

Whole of Syria Earthquake Response: Situation Report

Reporting Period: 27 February – 5 March 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 Syria](#)

WHO Earthquake Response [Dashboard](#) and [Data Portal](#) for Northwest Syria

1. EVENT HIGHLIGHTS

11,200+

 INJURED

5900+

 DEATHS

8.8M

 AFFECTED
POPULATIONS

453,000+

 DISPLACED

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



Figure 1: WHO Director-General visiting a WHO-supported mobile health clinic in an emergency shelter in Idlib Governorate, Syria. ©WHO

Priority needs

- Reinforcement of active communicable disease surveillance and response in earthquake-affected areas, especially in emergency shelters.
- Urgent provision of medicines and medical supplies for primary health care (PHC) facilities, hospitals and specialized centres, and management of noncommunicable disease (NCDs).
- Continued care for people with injuries and rapid scale-up of physical rehabilitation services and provision of assistive devices.
- Maintained continuity of care following significant disruption to essential health services across Syria.
- Increased mental health and psychological support (MPHSS), especially to older people, children, and women, due to increased needs in all areas in Syria.

Priority concerns

- Referrals from Northwest Syria to Türkiye for critically ill patients have decreased significantly. Patients requiring advanced care, including oncology or cardiology services that are unavailable in Northwest Syria, remain a major concern.
- Earthquakes may have caused the shift of unexploded ordnance (UXO)¹ in conflict-affected areas, putting populations at risk in areas without recent UXO incidents. This unearthing of the UXOs may lead to additional morbidity and mortality.
- The laboratory for diagnosing tuberculosis (TB) in Antakya, Türkiye, is critical to TB surveillance in Northwest Syria. However, it remains closed due to safety reasons, hindering timely diagnosis.
- There is an unmet need for specialized care for injured trauma patients, such as for reconstructive surgery, neurosurgery and physical rehabilitation.

Key WHO actions

- On 1 March, a [WHO mission led by the WHO Director-General Dr Tedros visited Northwest Syria](#) to meet with partners and visit an emergency centre in Harim, an orthopaedic hospital in Aqrabate, and a general hospital in Bab Al-Hawa. [Dr Tedros is the first United Nations \(UN\) principal to enter Northwest Syria since the beginning of the conflict](#), 12 years ago.
- During the reporting period, WHO supported 53 hospitals and 154 PHCs and other health facilities in Northwest Syria with essential medicines, kits and consumables. Since 6 February, WHO has distributed kits and supplies for more than 2.9 million treatments². Additionally, two WHO trucks carrying essential medicines and trauma kits crossed the border into Northwest Syria through Bab Al-Hawa and Bab Al-Salama, providing close to 100,000 treatments and care for over 3000 trauma cases.
- WHO has provided MPHSS sessions to at least 200 health workers and humanitarian personnel involved in the frontline response.
- The trauma and disability working group developed a response strategy to address the needs of people injured by the earthquakes.

¹ Explosive ordnance that has been primed, fused, armed, or otherwise prepared for use and used in an armed conflict. It may have been fired, dropped, launched or projected and should have exploded but failed to do so. Link: https://www.un.org/en/genocideprevention/documents/atrocities-crimes/Doc.46_CCW%20P-V.pdf

² A patient may receive more than one treatment.

2. SITUATION UPDATE



Figure 2: The TB diagnosis lab in Antakya. ©Hatay Health Directorate

One month has passed since a 7.8-magnitude earthquake struck the country on 6 February, followed by nearly 14000 aftershocks. Earthquake survivors are dealing with the loss of their loved ones. They are struggling with a lack of water and sanitation facilities, and with mental health impacts due to the trauma of the earthquake. Pre-existing risks of cholera and measles have been exacerbated. According to a preliminary World Bank Global Rapid Post-Disaster Damage Estimation (GRADE) [report](#), using a remote desk-based methodology, released on 3 March, the earthquake caused an estimated US\$ 5.1 billion in direct physical damage in Syria. The report does not cover broader economic impact and losses for the Syrian economy, nor does it include a detailed account of the cost of replacing specialized medical equipment in hospitals and health facilities such as MRIs and CT scanners. The crisis in Syria began in March 2011 and has led to millions of people being displaced from their homes. The earthquake has caused the further displacement of over 453,000 people, including children.

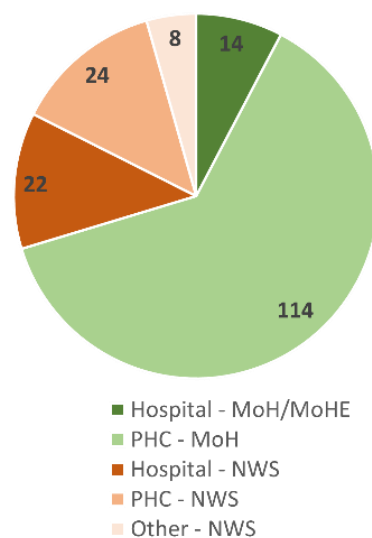
Over 5900 people have lost their lives and more than 11,200 have been injured across earthquake-affected communities in Syria. In many areas of Northwest Syria, energy and water systems remain non-functional. The earthquake and subsequent aftershocks have destroyed over 1700 buildings and damaged more than 8500 others in Northwest Syria, with operations ongoing to remove debris. Last week, 23 internally displaced persons (IDP) sites were impacted by a storm that destroyed 79 tents and damaged 176.

Due to the non-functionality of health facilities, the health services of a catchment population of approximately 8.8 million have been affected with at least 182 health facilities being damaged. A rapid Health Resources and Services Availability Monitoring System (HeRAMS)³ exercise conducted in the earthquake-affected areas in Syria identified 46 hospitals and 147 PHC centers have been damaged in Aleppo, Homs, Hama and Latakia. Additionally, health services in 33 PHC centers and nine hospitals were disrupted by the earthquake.

An inter-sectoral crossline mission conducted on 3 March to Tel Refaat and Fafin in northern Aleppo revealed nearly 1000 accommodations to be damaged and an estimated 4000 newly displaced families. Health care centers in the area reportedly sustained minimal damage with 2 hospitals and at least 2 primary health centers continuing to operate.

Approximately 54,000 people are still living in 77 emergency shelters in Northwest Syria. Only 13% of these shelters are planned camps while the other sites are either disorganized and self-settled camps lacking site

Whole of Syria Rapid HERAMS Exercise:
Health Facilities Damaged by EQ in Syria



³ <https://www.who.int/initiatives/herams>

planning, or emergency centres, health facilities and schools. As of 5 March, 27 of 77 emergency shelter sites were closed. Nearly 80% of people living in emergency shelters are women and children.

The most urgent needs include the provision of plastic and orthopedic surgery, physical rehabilitation, prosthetics, and assistive devices. The extreme trauma caused by the earthquakes and its thousands of aftershocks, continue to increase mental health needs. Continuity of care for underlying conditions to prevent morbidity, particularly among those with noncommunicable disease, is a critical need.

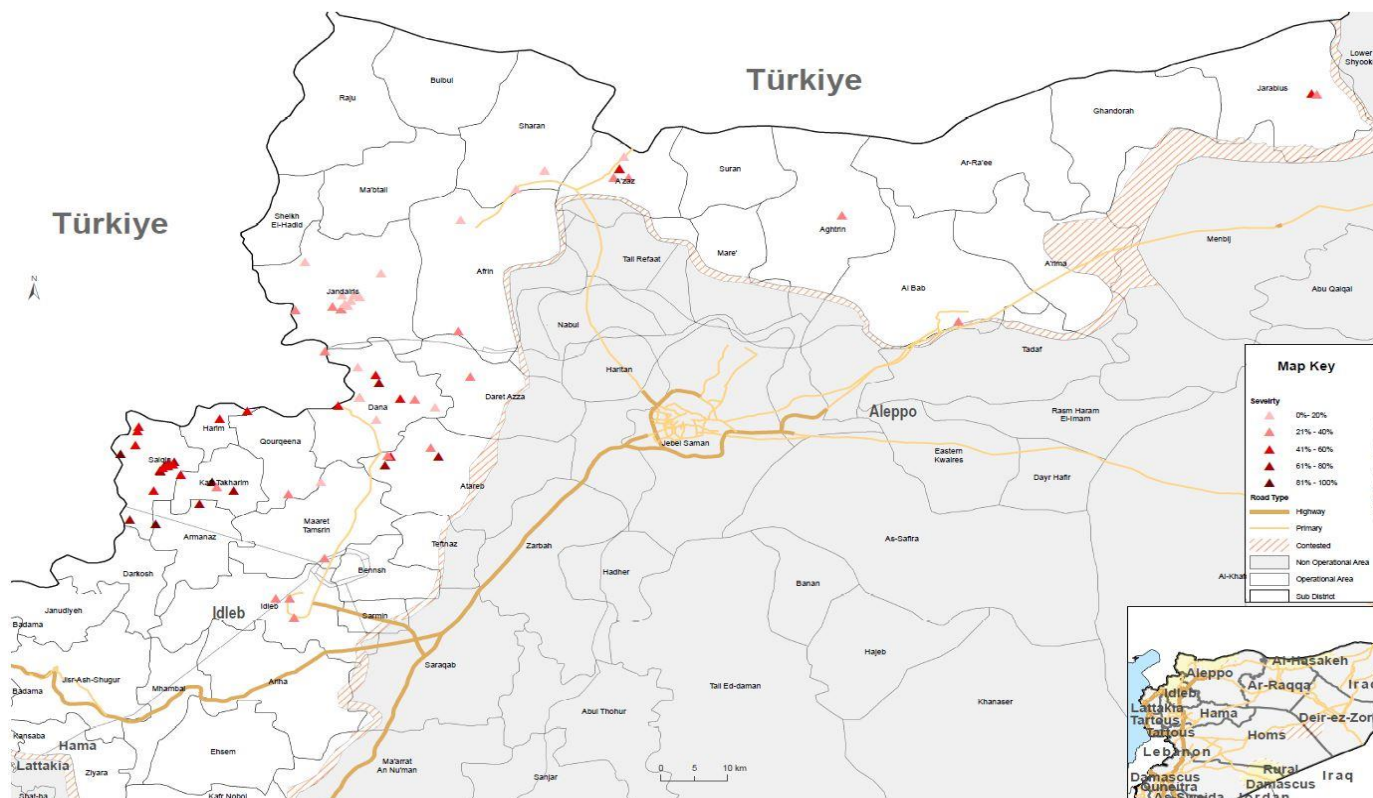


Figure 3: Emergency shelters in Northwest Syria as of 5 March. © Global Camp Coordination and Camp Management (CCCM) Cluster

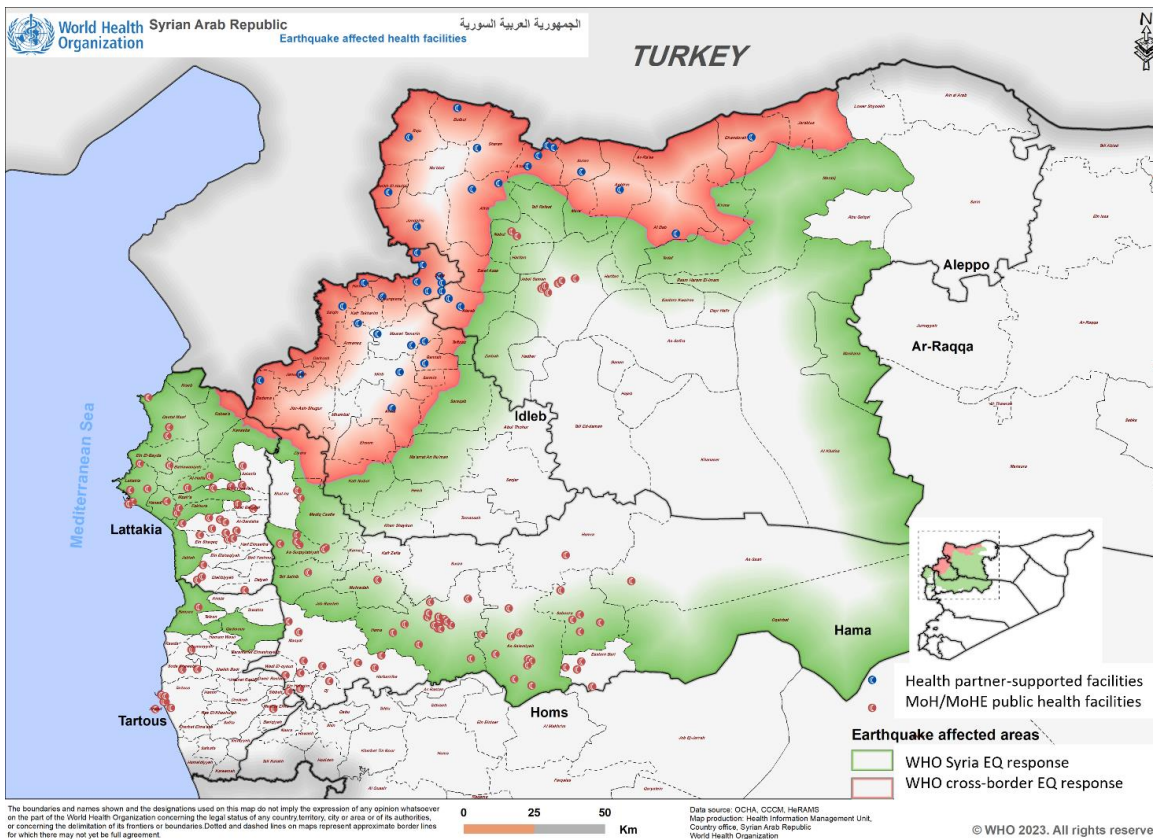


Figure 4: Health facilities in earthquake-affected areas of Syria as of 3 March

Public health concerns

Broader disruptions of specialized services, including maternal and neonatal care, nutrition stabilization centres, blood banks, noncommunicable disease services, including dialysis. Hospitals are overwhelmed.

- **Communicable diseases:** Significant decrease in newly diagnosed TB cases due to 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.
- **Waterborne diseases:** Cholera outbreaks in Northwest Syria and the dire water, sanitation, and hygiene (WASH) situation in many emergency shelters, Aleppo and areas indirectly affected by the earthquake - particularly Northeast Syria - remain at critical risk. The area was heavily affected by cholera in the latter part of 2022 and the regions have waterway connectivity and population movements.
- **MHPSS:** 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.
- **Sexual and gender-based violence (SGBV):** Overcrowding and a lack of electricity or lighting are common issues in emergency shelters where many families are living in the same space without any privacy and with concerns for their safety. Harassment and SGBV risks affecting the most vulnerable, including women and adolescent girls.
- **WASH:** Due to overcrowded conditions and lack of sufficient WASH facilities at emergency 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.

- **Vaccine preventable diseases:** The risk of wound infection and tetanus remains high due to difficulties in provision of immediate health care, access to health facilities and delayed admission to hospitals for acute injuries.
- **Nutrition:** The [Whole of Syria Nutrition cluster](#) estimates that 918 000 people are in need of nutrition support in earthquake-affected areas.

3. ACTIONS TO DATE

WHO's goal is to save lives in the immediate aftermath of the disaster, mitigate longer-term health consequences, and rapidly restore essential health services across all earthquake-affected populations.

Leadership and coordination

- In Aleppo, Latakia and Hama, WHO has established partnerships with 27 local and national NGOs to support the deployment of mobile medical teams (MMTs) and MHPSS teams to emergency shelters and to areas with a high volume of displaced people.
- Since 6 February, 22 surge personnel in total have been deployed to increase WHO's local capacity in Gaziantep.
- WHO continues to negotiate access to Northwest Syria for Emergency Medical Teams (EMTs) specialized in limb reconstructive surgery 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.
- A second primary care/outpatient facility in Northwest Syria has been donated to local partners by [International Medical Corps](#) with the support of WHO.
- WHO continues to coordinate with national and local authorities, including emergency operation centres which were established by governors' offices in Aleppo and Latakia, to oversee relief and assistance activities.

Health information and planning

- WHO launched a [data portal](#) for the earthquake response in Northwest Syria, which includes situation updates, technical dashboards and other tools to inform humanitarian/health responders.
- An updated mapping tool of rehabilitation activities in Northwest Syria has been developed and shared with partners.
- 100 copies of the [WHO handbook "Early rehabilitation in conflict and disaster"](#) have been printed and shared with partners in Northwest Syria.
- Cholera surveillance activities have been expanded to cover all emergency shelters in Northwest Syria. Updated figures are available at the [Cholera Response Tracking Dashboard](#).
- A post-disaster needs assessment will be undertaken in Syria. WHO will lead the health assessment element in collaboration with other UN health agencies and national and local authorities enabling a "build back better" approach to early recovery from the earthquake. The results are expected mid-April, with preliminary findings to be shared mid-March. In addition to leading the health assessment, WHO is providing technical advice and training.
- To date, WHO has provided additional surveillance and reporting training to:
 - 196 Early Warning, Alert and Response System (EWARS) focal points in Aleppo and Latakia
 - 45 rapid response team (RRT) workers in Aleppo and Latakia
 - 76 NGOs deployed to support displaced populations in Aleppo and Latakia
 - 8 surveillance teams and RRTs in Homs

- 106 health personnel from the DoH and NGOs in Aleppo
- WHO continues to support RRT operations across the affected areas. The most detected concerns were, in order of frequency:
 - Aleppo – influenza-like illness (ILI), acute diarrhea, lice and scabies
 - Latakia – ILI, acute diarrhea, lice, scabies and severe acute respiratory illness (SARI)
 - Hama – ILI, acute diarrhea, leishmaniasis, SARI and scabies

Health operations and technical expertise

- WHO has supported the development of the trauma operational plan for the Whole of Syria which details plans to augment the trauma care referral pathway. It includes the requirements for medicines, medical equipment and trauma and emergency surgery supplies to adequately provide life-saving interventions and sustained health care provision.
- During the reporting period, WHO MMTs screened 10 774 children under 5 years in Aleppo, Latakia, Hama and Idlib for malnutrition. The cases were referred to their respective clinics for follow up.
- WHO-supported WASH monitoring teams conducted water testing in 39 emergency shelters in Aleppo and Hama; 16% were found to be contaminated by bacteria. In response, WHO distributed 1650 water purification tablets to the affected population.
- With the support of WHO, a further cholera treatment centre (CTC) has resumed operation in Northwest Syria. One remains closed.
- All emergency centres in Northwest Syria now have access to primary health care (PHC), either via mobile clinics or via nearby PHC centres.
- As of 5 March, WHO and partners have vaccinated a total of 8692 people against cholera at emergency shelters in Harem, Afrin and Salqin. Pre-vaccination campaign training was delivered to 3372 staff in Idlib and Aleppo. A further 790 children in emergency shelters have received routine vaccinations.
- With WHO support, routine vaccination continues to be provided to affected areas in Aleppo, Latakia and Hama. Since 6 February, 32 558 children under 5 years have been vaccinated.
- WHO continues to co-chair the MHPSS technical working group in Syria while also supporting the operation of 100 MHPSS teams and providing psychotropic medication in Aleppo, Hama and Latakia.
- WHO has provided mental health training to doctors and nurses in emergency rooms at MoH hospitals in affected areas, and in Aleppo, Hama and Latakia has also distributed tools on self-help and stress management for frontline workers.



Figure 5: WHO supporting the training of frontline workers in Syria, in coordination with MoH, Ministry of Education, and NGOs on psychological first aid @ WHO .

- Mental health and psychosocial support services are now available in 121 sites in Northwest Syria, including 30 hospitals, 30 PHCs, 19 emergency shelters and 17 camps for displaced people.
- Since the earthquake, WHO has supported more than 5000 medical referrals to health facilities within Northwest Syria. International referrals remain largely suspended.

Risk communication and social mobilization

- In Northwest Syria, 800 group awareness sessions were carried out between 27 February - 5 March at over 30 emergency centres, reaching 10 277 people. Awareness sessions focused on psychological first aid and communicable diseases (especially cholera, acute watery diarrhoea, scabies, and COVID-19). They took place across 11 sub-districts, including Jisr-Ash Shugur, Azaz, Afrin, Atareb and Dana.
- Risk communication partners also referred 155 cases related to cholera, reproductive health, child health, internal medicine, and malnutrition – highlighting the valuable role they play in community awareness.

Supplies and logistics



Figure 6: WHO truck heading to Bab Al-Hawa border crossing gate on 1 March. ©WHO

- Between 23 February - 3 March, medical supplies valued at US\$ 620 000 and weighing 151 metric tonnes were delivered to Aleppo, Latakia, Tartous, Hama and Homs.
- Since 6 February, WHO has delivered a total of 303 metric tonnes of medicines, medical supplies, and equipment, valued at US \$1.7 million and accounting for 187 008 treatment courses, to Aleppo, Latakia, Tartous, Hama and Homs. This has covered the needs of at least 5390 families.
- Between 7 February - 5 March, WHO delivered trauma and emergency surgery supplies for 3100 trauma cases, and interagency emergency health supplies for 96 100 treatments to Northwest Syria.
- Since 6 February, WHO has dispatched emergency supplies and medicines worth US\$ 2.4 million to Northwest Syria, with a weight of 217 metric tonnes. These supplies are sufficient for over 4 million treatments and 13 600 trauma cases.
- Between 27 February - 5 March, WHO distributed essential medicines, medical supplies and equipment to support 207 health care facilities and provide 520 561 treatment courses in Northwest Syria. Since 6 February, WHO has distributed medicines, medical supplies and equipment to support 207 hospitals and healthcare facilities and provided 2.9 million treatment courses in this region.

Resource mobilization

- The WHO Flash appeal estimates that the earthquake response in the Whole of Syria requires US \$33.7 million.
- WHO's Contingency Fund for Emergencies has provided a loan of US \$11.3 million.
- The UN Central Emergency Response Fund (CERF) and US Bureau of Humanitarian Assistance (BHA) have together provided US \$6.5 million and a further US \$6.7 million has been pledged by CERF, BHA and Novo Nordisk Foundation.

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 life-saving 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 noncommunicable diseases) due to interrupted medication supplies
 - 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.