Strengthen the HIS for emergency using the Health Resources and Services Availability Mapping System (HeRAMS) for regular, timely and accurate collection and dissemination of data.
Funds needed: US$ 921 270

Cooperation
(i) To strengthen health sector coordination and
(ii) To improve access of vulnerable populations to a quality basic health care package of services and allow for adequate preparation and response capacities for ongoing and new emergencies.
Funds needed: US$ 462 796

WHO Intervention areas | SHARP 2014

Revitalization of Primary Health Care services
To improve access to comprehensive primary health care services (PHC).
Funds needed: US$ 56 553 500

Secondary Health Care
To improve access to secondary health care services and limited tertiary health care services i.e. for burn victims.
Funds needed: US$ 48 483 626

Trauma Care
To strengthen the level of preparedness for and management of trauma, including referral mechanisms, for an increasing number of injuries across the country.
Funds needed: US$ 43 195 000

Early Warning, Alert and Response System (EWARS)
To prevent, early detect and respond to epidemic prone diseases and contain the current polio epidemic and its spread to other countries/ regions.
Funds needed: US$ 16 486 560

Mental Health
To strengthen mental health service delivery across Syria.
Funds needed: US$ 8 206 900

Rehabilitation of health facilities (in collaboration with UNDP)
To support public and private health infrastructure and services affected by the crisis, revitalize health services and restore health facilities in affected areas.
Funds needed: US$ 4 000 000

Health Information System (HIS)
Strengths of WHO’s approach in the Syrian Arab Republic

- Decentralization of WHO presence across the country through establishing a system of focal points and increasing the number of sub-offices to Aleppo and Tartous (including Homs).
- Innovative and strategic expansion of health partnerships with local NGOs across the country (36), to improve access to hard-to-reach areas, and establishment of sustainable modalities for delivery of essential health services.
- In adherence to WHO accountability framework and to enhance performance, innovative approaches for monitoring and evaluation have been put in place, such as WHO Supply Tracking System, Health Information System, and other standardized data collection tools.
- Complementarity of interventions to those of other health actors through effective coordination at country- and regional level.
- Strategic planning and effective collaboration with local partners in the field to ensure cost effective interventions.

Health Sector Objectives under SHARP 2014

1. Monitor, assess and promote safe and equal access to basic health services by the most affected populations (including women, children and people with disabilities).

2. Scale up timely and targeted provision and delivery of coordinated life-saving emergency assistance by supporting health care services delivery.

3. Support public, social and private health infrastructure and services affected by the crisis.

4. Develop operational and management capacities of local health actors, including NGOs and CSOs to respond to the humanitarian crisis.

5. Expand/ strengthen current humanitarian hubs, with an integrated contingency planning process, involving all actors.

World Health Organization

To respond to the growing acute health needs of the estimated 9.3 million people, including 6.4 million internally displaced people (IDPs), affected by the crisis, WHO requires US$ 178 309 652 for 2014 to continue providing life-saving medicines, medical supplies and equipment.