

Whole of Syria Earthquake Response: Situation Report

Reporting period: 6 – 12 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 earthquakes, please see:

[Syria Earthquake response](#)

[WHO Earthquake Dashboard for Syria](#)

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

[Health Cluster Cholera Response Tracking Dashboard](#)

1. EVENT HIGHLIGHTS

11 200

 INJURED

5900+

 DEATHS

8.8 M

 AFFECTED POPULATIONS

473 760

 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: A child receiving an oral cholera vaccine (OCV) on the first day of the vaccination campaign, 7 March 2023. ©SIG

Priority needs

- Reinforcement of active communicable disease surveillance and response in earthquake-affected areas, especially in emergency shelters.
- Urgent provision of medicines, medical supplies and equipment 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.
- Increased mental health and psychosocial support (MHPSS), especially to older people, children, and women, due to increased needs in all areas in Syria.
- The funding stream to support the response to the earthquakes is insufficient and gaps are exposing the most vulnerable people to acute health needs.

Priority concerns

- Due to crowded conditions in existing emergency shelters, there is a heightened risk of outbreaks and disease transmission, including the spread of respiratory illness such as COVID-19 and influenza, as well as the further spread of pre-existing outbreaks of cholera, hepatitis A and measles. During the reporting period, rapid diagnostic testing (RDTs) at cholera treatment centers (CTCs) were rolled out in Northwest Syria; however, a gap of 153 000 RDTs have been reported for the next three months.
- The earthquakes have increased the needs for mental health and psychosocial support (MHPSS) among the affected population and services are not available on the necessary scale.
- Referrals from Northwest Syria to Türkiye for critically ill patients have drastically decreased compared to before the earthquakes, and WHO remains particularly concerned about oncology and cardiology patients in Northwest Syria.

Priority actions

- WHO is leading the health component of a multi-sectoral post-disaster needs assessment known as the Syria Earthquake Rapid Needs Assessment (SERNA) which aims to bring together multiple assessments to estimate the impact – including damages and losses – of the recent series of earthquakes.
- As a rapid response to the earthquakes, WHO has deployed 30 mobile medical teams (MMTs) via WHO standing partnerships with NGOs in Aleppo, Latakia, and Hama. During the last week, 13 MMTs in Aleppo governorate provided 3870 outpatient consultations in 79 shelters.
- In shelters in Aleppo, Latakia, Homs and southern Idlib, 89% of children under the age of five have received routine vaccines including oral poliovirus vaccine (OPV), inactivated poliovirus vaccine (IPV), and measles.
- WHO launched 1.7 million doses for cholera vaccination campaign in Northwest Syria amidst the earthquake response. A total of 990 000 people (56% of the campaign target) has been vaccinated as of 12 March.
- On 12 March, a charter flight with over 130 cubic meters of medicines and supplies arrived to Türkiye and will be dispatched to Northwest Syria before the end of this month. Additionally, nine WHO trucks carrying essential medicines and trauma kits have crossed the border into Northwest Syria from Bab Al-Hawa during the reporting period. Furthermore, as part of sustaining essential health services and trauma care, WHO Syria has delivered medications and supplies to cover more than 552 000 treatments in 23 health facilities and public hospitals in the affected areas.

Public health concerns

There is a risk of broader disruptions of specialized services, including maternal and neonatal care, nutrition stabilization centres, blood banks, and noncommunicable disease services, including dialysis. Hospitals are overwhelmed and accessibility issues have been registered for the disabled and elderly population.

Across the affected communities, there are reported shortages of services at secondary health care level due to increased load and backlog of surgeries, shortage of health human resources, overuse/disruption of medical equipment, and shortage of medical supplies.

- **Communicable diseases:** There has been a significant decrease in newly-diagnosed tuberculosis (TB) cases due to loss of access to services after the earthquakes.
- **Waterborne diseases:** With the ongoing cholera outbreak and further crowded conditions in emergency shelters, in addition to the dire WASH situation, the risk of cholera cases and deaths remains. Since August 2022, over 55 000 suspected cholera cases and 23 deaths have been reported in Northwest Syria. The reporting of cases has declined due to surveillance activities being affected during the first few weeks of the emergency. In Aleppo, approximately two-thirds of the water network in the city has been affected, causing leakages due to structural damages and affecting access to safe and clean water. This heightens risks of water-borne disease and requires WASH interventions to improve access to safe drinking water, as well as risk communication efforts to prevent disease and use of contaminated water.
- **WASH:** Overcrowded conditions and the lack of sufficient WASH facilities at emergency shelters is posing a risk of spread of infectious and water-borne disease. Rapid response teams (RRTs) are reporting cases of respiratory infections, influenza-like illnesses, acute watery diarrhoea, hepatitis A, scabies, and lice. 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.
- **MHPSS:** Following the traumatic experience of the earthquakes, aftershocks and displacement in affected communities in Syria, many families and children continue to demonstrate significant distress and fear of returning to their homes, even if the structures have been assessed and confirmed as safe. Cases of post-traumatic stress disorder, anxiety, and panic attacks have been reported. As per [UNOCHA](#), at least one million people are in need of mental health support in Northwest Syria. 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 are particularly high risks for the most vulnerable, including women and adolescent girls.
- **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. Measles cases have been reported across the country, increasing the risk of an outbreak.
- **Nutrition:** The World Food Programme (WFP) estimates that [12 million people](#) do not know where they will get their next meal.

2. SITUATION UPDATE

The humanitarian situation after the earthquakes remains extremely dire. In many areas of Syria, energy and water systems remain non-functional. These earthquakes have further emphasized the weaknesses of an overburdened health system after 12 years of crisis. The system is no longer resilient to withstand any further crises, which increases the risk of lives being lost in case of another earthquake.

In Northwest Syria, operations to remove debris from over 10 000 buildings destroyed and damaged, including 55 health facilities, are ongoing. Over 1 400 last-resort camps host 1.9 million internally displaced people (IDPs) – 80% are women and children, and 80 000 are people with disabilities. The earthquakes obliged a further 108 000 Syrians to be on the move and 58 000 have gone to 70 emergency shelters¹, exceptionally established to provide short-term shelters for IDPs. For many of them, this is the third or fourth displacement.

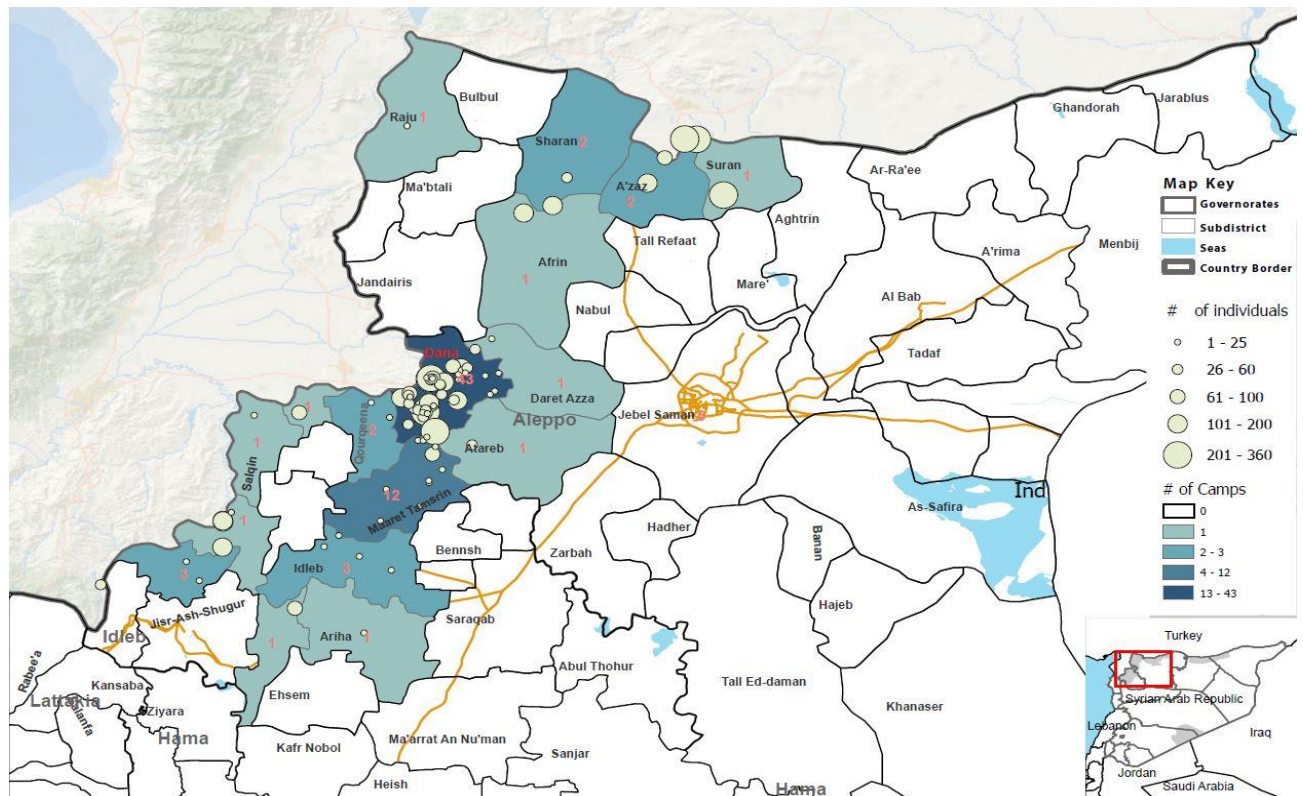


Figure 2: Map displaying displacements to camps within sub-district in Northwest Syria. ©CCCM Cluster

Since 6 February, over 5 900 people have lost their lives and more than 11 200 have been injured.

Last week, military activities on the ground intensified in Northwest Syria. Artillery shelling episodes reportedly took place in Idlib, western Aleppo and northern Latakia. Some civilian victims were injured including women and children, and one death was reported in western Aleppo.

¹ Emergency shelters include reception centres, collective centres, informal sites and camps.

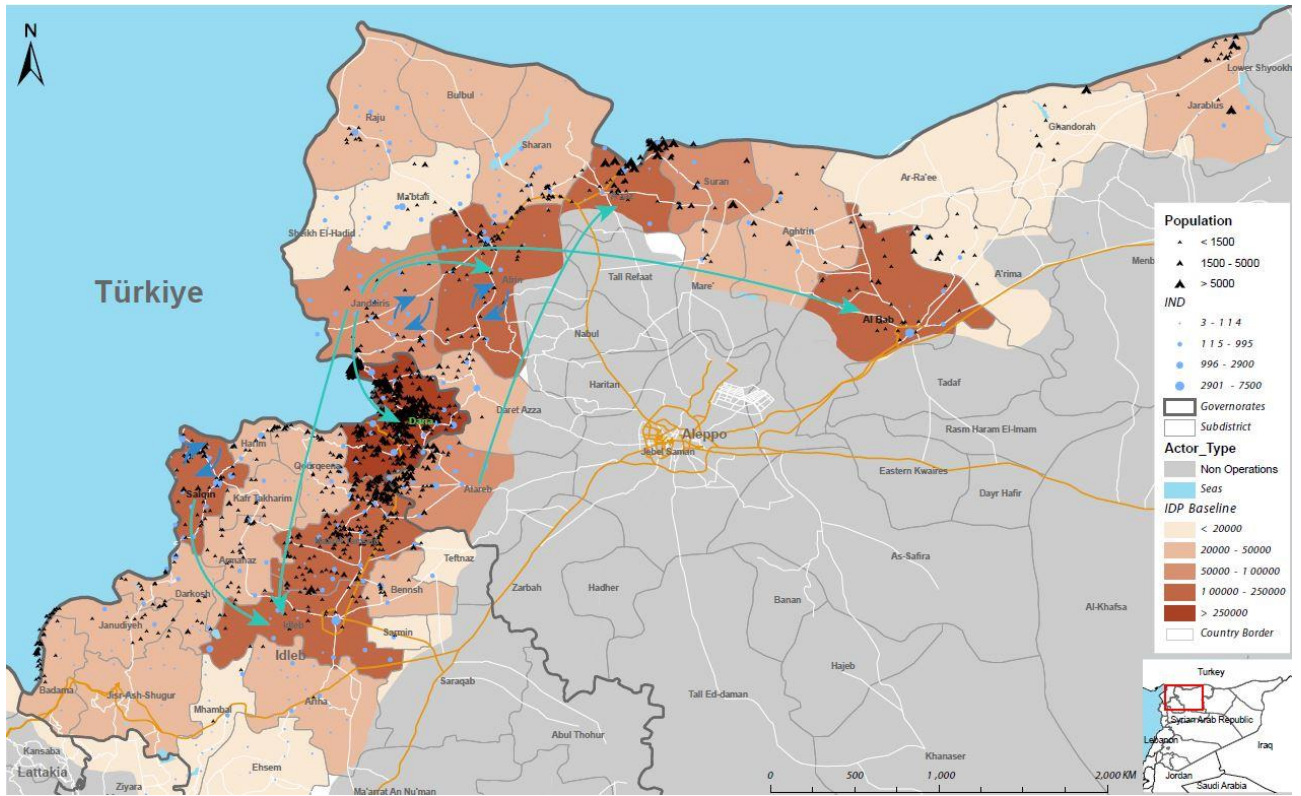


Figure 3: Map displaying displacement movements in Northwest Syria. ©CCCM Cluster

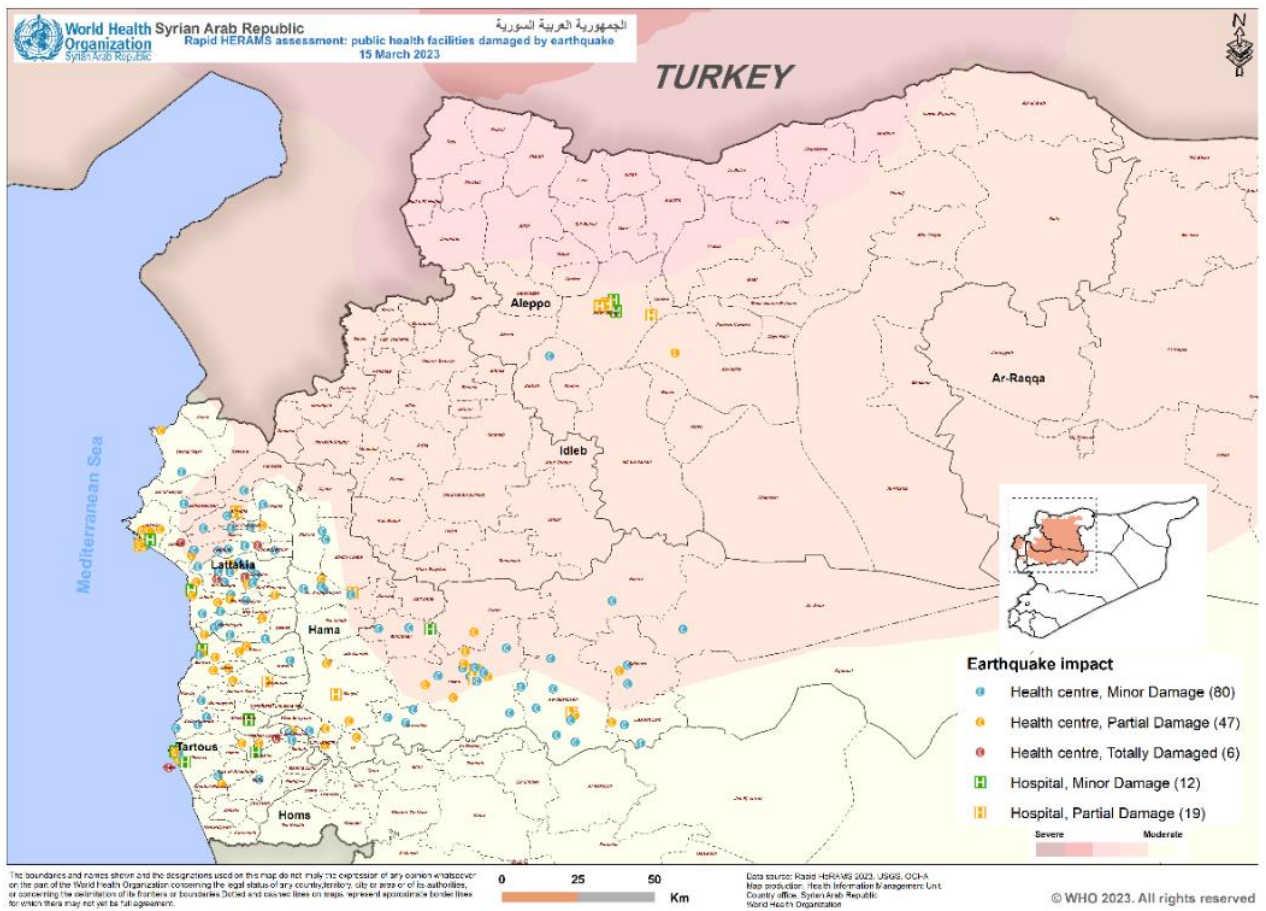


Figure 4: Health facilities in earthquake-affected areas of Syria as of 12 March

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

- A total of seven surge personnel are currently deployed to Damascus and Aleppo, while three local staff have been re-deployed to Latakia, Hama and Aleppo to bolster capacity. Since 6 February, 24 surge personnel in total have been deployed to increase WHO's local capacity in Gaziantep.
- In Aleppo, Latakia and Hama, WHO has established partnerships with 29 NGOs – 27 national and two international – to support the deployment of MMTs and MHPSS teams to emergency shelters and to areas with a high volume of IDPs.
- WHO is leading the health component of a multi-sectoral post-disaster needs assessment known as the Syria Earthquake Rapid Needs Assessment (SERNA). This brings together multiple assessments to estimate the impact of the recent series of earthquakes. It will set out an inclusive recovery strategy incorporating a "build back better" approach and will detail funding implications. Preliminary results are expected to inform a donor pledging conference on 20 March, with a full-length report anticipated by mid-April.
- A WHO surge security officer is supporting the United Nations Department for Security and Safety (UNDSS) in exploring opportunities to increase the operational presence in earthquake-affected areas of Northwest Syria.
- The Health Cluster is supporting newly-established emergency shelters by connecting them to partners to facilitate surveillance, adequacy of WASH facilities, patient transportation, and cholera prevention and awareness.
- Following interruption due to the earthquakes, the Health Cluster has resumed the routine monthly assessment of pharmaceutical and medical supply consumption to identify anticipated need.
- On 10 March, an inter-cluster mission to Northwest Syria took place to discuss with local de facto authorities the critical needs in shelter, water, sanitation and hygiene (WASH), health, food security, livelihood, and camp coordination and camp management (CCCM).

Health information and planning

- 379 out of 461 (82%) Early Warning, Alert and Response System (EWARS) reporting sites in Aleppo, Hama and Latakia reported between 6 - 12 March. Forty-one RRTs are deployed in Aleppo, Hama, and Latakia to verify and investigate alerts reported.
- The concerns detected by EWARS with the most notable increases in comparison with the week before were:
 - Aleppo – lice (126% increase)
 - Latakia – lice (154% increase), scabies (136% increase), acute jaundice syndrome (450% increase)
 - Hama – acute diarrhoea (73% increase), acute jaundice syndrome (75% increase)
- The three EWARN (Early Warning, Alert and Response Network) laboratories in Northwest Syria remain functional, and 225 sentinel surveillance sites have again reached 98.2% completeness. All emergency shelters have a member of staff with responsibility for surveillance, and surveillance information is now being reported directly from emergency shelters.
- Cholera surveillance and response has continued to improve, with 20 functional oral rehydration points, seven functional treatment centres/units, and 2462 cases reported during week 10/2023. Syria Immunization Group (SIG) have developed a [dashboard to monitor the progress of the OCV vaccination campaign](#).

- The 4Ws² assessment for the month of February was finalized in Northwest Syria. Partners have delivered 766 844 outpatient consultations and treated 399 058 trauma cases. There was a 30% increase in the number of trauma cases compared to January. These appear to be attributable to the earthquakes.
- Following the finalization of the “light HeRAMS” (Health Resources and Services Availability Monitoring System) for mapping damaged health facilities, a validation exercise of 605 health facilities for the full HeRAMS is now in process in Northwest Syria.
- WHO completed the HeRAMS³ assessment to assess the impact of the earthquakes on health facility functionality and service availability in other parts of Syria. In total, 673 health centres and 30 hospitals were assessed in five governorates. From preliminary findings of the HeRAMS assessment specifically tailored to assess health facilities after the earthquakes, six PHC centres in Latakia and Tartous have had significant damage and are no longer functional, and 133 PHC centres and 18 hospitals were affected by the earthquakes in four governorates.
- WHO finalized the list of medications and medical supplies needed in northern Idlib and Aleppo governorates for trauma and rehabilitation cases. The cost is estimated at US\$ 350 000.

Health operations and technical expertise

- During the reporting period, 35 WHO MMTs screened 7204 children under five years in Aleppo, Latakia, Hama and Idlib for malnutrition; 104 cases were detected and referred to their respective clinics for follow up.
- 43 mobile teams provided a total of 6773 consultations for integrated management of childhood illness at targeted shelters in Aleppo, Latakia, Hama and Idlib.
- During the reporting period, WHO-supported WASH monitoring teams conducted water testing in 27 emergency shelters in Aleppo; 16% were found to be contaminated by bacteria. In response, WHO distributed 1250 water purification tablets to the affected population.
- With WHO support, routine vaccination continues to be provided to affected areas in Aleppo, Latakia and Hama. An estimated 89% of targeted children under five years in shelters have been vaccinated.
- All routine vaccination centres in Northwest Syria are functional. Between 19 February - 12 March, they have provided routine vaccination services to 16 722 people aged over one year. In the same period, WHO partners have administered 1618 routine vaccines for children living at emergency shelters.
- Under the coordination of SIG, 1400 teams of vaccinators are administering 1.7 million doses of cholera vaccine in a 10-day house-to-house campaign. The targeted areas are those most severely impacted by the earthquakes and at highest risk of cholera. These include Sarmada, Maaret Tamsrin, Dana, and Atmeh districts in Idlib, and in A’zaz district in northern Aleppo. As of 12 March, almost one million doses had been administered, reaching 56% target coverage.
- Eight tuberculosis (TB) cases were diagnosed between 6 - 12 March. With support from WHO, TB patients inside Syria will receive urgent nutritional support (with food parcels) for three months.
- WHO continues to co-chair the MHPSS technical working group in Syria while also supporting the operation of 114 MHPSS teams and providing psychotropic medication in Aleppo, Hama and Latakia providing over 420 000 mental health services.
- In response to the earthquakes, Health Cluster for Northwest Syria have produced an [MHPSS dashboard](#). It shows the live status of MHPSS services accessible at emergency shelters, health facilities and mobile clinics. MHPSS services expanded to provide services in an additional 24 sites, including 13 additional camps and seven additional emergency shelters. During the reporting period, WHO partners delivered over 15 000 individual sessions of psychosocial first aid (PFA) and 2200 psychosocial support (PSS) activities for children.
- Through the Syria Cross Border Humanitarian Fund (SCHF), WHO partner [Islamic Relief Worldwide](#) secured the procurement of 70 000 dialysis kits, which is sufficient to meet needs for over eight months.

² The 3/4/5W Tool is used for measuring and monitoring health resource availability and accessibility. It provides information on health services, infrastructure, personnel, and supplies.

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

- The number of emergency shelters in Northwest Syria reportedly decreased to 70, with some people returning to their homes and others moving to other sites. Mobile clinics and PHC capacities are adapting to the changing situation on the ground.
- Rehabilitation service needs have been analysed. Based on WHO recommendations, a list of required rehabilitative devices has been prepared. At least two in-patient rehabilitation services are recommended. WHO funding can only partially cover the identified needs.
- Two training sessions were conducted for 90 RRT personnel newly-deployed to IDP shelters in 12 districts. The training focused on disease case definitions, reporting mechanisms, and the investigation of water-borne and foodborne diseases. It took place in Aleppo between 5 - 9 March.
- WHO supported the training of 50 health workers in Latakia and Tartous on trauma management (major incident medical management and support/immediate life support) and 50 health workers in Damascus on prosthetics and orthotics.
- WHO conducted a refresher online awareness session targeting 120 participants from NGOs in Aleppo, Hama and Latakia on the prevention and response to sexual exploitation, abuse and harassment in affected areas. This awareness raising is part of the WHO policy on sexually abusive conduct and ensuring no harm for beneficiaries.



Figure 6: WHO providing MHPSS services to the affected population in an IDP shelter in Aleppo, in cooperation with MoH and MoE @WHO

Risk communication and social mobilization

- In Northwest Syria, group awareness sessions reaching 11 856 people were carried out between 6 - 12 March at 29 emergency centres, reaching 10 277 people. Awareness sessions focused on MHPSS and communicable diseases (especially cholera, measles, scabies, and COVID-19).
- WHO risk communication and community engagement (RCCE) partners reported awareness and referral activities in 23 sub-districts in earthquake-affected areas in Northwest Syria.
- RCCE partners referred 142 cases related to cholera, reproductive health, child health, internal medicine, and malnutrition, highlighting the valuable role they play in community awareness. Since the onset of the earthquakes, RCCE partners have referred 626 suspected cholera, malnutrition and other cases for further medical follow-up.
- As schools have reopened, RCCE partners have taken advantage of this opportunity to deliver 287 group awareness sessions to 6902 students in 27 sub-districts. The main topics of the awareness sessions were prevention and protection from cholera and other communicable diseases, head lice, and scabies.
- WHO developed a new set of messages targeting the well-being of people living with psychosocial disabilities in Northwest Syria to be disseminated through community health workers (CHWs).

- WHO began the roll-out of a community health outreach package with the Syrian Arab Red Crescent (SARC). The training of trainers commences next week. The package will be rolled out to CHWs and WHO-supported NGOs in earthquake-affected areas (Aleppo, Hama, and Latakia).

Supplies and logistics

- Between 6-12 March, medical supplies valued at US\$ 300 000 and weighing 22 metric tonnes were delivered to 23 health facilities in Aleppo, Latakia, Tartous, Hama and Homs.
- Since 6 February, WHO has delivered a total of 352 metric tonnes of medicines, medical supplies, and equipment, valued at US \$2.04 million and accounting for over 940 000 treatment courses, to Aleppo, Latakia, Tartous, Hama and Homs.
- Between 6 - 12 March, nine WHO trucks containing medical supplies for the response crossed the border to Northwest Syria, providing more than 300 000 treatments. Seven of these trucks were filled with medical supplies procured by [Médecins Sans Frontières](#) (MSF) and [International Medical Corp](#) (IMC).
- Since 6 February, WHO has delivered 25 trucks cross-border from Türkiye to Northwest Syria, containing emergency supplies and medicines worth US\$ 2.6 million, with a weight of 252 metric tonnes. These supplies are sufficient for over 4.5 million treatments and 13 600 trauma cases.
- Between 6 - 12 March, a charter flight carrying medical supplies worth US\$ 193 000 with a weight of 26 metric tonnes arrived to Türkiye for dispatch to Northwest Syria.
- Between 6 - 12 March, WHO distributed essential medicines, medical supplies and equipment to support 22 health care facilities and provide 31 116 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 3 million treatment courses in this region.
- In response to the earthquakes and based on assessed needs, WHO has requested additional supplies to sustain the supply of medicines, medical consumables and medical equipment to earthquake-affected areas. Supplies worth over US\$ 5 million are being procured.



Figure 7: WHO shipment of medicines and emergency medical supplies @WHO

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:

- 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, MRIs, and X-ray machines;
- Supporting patient referral pathways (including prehospital care) and increasing support to patients requiring advanced or specialized care;
- Assessing and rehabilitating public health facilities;
- Ensuring the following :
 - access to health care and delivering health supplies and other life-saving supplies to the affected population.
 - addressing MHPSS needs, plans underway to provide training/capacity building to CHWs to ensure they can relay MHPSS messages and also guide people to the available resources on MHPSS. Additionally, WHO continues to strengthen intersectoral coordination to scale up MHPSS services and reach additional medical staff, frontline workers, displaced populations and host communities with MHPSS services.
 - Ensuring access to safe and sufficient WASH amid concern of damage to water systems and an ongoing cholera outbreak.