Health

People in Need: 14.9M

FEMALE	MALE	CHILDREN (0-17)	ADULTS (18-59)	ELDERLY (<59)	WITH DISABILITY
51%	49%	45%	50%	5%	16%
7.5M	7.4M	6.7M	7.5M	0.7M	2M

Needs, severity and most affected population groups

- Over 14.9 million people in Syria are estimated to be in need of life-saving primary and secondary health care assistance in 2024[1], a slight decrease of around 400,000 people from last year. This includes 5.1 million displaced persons, 2.3 million children under 5 years – including 532,595 live births expected, 4.1 million women of reproductive age (15-49 years), more than 700,000 older persons, and 2.4 million persons with disabilities. Districts that are classified severe (3) and extreme (4) in the health sector severity have increased from 89 and 113 in 2023 to 122 and 118 in 2024 respectively.
- The February earthquakes not only damaged health facilities, but also fragile medicine equipment and devices such as C-arms, MRIs, and CT scans, many of which were already operating well beyond their normal lifespan due to a lack of eligible funding for replacement of major equipment. Furthermore, many machines are non-functional due to unilateral coercive measures which prevent the importation of spare parts and expertise needed for repairs. During the earthquake, these factors impacted the timely and effective delivery of life-saving trauma and surgical care.
- Compounded emergencies, including the February earthquakes and its aftershocks, combined with the socio-economic decline, have caused widespread mental distress among the population, and are exacerbating existing conditions. It is estimated that approximately 1 in 10 people in Syria lives with a mild to moderate mental health condition, 1 in 10 children needs focused mental health care and, 1 in 30 is likely suffering from a more severe condition[2]. The procurement and importation of psychotropic medicines are necessarily restricted and the acute lack of licensed specialists to prescribe these treatments is a further challenge for patients in need.
- Emerging and re-emerging infectious, vaccine-preventable, and neglected tropical diseases, such as influenza-like illnesses, measles, meningitis, and waterborne diseases including AWD/cholera, hepatitis A, and leishmaniasis; continued to pose a significant threat to affected communities across all parts of Syria accounting for more than 16 per cent of the total consultations reported from the health system through the surveillance system.[3]
- The cholera outbreak declared by the Syrian Ministry of Health in September 2022 is expected to persist in 2024, with seasonal variations in caseloads. As of 21 October 2023 (epi-week 42), 217,512 suspected acute watery diarrhoea (AWD)/cholera cases have been reported from all 14 governorates of Syria, with 106 associated deaths at a case fatality rate of 0.05 per cent. While the outbreak initially overstretched the already-weak health system, and had direct consequences on vulnerable communities and patients, increasing morbidities and mortalities[4], the latest reports showed a gradual decline and partners have started considering integrating response operations into existing primary health services.
- Access to and functionality of basic health services remain a huge challenge; almost 40 per cent of primary and secondary care health facilities - serving over 4.8 million people in need of life-saving health services - are either partially functioning or not functional. In addition, non-functioning primary health care and specialized facilities increased from 16 per cent and 18 per cent in 2022 to 24 per cent and 31 per cent in 2023 respectively[5]. Furthermore, because of damage, many health facilities are operating in structures not fit for purpose concerning capacity, WASH, and infection prevention and control, as well as accessibility – particularly for persons with mobility challenges.

[1] Health Sector PIN and Severity Analysis Framework, 2023.

[2] WHO Syria, Public Health Situation Analysis (PHSA 2022).

[3] WHO EWARN and EWARS database.

[4] WoS AWD/Cholera Sitrep 21, November 2023.

[5] Whole of Syria Health Sector HeRAMS Quarter 2, Aug 2023.

- Currently, 152 out of 270 sub-districts – home to 11.76 million people – are dramatically underserved and suffering from the compounded threat of below-minimum standards for hospital beds, healthcare workers, and functional primary healthcare centres per 10,000 populations.
- Sufficiently trained and equipped health workers are essential to provide integrated essential health service packages and provide gender-sensitive and comprehensive services. Yet Syria is facing major gaps around the quality and quantity of health workers which negatively affects access and availability of health services. Eight out of 14 governorates are still below the standard threshold of health workers' availability per 10,000 population[6]. Specialists in public health, emergency medicine, anesthesia, family medicine, and psychology, as well as physical rehabilitation and prosthetics, are in particularly short supply[7]. A new wave of health worker attrition is observed due to the economic crisis – currently, public sector doctors earn the equivalent of just over $30 (466,000 Syrian Pounds) leaving them unable to afford even the cost of transport to their jobs where face-to-face care is essential.[8]
- A key concern is the limited access to antenatal (ANC) and postnatal (PNC) healthcare. Approximately 2.3 million women of reproductive age, including 500,000 pregnant and lactating women, are losing access to reproductive and maternal health care, mainly due to a lack of functional health services and funding. More than 500,000 eligible children are estimated to have received zero doses of MMR vaccine, leaving them vulnerable to illness, complications, and even death. Relatedly, more than 218,000 children under 1 year did not receive routine immunization services due to access constraints, supply chain interruptions, and funding shortages.[9]

Projection of needs

	PEOPLE IN NEED	ASSOCIATED FACTORS	MOST VULNERABLE GROUPS
JUNE 2024	14.9M	Natural and man-made disasters, consequences of the February earthquakes, climatic shocks, etc. Multiple and recurrent disease outbreaks – potential for "new" pathogens as well as existing/known threats. Impact of deteriorating socio-economic conditions and disrupted basic services, food insecurity/malnutrition, protection concerns, MHPSS effects of heightened stress, and possible social unrest. Reduced access to care – as funding reduces as well as humanitarian access constraints. Increasing malnutrition rates – increased cases of severe acute malnutrition (SAM) with medical complications.	Children under five years, women of reproductive age (ages 15-49), older persons (60+), persons with disabilities, people with non-communicable diseases (NCDs), IDPs and persons living in areas of restricted access are also vulnerable due to challenges in the delivery of humanitarian health services.
DECEMBER 2024			

[6] Whole of Syria Health Sector HeRAMS Quarter 2, Aug 2023.

[7] Syria Ministry of Health (MoH); WHO and MOH Health Labour Market Analysis 2023 (unpublished).

[8] Salary scale for Physician - Internal Medicine in Syria 2023 - Complete Guide (salaryexplorer.com).

[9] WoS Health Sector 4W, Sept 2023.