000 have been injured due to the earthquake that struck southern Türkiye and the Syrian Arab Republic (hereafter Syria) in the early morning of 6 February 2023. In Syria, the governorates of Aleppo, Idleb, Latakia, Hama and Tartous have been affected. The highest number of deaths have been recorded in Harim and Salqin in Idleb countryside, and Afrin and Jandairis in

<sup>1</sup> One patient may receive more than one treatment.

Aleppo countryside. The earthquake and subsequent aftershocks have destroyed over 1700 buildings and damaged more than 8500 buildings in Northwest Syria.

The situation in the affected areas remains alarming with hundreds of thousands of people still displaced, living in reception and collective shelters or in host communities. More than 453 000 people have been displaced due to the earthquake, including 50 000 families who have been displaced in Aleppo, Homs, Hama and Latakia as per the [situation report published by UNOCHA on 25 February](#). Some 77% of people staying at reception centres are women and children. In Aleppo City and Latakia City, the shelter situation continues to be dynamic with collective shelters opening and closing spontaneously and daily changes to the population within. Displaced people are accommodated in mosques, churches, schools, and private houses.

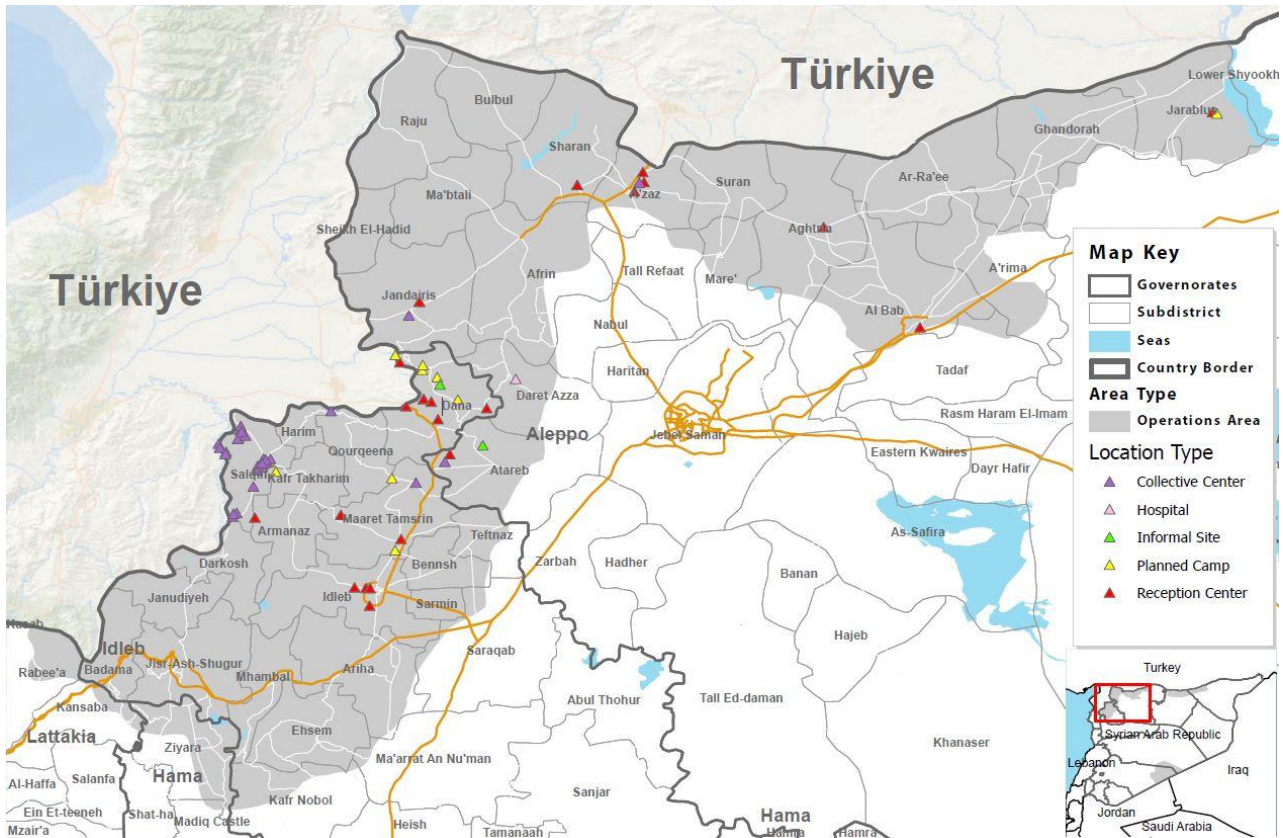


Figure 1: Map displaying reception and collective centers in Northwest Syria as of 26 February. © Global Camp Coordination and Camp Management (CCCM) Cluster

The health services of a catchment population of approximately 7.1 million have been affected by the non-functionality of health facilities. Public health and health services are resuming, but in many areas basic infrastructures are disrupted and health facilities remain damaged. At least 116 health facilities – 54 in Latakia, 48 in Hama and 14 in Aleppo, – are reportedly damaged so far, including at least seven hospitals, with assessments ongoing. In Northwest Syria, an additional 55 health facilities have been damaged, of which five are fully damaged, 15 health facilities had to suspend their operations and 18 health facilities have reduced functionality due to earthquake damage. The Health Cluster conducted a water, sanitation and hygiene (WASH) survey, assessing 204 health facilities in Northwest Syria. Results show that 42% of health facilities need support with latrines, 18% with showers, 73% with cleaning supplies, 48% with water chlorination and 61% need sterilization equipment.

Initial analysis by trauma specialists reveals that the overall ratio of deaths to injuries in the whole of Syria is 1:2 which is considerably higher than the average figure for regional earthquakes of 1:4. Soft storey construction, limited search and rescue capacity – particularly a lack of heavy equipment - as well as the cumulative effects of 12 years of crisis, may have contributed to these elevated figures.

Hospitals and health facilities lack essential medications, especially those needed for the treatment of mental health conditions and non-communicable disease. The mental health and well-being of affected populations and health workers remains a serious concern.

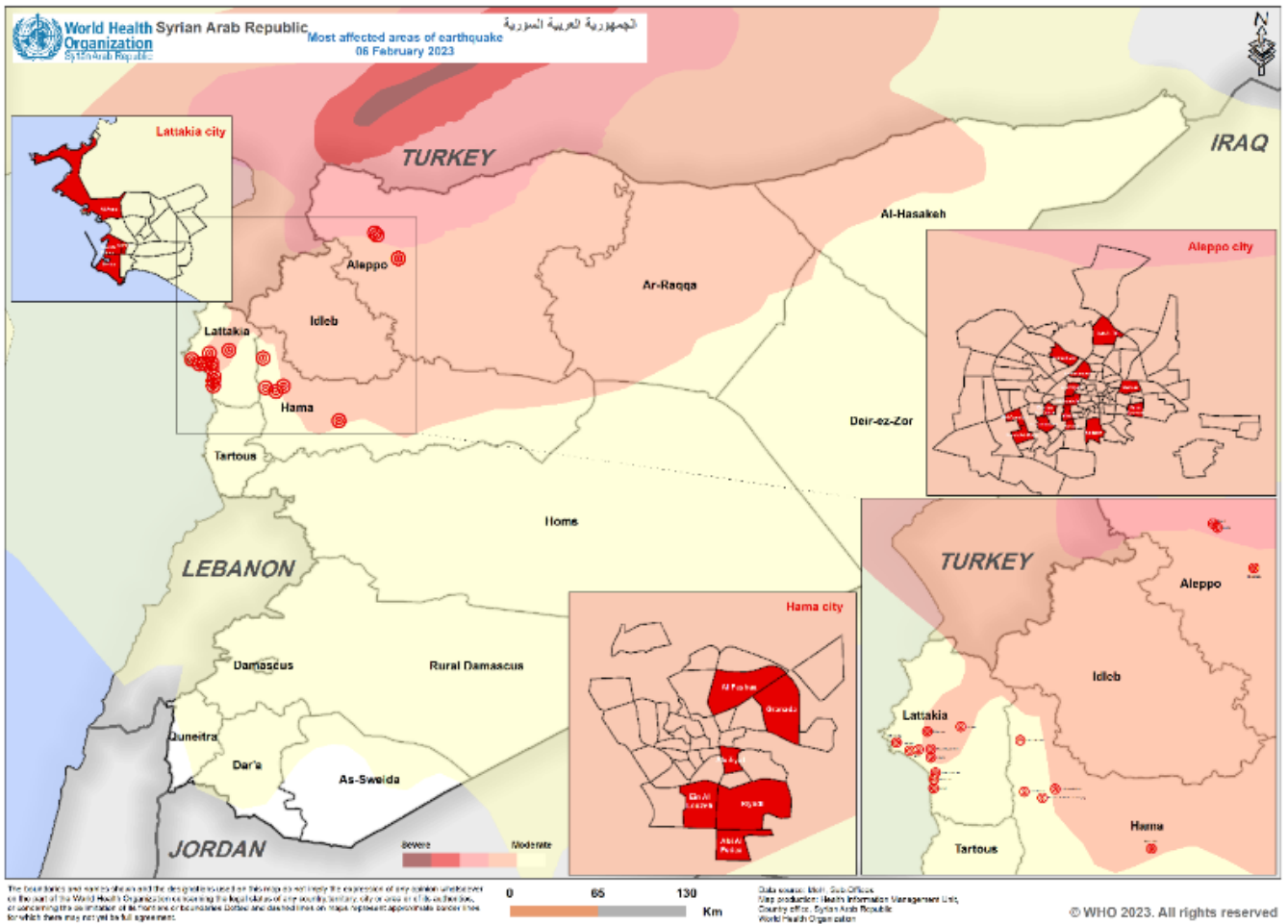


Figure 2: Map of earthquake affected areas in Syrian Arab Republic as of 26 February 2023

### Public health concerns

- Broader disruptions of specialized services across Northwest Syria, including maternal and neonatal care, nutrition stabilization centres, blood banks, non-communicable services, including dialysis and tuberculosis (TB) centres. The hospitals are overwhelmed.
- Significant decrease in newly diagnosed TB cases due to the loss of access to services after the earthquake. The week before the earthquake, nine TB cases were detected in Northwest Syria, while in the three weeks following the earthquake, only three TB cases were diagnosed.
- According to [UNOCHA](#), a rapid protection assessment noted elevated levels of distress among the affected population. Many exhibit signs of post-traumatic stress disorder, including anxiety, panic attacks, sleep disorders, depression, and symptoms of post-earthquake dizziness syndrome. Children suffer from distress, violence, symptoms of urinary incontinence and panic attacks. The mental health of first responders and others who are experiencing burnout and distress due to continued response efforts also remains a key concern.



Collective shelter in Lattakia @WHO

- Overcrowding is the most common issue in the collective shelters where many families are living in the same space without any privacy and with concerns for their safety. Harassment and gender-based violence (GBV) risks affecting the most vulnerable, including women and adolescent girls.
- Furthermore, due to overcrowded conditions and lack of sufficient WASH facilities at collective shelters, cases of lice and scabies are on the rise. Lack of sufficient WASH facilities also contributes to other critical health concerns, including reproductive and urinary tract infections. Many women lack access to water, privacy or supplies for menstrual hygiene management.
- The risk of wound infection and tetanus remains high due to difficulties related to provision of immediate health care, access to health facilities and delayed admission to hospitals for acute injuries.
- The [Whole of Syria Nutrition cluster](#) estimates that 918 000 people are in need of nutrition support in earthquake-affected areas.
- The dialysis center in Jandairis city in Northwest Syria, affected by the earthquakes, resumed its services on 18 February, but after the earthquakes of 20 February, the centre was suspended again and is now based in a tent outside the building.

### 3. ACTIONS TO DATE

WHO's goal is to save lives in the immediate aftermath of the disaster; mitigate health consequences, including threats to mental health and wellbeing and risks of communicable disease; and rapidly restore essential health services across all earthquake-affected populations.

### 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.
- During the reporting period, eight additional surge personnel have been deployed to increase WHO's local capacity in Gaziantep.
- WHO is currently negotiating access to Northwest Syria for Emergency Medical Teams (EMTs). Planned EMT activity in Northwest Syria will focus on specialized reconstructive surgical care and maternal and child health. This is based on a needs analysis of the most up-to-date situation, including the suspension of previous arrangements for medical evacuation to Türkiye.
- In the meantime, a primary care/ outpatient facility has been donated by [Arbeiter-Samariter-Bund](#) in Jandairis and is being staffed by local partners.
- The governor's offices in Aleppo and Latakia have established a coordination room to oversee relief and assistance activities.

### Health information and planning

- Within EWARS, all collective shelter sites in Syria have been added to the database to enable regular reporting on any alerts received from RRTs and MMTs.
- WHO provided additional surveillance and reporting training to:
  - 45 EWARS focal points in Latakia
  - 107 RRT workers in Latakia
  - 10 NGOs deployed to support displaced populations in Latakia
  - 8 surveillance teams and RRTs in Homs
  - 106 health personnel from DOH and NGOS in Aleppo.
- WHO supported eight RRTs from the DoH in conducting daily visits to shelters in Latakia and Tartous.
- In Aleppo, WHO supported the DoH to deploy 13 additional RRTs, bringing the total number of teams operating there to 25. The most commonly detected concerns were, in order of frequency, influenza, acute diarrhea, lice and scabies, leishmaniasis, acute jaundice syndrome, and suspected TB.
- During the reporting week, WHO and partners re-established functional surveillance reporting in all three Early Warning, Response and Alert Network (EWARN) labs in Northwest Syria. EWARN completeness rate reached 98.2%. However, in light of the increased needs caused by the earthquake, the EWARN lacks sufficient laboratory supplies to monitor outbreaks, in particular for cholera. Since August 2022, over 50 000 suspected cholera cases have been reported in Northwest Syria. Between 6 – 12 February 2023, the week of the earthquake, reported cases declined by 63%. Since then, surveillance has resumed and 1784 new cases were reported between 20 – 26 February 2023. Despite the high risk, there is currently no sign of widespread cholera outbreaks. WHO maintains a [Cholera Response Tracking Dashboard](#) which provides key information for planning cholera response activity.

### Health Operations and Technical Expertise

- WHO has completed rapid trauma referral pathway assessments for eight hospitals<sup>2</sup> in Aleppo, Hama, Latakia and Tartous governorates.
- Referral networks are again functional in Northwest Syria. There are additional referral needs due to the earthquakes, in particular for ambulances. WHO and partners have mapped available facilities in the areas surrounding reception centres in support of the people living there.

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<sup>2</sup> Hama National Hospital, Sqelbiya Hospitals Aleppo University Hospital, Al-Razi Hospital, Tishreen University Hospital (MoHE), Latakia National Hospital, Jableh Hospital, and Al-Basel Hospital.

- Patient pathways for advanced or specialized care in Northwest Syria require redefining as the previously established pathway into Türkiye remains disrupted due to the impact of the earthquake across the border.
- WHO has supported 30 MMTs in Latakia and Tartous (10), Aleppo (13) and Hama (7) in providing comprehensive health services (internal medicine, gynaecology, paediatrics, immunization, nutrition and child health, health education) to the most affected communities, working closely with UNICEF and UNFPA.
- WHO MMTs have screened 12 690 children aged under 5 years in Aleppo, Latakia, Hama and Idlib for malnutrition. 68 cases of malnutrition have been diagnosed. 48 children with severe acute malnutrition (SAM) were admitted to stabilization centres, 17 of these have since been discharged.
- In Hama, 26 people living with HIV (PLHIV) were screened for malnutrition, of whom 5 were diagnosed with SAM and referred for treatment. In Aleppo, all registered PLHIV have been traced and confirmed as staying in safe locations. Tracing to contact all registered TB patients is ongoing.
- Around 60% of patients with crush syndrome have recovered, 15% have died and 25% are currently receiving emergency dialysis care in Northwest Syria.
- There are 73 mobile clinics providing reception centres with primary health care services in Northwest Syria. 71 PHC facilities have been identified to receive further support by WHO with 20 of these identified as top priority.
- Most routine vaccination activity in Northwest Syria has resumed: 90 routine vaccination centres (EPI) out of 93 are functioning and 127 out of 133 teams operational.
- The preparation for a campaign to administer over 1.7 million doses of oral cholera vaccine is underway in Northwest Syria. The official start of the campaign is planned for 7 March 2023. However, already, approximately 3 000 doses have been administered at reception centres and surroundings to individuals aged over one year.
- In the rest of Syria, routine immunization and WHO-supported measles mop-up activities are also being delivered across all affected areas by DoH teams. In a recent assessment of collective shelters, 30% of respondents report having been targeted by vaccination campaigns<sup>3</sup>.
- Six CTCs in Northwest Syria have resumed operations, while two remain closed. WHO is coordinating partners to augment the cholera response by providing a planned additional 2 CTCs in areas of earthquake displacement.
- Through direct support from WHO, and the MHPSS Health Cluster sub-working group, a total of 100 MHPSS teams have been deployed in coordination with the DoH, DoE and local NGOs to Aleppo (35), Latakia (35), Tartous (8), Hama (20) and Idlib (2). A referral system has been established to connect patients in need of specialized services with second level treatments.
- WHO is coordinating the redistribution of mental health and psychosocial support (MHPSS) services to reception centres. Under WHO's response to the earthquake, 340 children have received psychosocial support sessions in Northwest Syria.

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

- WHO finalized its risk communication outreach package, which has been printed and disseminated to health mobile outreach teams in earthquake affected areas.
- WHO continues to conduct daily social listening to detect emerging issues, needs and concerns coming from online digital platforms.
- Posters have been developed on PRSEAH for printing and display in WHO-supported health services to encourage reporting of incidents of abuse.
- WHO risk communication and community engagement (RCCE) partners have reached approximately 90 000 people through field visits carried out by over 340 Community Health Workers (CHWs) and Social Mobilizers (SMs) in Northwest Syria. The CHWs and SMs also visited 43 temporary shelters, and

<sup>3</sup> UNOCHA Syrian Arab Republic Earthquakes, Situation Report No. 1, 25 February 2023

provided awareness sessions to 30 702 people. RCCE partners promptly deployed CHWs to Jandairis upon learning of a need for cholera-awareness raising there.

- These awareness sessions have focused on communicable diseases (especially cholera and acute watery diarrhoea) which have been exacerbated by damaged sewage and water systems. So far, RCCE partners have referred 329 suspected cases of cholera to CTCs.
- RCCE partners primarily used face-to-face activities to disseminate messages, also displaying print materials when possible. Partners shared awareness messages on general earthquake safety, cholera, COVID-19 and other respiratory illnesses, MHPSS, infant and young child feeding in emergencies, and prevention of lice and scabies.
- As soon as the need for cholera awareness-raising in Jandairis was received last week, one of the RCCE partners promptly deployed CHWs on the ground to conduct needed sessions.
- The field teams have also identified and referred other medical concerns related to scabies and lice, sexual and reproductive health (SRH), child health, and internal medicine.

### Supplies and logistics



Trucks leaving the warehouse in Idleb to deliver supplies to health facilities. ©HiHFAD

- From 17 to 22 February, medical supplies weighing 24 tons (188m<sup>3</sup>) valued at US \$247 512 have been delivered to earthquake-affected areas in Aleppo, Latakia, Tartous, Hama and Homs. Since 6 February, WHO has delivered a total of 141 metric tonnes (804m<sup>3</sup>) of medicines, medical supplies, and equipment, valued at US \$1.1m and accounting for 92 838 treatment courses and 15 787 trauma cases to these areas of Syria.
- Between 20 - 26 February, WHO has delivered trauma and emergency surgery supplies and interagency emergency health supplies suitable for at least 8000 trauma patients to Northwest Syria. Since 6 February, WHO has dispatched 209 metric tonnes (1050m<sup>3</sup>) of medicines, medical supplies and equipment, valued at over US \$2.1m and accounting for over 4m treatments and 10 500 trauma cases for use in Northwest Syria.
- Between 20 – 26 February, WHO distributed essential medicines, medical supplies and equipment to support 126 health care facilities and provide 322 630 treatment courses in Northwest Syria. Since 6 February WHO has distributed medicines, medical supplies and equipment to support 188 hospitals and healthcare facilities and provide 2.4m treatment courses.





Charter flight arrives at Damascus airport carrying essential health items including medicines and supplies to address trauma needs and respond to the cholera outbreak in Syria. @WHO

### Operational Partnerships

- In Aleppo, Latakia and Hama, WHO has established partnerships with 12 local and national NGOs to support the deployment of MMTs and MHPSS teams to collective shelters and areas with a high volume of displaced people. These teams provide consultations for primary care and MHPSS, treatment and referral. Primary care services include management of NCDs, MHPSS, child health and nutrition, treatment of leishmaniasis, COVID-19 vaccination, HIV and TB treatment.
- As a result, more than 100 shelters (of an estimated 200+) have benefitted from essential health services. 48 358 primary care consultations and 26 228 mental health consultations have been supported and 26 732 treatment courses have been dispensed so far.

### Resource Mobilization

- The WHO Flash appeal estimates that the earthquake response in the Whole of Syria requires US \$33.7m.
- WHO's Contingency Fund for Emergencies has provided a loan of US \$11.3m.
- The UN Central Emergency Response Fund and US Bureau of Humanitarian Assistance have together provided US \$6.5m, and a further US \$4.75m has been pledged.

## 4. KEY NEXT STEPS

WHO is focused on the following priorities:

- Ensuring access to health care for the affected population regardless of where they may be;
- Delivery of health supplies and other lifesaving supplies to the millions of people affected;
- Preparing for secondary effects of the earthquake including:
  - disease outbreaks
  - MHPSS needs - including targeted interventions for the health workforce
  - exacerbation of existing health conditions (especially non communicable diseases) due to exposure to harsh weather conditions and/or interrupted medication supplies; and
  - malnutrition;
- Launching the oral cholera vaccination campaign in Northwest Syria on 7 March 2023 to tackle the risk of cholera, in collaboration with the Syria Immunization Group;
- Ensuring access to safe and sufficient WASH amid concern of damage to water systems and an ongoing cholera outbreak;
- Reinforcement of disease prevention, surveillance and response activities at emergency shelters and amongst displaced populations;
- Replacing damaged ambulances and specialized medical equipment in coordination with UN agencies and partners, particularly those essential for trauma and surgical care and equipment needed for diagnoses such as CT scans, dialysis kits, MRIs, and X-rays;
- Supporting patient referral pathways and increasing support to patients requiring advanced or specialized care;
- Assessing and rehabilitating public health facilities.