WHO response to the conflict in Syria

Situation Update

The security situation continues to deteriorate in Syria resulting in further population displacement and additional constraints in the delivery of medical assistance to affected areas, as well as an increase in the number of injured people. Clashes in rural Deir ez-Zor continued, as did the fighting and daily shelling, including airstrikes and barrel bombing in Dar’a, Aleppo, Rural Damascus, Damascus and Idleb governorates. Since March 2011, over 150,000 people are estimated to have been killed and over 750,000 injured.

Public Health Concerns

The ongoing conflict and the consequent population movement, impeding patients’ and health workers’ access to health care facilities, as well as shortages in essential medicines and medical services combined have changed the country’s public health profile affecting overall health practices, protocols and preventive services.

The access to treatment is limited for communicable, non-communicable and chronic diseases such as cardiovascular disease, renal failure, diabetes, asthma and cancer.

Overcrowded living conditions and diminished per capita availability of water supply result in poor hygiene and increased risk of infectious diseases, including skin and respiratory tract diseases.

The water supply infrastructure in Syria has been subjected to major destruction since 2011. The current availability of safe water inside Syria is now a third of pre-crisis levels.

The conflict has also caused severe damage to sewage systems, pumping stations and other water infrastructure. The situation is worsened by frequent power cuts, fuel shortages and limited maintenance of water works, especially in areas which witnessed high levels of violence like Rural Damascus, Idleb, Deir ez-Zor, Homs, Aleppo and Ar-Raqqah. These combined factors have dramatically

Highlights

- WHO Reached the Besieged Town of Douma in East Ghouta with Life-Saving Medicines
- Continuous Increase in the Number of Measles and Typhoid Cases Reported
- WHO Supported more than 571,400 Syrians with Medicines and Medical Supplies

WHO

9.3 million People affected
6.5 million Internally displaced

WHO

22% % funded
185,966,152 US$ requested
59 Staff in the country

People reached with medicines and medical supplies (since the beginning of 2014)

People reached with medicines and medical supplies during reporting period

Health Sector

13 Health Sector Partners

32% % funded
233,376,172 US$ requested

73% Public hospitals affected

27% Public health centres affected

2.79 M Children vaccinated against polio

Situation Report

Reporting period: 15 – 31 May 2014
01 June 2014

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Situation Report #3

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Ministry of Health reports
Increased the risks of waterborne diseases such as cholera, shigella, typhoid and hepatitis A.

Insufficient access to safe blood is increasingly exposing the Syrian population to the risk of blood-borne diseases such as hepatitis B.

The dramatic increase in the number of injured—on average 25,000 injuries each month—combined with the severe shortages in surgical supplies, including basic anaesthetic medicines and the frequent power cuts, are rendering functioning hospitals unable to cope with the demand for surgical treatment. An increasing number of complications such as septicaemia, gangrene, organ failure and/or deaths is reported.

Since the beginning of the fighting, the overall vaccination coverage dropped sharply across the country (from 90% before 2011 to 52% in March 2014), increasing the risk of childhood morbidity and mortality from vaccine-preventable diseases.

The number of suspected measles cases reported through the Early Warning and Response System (EWARS) continues to increase with 349 cases reported. 55% of the cases were in Deir ez-Zor and 16% in Ar-Raqqa. In addition, the system reported 8 (Acute Flaccid Paralysis) AFP cases, with 4 cases in Damascus and 4 in Homs.

Similarly there has been a 48% increase in the number of typhoid cases reported during this reporting period. Among the 599 cases reported, 87% are from Deir ez-Zor.

The number of reported brucellosis cases has also notably risen with 282 cases reported mainly from Rural Damascus only.

Since the beginning of the conflict, a severe increase in psychological distress has been noted among the population. Over 50% of the population is estimated to be in need of psychosocial support. Out of the 3 psychiatric facilities in the country, the Aleppo psychiatric hospital has been destroyed. Psychotropic and epilepsy medications are often removed from shipments mainly from interagency convoys.

### Health Needs and Gaps

The restricted access for humanitarian aid to reach populations in need constitutes one of the main hindrances to WHO operations. This affects the patients, the most vulnerable people, as well as the whole population’s morbidity and mortality.

The health workforce has been significantly reduced as many health professionals have fled the country (severe shortage of surgeons, anaesthesiologists, laboratory professionals, female reproductive health professions, etc.). Those who remain often encounter difficulties in accessing their place of work. Similar difficulties in accessing health centres and hospitals are faced by those seeking health services.

The expansion of vaccination activities into hard-to-reach areas is essential to achieve broader population coverage. This is of critical importance if transmission of vaccine-preventable diseases such as polio, measles and tuberculosis, is to be halted, particularly in the present context of high population mobility and overcrowded living conditions.

The confluence of risk factors, including worsening food security, limited access to water, poor hygiene, sanitation and health services combined have contributed to a declined nutritional status of children under 5.

### WHO Action

During reporting period, WHO supported more than 571,400 beneficiaries as follows:
- Local health authorities in Deir ez-Zor with aquatabs, water testing and diarrhoeal disease kits for 286,684 beneficiaries.
- Local health authorities in Damascus, Aleppo, Lattakia, Tartous, Homs and As-Suwayda with intravenous fluids for 34,045 people.
Local health authorities in Douma town in the besieged East Ghouta in Rural Damascus with life-saving for 22,600 beneficiaries.

Central Blood Bank with test blood kits for 90,000 beneficiaries.

Health authorities in Aleppo with aquatabs, disinfecting materials, intravenous fluids, water testing and diarrhoeal disease kits for 138,145 people.

During reporting period, WHO capacitated 954 health care professionals from all governorates on: Health Information Systems (135 health workers), first aid (40 HWs), mental health (22 HWs), NCD management (97 HWs), EWARS (397 HWs), lab capacity (118 HWs), surveillance protocols (61 HWs) and polio (84 HWs).

Health Sector Actions

UNICEF

Mobile teams and fixed health centres continue to attain vulnerable and displaced communities with basic health care and referral services for complicated cases. The health centres reached 119,077 children and 37,694 women during reporting period, in addition, mobile teams were able to cover 23,080 children and 4,694 women.

During reporting period, a local NGO in Homs reached 539 children and women with basic medicines.

UNFPA

During reporting period 15,000 women were supported with 48,000 reproductive health services, including for family planning, in addition to safe delivery for 550 women through the RH vouchers.

A reproductive health raising awareness campaign is being held in cooperation with WFP targeting 60 recruited DHL workers. Moreover, 25 project coordinators and accountants of UNFPA IPs were oriented on monitoring the humanitarian response.

Resource Mobilization

WHO requires a total of US$ 185 million in 2014 to continue providing life-saving health services to the growing number of increasingly vulnerable Syrians. Additionally, for the 2014 Essential Medicines List, Syria will need more than US$ 450 million to provide life-saving medicines and medical supplies to 9.3 million people in need in government- and opposition-controlled areas.

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<th>Funding Status of Appeals (US$)</th>
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<td>Name of the appeal</td>
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<td>Health Sector SHARP 2014</td>
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Contact Information

Ms Elizabeth Hoff
WHO Representative to the Syrian Arab Republic
Telephone: +963 11 3315053
emwrosyr@who.int

Ms Louise Kleberg
External Relations
Telephone: +962 6 5684651
klebergl@who.int

Mr Karim Shukr
Media and Communications
Telephone: +963 953 888470
shukrk@who.int
emro.who.int/countries/syr