

WHOLE OF SYRIA OPERATIONS

People in need¹

15.3 million

People targeted¹

13 million

Funding requirement for Whole of Syria Operations:

US\$79 829 000

Funding requirement specifically for WHO Emergency Operations in Syrian Arab Republic:

US\$53 428 000

¹ Data provided for People in need and People targeted is taken from the Global humanitarian Overview 2024, these figures may be subject to change as part of the HRP process throughout the year.

CONTEXT

Entering its thirteenth year, the Syrian Arab Republic grapples with a crisis of unprecedented magnitude. In 2024, health needs in the Syrian Arab Republic continue to be severe and are compounded by concurrent crises. 14.9 million people are now estimated to be in need of lifesaving and life-sustaining health services. The country's health system, which was already heavily disrupted, has been further impacted by factors including decreasing humanitarian support, outbreaks of measles and cholera, and the 7.8 magnitude earthquake that hit Türkiye and the Syrian Arab Republic on 6 February 2023, adding an additional burden to the health system. The earthquake and subsequent aftershocks have destroyed or damaged at least 228 health facilities, worsened socioeconomic conditions in the country and increased the suffering of an estimated 8 million people affected by the disaster. 2023 GDP contraction estimates meanwhile worsened from 2.3% to 5.5% as inflation, worsened by currency devaluation (315% from January to November) and rising instability.

In total, 7.2 million people are internally displaced, including 2.9 million people in north-west Syria, many of whom have suffered multiple displacements since the start of the conflict. Over 2 million people reside in flood-prone tent settlements facing frigid winter temperatures. Since August 2023, the level of hostilities across many areas of the country – particularly the north-west and north-east – have continuously worsened health access and have been described as reaching “the worst point in four years” by the UN Commission of Inquiry on the Syrian Arab Republic. Overstretched health workers persevere, however only 65% of hospitals and 62% of primary health care (PHC) centres can fully operate, limiting access and straining the availability of medicines and supplies. Faltering water and electric networks further undermine health security in the country.



WHO-supported mobile clinic for IDPs in Al Zouhuria, Homs governorate.

Photo: WHO Syria

WHO'S STRATEGIC OBJECTIVES

- WHO will support the continuity of essential health services and improve the access, availability, functionality and quality of health services across the Syrian Arab Republic
- WHO will work to strengthen the health system's capacity to prepare for, prevent, detect and respond to diseases of epidemic potential
- WHO will support and enhance the resilience of the health system through improved infrastructure, strengthened supply chain and health information systems, expanded community engagement and a focus on the quality and adherence to national and international guidelines

WHO 2024 RESPONSE STRATEGY

WHO will continue to strengthen the disease surveillance system in 2024 in furtherance of WHO's Health Emergencies Programme (WHE) mandate and fulfil its 2024 vision. Preparing for all hazards – including through surveillance, detection and response capacities – remains key for public health security and necessarily includes community event-based surveillance. WHO will support the continuation and improvement of the Early Warning, Alert and Response (EWARS/EWARN) to rapidly detect any outbreak event and build the capacity of the health workforce. Efforts will also focus on providing training and operational support to Rapid Response Teams (RRTs) in the response phase.

Preserving hard-won investments in primary and secondary services is vital amid rising household deprivation and disease threats to avoid preventable upticks in mortality and morbidity. WHO will focus on sustaining coverage, including maintaining sexual and reproductive health (SRH), safe delivery, child health, integrated nutrition, routine and expanded vaccination, mental health and psychosocial support (MHPSS) and communicable and non-communicable disease management such as insulin provision and dialysis. WHO will also continue to support health facilities which offer essential humanitarian life-saving health services, including first-line support and gender-based violence (GBV) responses alongside better care referrals, and will enhance trauma pathways and mass casualty management and as well as ensuring access to rehabilitation services. Supply chains will be strengthened using all modalities to secure essential medicines, laboratory commodities and testing capacity.

Averting healthcare interruptions demands assured provision of electricity, fuel, water and waste management, particularly given economic volatility. At facility-level, infection prevention and control, clean water and waste infrastructure also require investments in the health system. This will also be linked with activities to combat antimicrobial resistance (AMR) planned for 2024 under the essential health services strengthening programme.

WHO will also focus on boosting health system resilience and recovery, redoubling preparedness and response capacities, addressing health inequities and sustaining at-risk group access. Effective risk communication and community engagement (RCCE) remains essential to uphold population health through appropriate care-seeking and prevention behaviours while maintaining public trust. More must be done to tackle systemic issues like health worker shortfalls. WHO will support pre- and in-service training, revitalizing care facilities, leveraging technologies for outcome monitoring/planning and expanding local partnerships to enable inclusive recovery. Prioritizing health worker mental health/safety also stays critical.

WHO will continue to pursue an “all modalities” Whole of Syria approach to provide humanitarian assistance. While the UN Security Council resolution authorizing Türkiye-based cross-border assistance was not renewed in 2023, the UN mandate continues by the Government of the Syrian Arab Republic authorization, and agencies remain focused on responding across access modalities. At the same time, crossline support to north-east and north-west Syria must be sufficiently resourced and supported with requisite access. Finally, in the face of a protracted emergency and declining humanitarian funding, WHO will also promote approaches for early recovery to ensure sustainable health system solutions.



A WHO team on a needs assessment trip in Syrian Arab Republic.
Photo: WHO / Catherine Smallwood



WHO Director-General,
Dr Tedros Adhanom
Ghebreyesus with Abdou and his
mother. The family lost their
home in the earthquake.
Photo: WHO / Inas Hamam

KEY ACTIVITIES FOR 2024

- Maintain the health sector's leadership and coordination and liaise with other sectors
- Support information management, data collection and analysis together with reporting on health risks, needs, gaps and performance of the response
- Provide technical expertise, promote evidence-based guidelines and capacity development of health professionals and support human resources
- Maintain and strengthen essential health services, with a focus on those most vulnerable and in need, leaving no one behind
- Support the Essential Health Service Package, with an emphasis on integrated health service delivery and procurement and distribution of life-saving medical supplies
- Strengthen the health system's capacity to prevent, detect and respond to outbreaks of diseases of epidemic potential, as well as natural and manmade disasters
- Continue to support and coordinate ongoing outbreak responses in the country
- Assess the quality of care in Stabilization Centers for the care of acute malnourishment with medical complications (SAM+)
- Maintain and increase vaccination coverage for all antigens at the national and district levels and, at the same time, contain the drop-out rate to less than 10%
- Support early recovery of the health system, including rehabilitation and reactivation of health services and structures
- Drive health system quality through advocacy, policy development and capacity-building
- Improve risk communication and community engagement and strengthen accountability to affected populations of the health response
- Continue to pursue an "all modalities" approach to cross-border and crossline assistance. In north-west Syria , emphasis will be placed on implementation of a Continuing of Operations Plan and gradual transfer of health services delivery to international NGOs, while still ensuring WHO's ability to provide selected services as a last resort. In north-east Syria and parts of north-west Syria , crossline assistance will include distribution of medicines, supplies and equipment, as well as core public health functions such as surveillance, vaccination and capacity-building.

ACHIEVEMENTS IN 2023

PROVIDING LIFE-SAVING HEALTH SERVICES IN THE SYRIAN ARAB REPUBLIC



Aya receives kidney dialysis at the WHO-supported AFA Medical Centre.
Photo: WHO / Hala Kabash

Aya is 20 years old and comes from rural Homs Governorate. She was diagnosed with kidney disease at the age of 17. Since then, she has had to undergo life-saving dialysis three times a week.

"Learning that I would need dialysis was shocking news. I've had to accept that the dialysis machine is now my lifeline," said Aya. "Although my medical condition is part of my life, it's not the whole story. My dreams remain intact, and I am determined to do something meaningful with my life."

Aya lost her older brother to kidney failure three years ago. Her father does not have a steady job, and her mother is battling cancer. Like most Syrians, the family struggles to make ends meet and cannot afford the cost of health care.

"I am so grateful to the Afia Fund Association for subsidizing my dialysis treatment and medicines," said Aya. "The centre is my second home, and the staff are like family to me."

Aya is one of many patients with kidney disease who are receiving free medical treatment at the WHO-supported AFA Medical Centre. WHO's support has been made possible thanks to generous funding from donors. The funds provided have allowed WHO to support seven NGOs and one private hospital in the governorates of Aleppo, Al-Hasakeh, Homs and Rural Damascus to provide life-saving, essential health services to those in need.

FOR MORE INFORMATION

Dr Iman Shankiti | WHO Representative in Syria | WHO Syria | shankitii@who.int

Rosa Crestani | Emergency Manager | WHO Syria | crestanir@who.int



People shelter in a makeshift camp.
Photo: WHO / Ibrahim Al Shikh Ali

2024 FUNDING REQUIREMENTS

Emergency Appeal Requirement

Whole of Syria Complex Emergency	US\$ '000			
	WHO Country Office Syria	WHO Field Office Gazientep	Regional & Global support	Total
Funding requirement by response pillar and by country				
P1. Leadership, coordination, planning, and monitoring	221	2 361	28	2 610
P2. Risk communication and community engagement	690	2		693
P3. Surveillance, case investigation and contact tracing	6 368	767	140	7 275
P4. Travel, trade and points of entry	22	97		118
P5. Diagnostics and testing	1 046	178		1 224
P6. Infection prevention and control	18	228		246
P7. Case management and therapeutics	15 270	165	45	15 480
P8. Operational support and logistics	5 220	15 240		20 460
P9. Essential health systems and services	14 045	5 807	342	20 194
P10. Vaccination	7 668	3 639		11 306
P11. Research, innovation and evidence	118	87	18	223
Total	50 685	28 572	573	79 830

The table above presents WHO's funding requirements to respond to the ongoing emergency event in 2024. In addition to this, WHO also requires funding for its core work to support countries to prevent, prepare, detect and respond to emergencies. The table below presents the overall needs for both the ongoing emergency response (included in WHO's 2024 Health Emergency Appeal) and the core budget for WHE in the country, (included in WHO's Programme Budget 2024-2025).

Syrian Arab Republic - Country office requirement	US\$ '000
Syrian Arab Republic Complex Emergencies	50 685
Multi-Region Cholera	950
Other graded emergencies and ongoing operations	1 793
Emergency appeal requirement	53 428
2.1 Countries prepared for health emergencies	561
2.2 Epidemics and pandemics prevented	1 369
2.3 Health emergencies rapidly detected and responded to	2 070
Billion 2 - Base programme requirement	4 000
Total	57 429



Ayman, aged 12, with a rehabilitation expert at the Alhedaya Physiotherapy Centre in Dana-subdistrict in Idlib.
Photo: WHO / Khalil Ashawi