Overall Situation

● On 06 February around 04:20 am, Syria was struck by an earthquake with a magnitude of 7.8 that hit the northern Liwa Iskenderun area in Türkiye. The three most severely impacted governorates are Aleppo, Lattakia and Hama. This earthquake is the strongest since 1995 and tremors were felt across the country. A second earthquake struck on the same day at a magnitude of 7.6. According to the Syrian Ministry of Health, there were 1,280 people injured and 430 fatalities, mostly in Aleppo. These rates will likely rise rapidly in the coming days, as many people remain trapped under the rubble in freezing conditions during the winter.

● The Syria Health Cluster estimates that the earthquake has affected around 3.7 million people in the areas of Syria controlled by the Government. Full figures for the whole of Syria will be updated once provided. The 3.7 million affected people include around 925,000 women of reproductive age among them an estimated 148,000 women who are currently pregnant and 37,000 are expected to deliver over the next 3 months. An estimated 5,550 may experience complications requiring emergency obstetric care including C-section.

● Prior to the earthquake, the number of people in need in North West Syria was 4.1 million including around 1 million women of reproductive age (15 - 49 years), among them 62,000 pregnant women. Updated figures of those affected by the earthquake across all of Syria will be available later (8 February).

● UNFPA is particularly concerned as the health facilities in the affected areas have been severely damaged and there are already reports of maternity facilities being evacuated without adequate alternatives to relocate safely. Essential medical supplies have been destroyed leaving health care providers without the capacity to manage life-threatening conditions, in particular emergency obstetric and new-born care. The affected regions were already facing a cold wave before the earthquakes hit. A second cold front was forecast to start on 6 February further exacerbating the impact.

● Most health facilities in government-controlled areas are functioning but with limited resources, and medicines and consumables are urgently required. According to a Syria Health Cluster report, a total of 172 health facilities
in the affected areas have been affected directly (e.g., damaged) or indirectly (lack of fuel and supplies to operate) by the quake which has also amplified pre-existing humanitarian needs and protracted challenges. UNFPA Syria teams conducted assessments on the maternal health hospitals in the affected areas in Hama, Lattakia and Aleppo and found that all are functioning, however with some sustained damage. The Aleppo University Hospital has damaged water pipelines and cracks in the walls. Of the five hospitals in Hama governorate only two, in the main city, are fully functioning and only one of them is a gynaecology hospital which requires support to be able to provide services. The National Hospital in Hama sustained damage to the ground floor walls along with the water and sewage system to the six elevators. Even prior to the earthquake, there were shortages of supplies including reproductive health medicines, and for the department of orthopaedics, vascular surgery, general surgery and the ER department. Additionally, the operating theatre ward is not equipped to perform emergency operations due to a lack of supplies.

● UNFPA Partners’ response in northwest Syria is still focusing on the search and rescue response, which is hampered by the lack of diesel needed to operate rescue equipment. Security constraints in the North West could also hamper the delivery of aid. In the meantime, rapid needs assessments have started including by UNFPA teams and UNFPA’s third party monitoring company will also start carrying out assessments in the coming days. In the affected areas, some of the Women and Girls Safe Spaces (WGSSs), often the only places providing safety to women and girls and essential information including on protection, have also been affected.

● Thousands of people have lost their homes and belongings leaving in particular women, girls and new-borns and other vulnerable groups without essential supplies to survive the extreme cold. This can be life-threatening unless adequate shelter and supplies are urgently provided to withstand the cold. In Government controlled areas of Aleppo, 126 temporary shelters are hosting approximately 13,000 people of whom 55-65% are women. The shelters have limited resources, are not heated and often overcrowded, increasing women’s and girls’ risk of gender-based violence.

● Of the large numbers of IDPs reported in various parts of northwest Syria some are taking shelter in UNFPA-supported WGSSs. The displaced women and girls also lack adequate access to essential menstrual hygiene supplies and access to water and sanitation.

● Based on an initial assessment conducted by UNFPA field staff in government-controlled areas, the majority of crisis affected people sheltered in close to 100 collective shelters are women and children. These shelters are mainly schools, mosques, and indoor basketball courts and lack most basic facilities including gender segregated latrines. In some shelters, women and men share the same room which affects the safety and privacy of women and adolescent girls. The lack of safe and gender segregated WASH facilities and limited community protection might lead to incidents of GBV. As more collective shelters and informal settlements are being established there is a need to mitigate against the risk of sexual exploitation and abuse and gender-based violence.

Humanitarian Needs

● Already prior to the earthquake the health system was fragile and under sourced and unable to respond to all the needs. The earthquake has further amplified the challenges. Maintaining access to life-saving reproductive health assistance and the continuation of other essential health services is a critical response priority.
● There is an immediate need for psychological first aid (PFA) and there will be ongoing needs for the provision of psychosocial support (PSS), and if possible, referral for mental health services for those requiring more specialised services given the traumatic experiences.

● Essential needs for the immediate response include: RH medical supplies, menstrual hygiene materials, winterised dignity kits, blankets, new-born items, winter clothing, tents and / or prefabricated structures to provide life-saving SRH and GBV services. Fuel is also urgently needed to ensure continuation of critical service provision, particularly in health facilities.

● Coordination and functioning referral systems are being scaled-up noting that protection and GBV referral pathways should be activated as soon as possible in any transit and reception areas that will receive displaced persons to mitigate the risk of gender based violence. Humanitarian assistance also needs to ensure affected populations are protected against the risk of sexual exploitation and abuse as people are extremely vulnerable.

UNFPA Response across Syria

Provision of Essential Psychosocial and GBV Response Services.

The priority focus of the response is to ensure the availability and continuation of gender-based violence programmes across all affected areas.

● The 10 UNFPA supported Women and Girls Safe Spaces are still operating in Aleppo, Hama and Latakia continue to provide comprehensive GBV response including Psychosocial support.

● Integrated Mobile Teams in Aleppo and Hama are responding on the frontline to assist with response including in areas of immediate needs to provide Psychological First Aid, Psychosocial Support Services (PSS), and supporting women and girls with life-saving essential SRH and GBV services.

● UNFPA Syria is sending 37,000 dignity kits (DK) and 4,500 blankets to support women and girls in the most affected government-controlled areas; additional supplies are under procurement.

● In North West Syria, UNFPA currently supports 14 safe spaces for women and girls at risk of GBV. UNFPA had already pre-positioned 76,000 DKs in North West Syria and these supplies will be distributed in the coming days. Additional supplies will need to be procured. Support may also include individual protection cash assistance for the most vulnerable women and girls in North Western Syria.

● As GBV Sub-cluster lead across the Whole of Syria, UNFPA is also ensuring close coordination with all response actors to mitigate protection risks for women and girls.

Provision of basic reproductive health services to meet the urgent needs through Mobile Health Teams and static clinics

Across Syria, UNFPA and its partners are working to meet the basic sexual and reproductive health needs and ensuring that the Minimum Initial Service Package (MISP) for reproductive health is available. UNFPA staff are in the field with partners to ensure timely and quality implementation of emergency response as well as assess the current situation and needs.
In government-controlled areas, UNFPA supports **27 Integrated SRH/GBV mobile teams (IMTs)** that are working to meet the immediate needs of women and adolescent girls in the 3 most affected governorate areas in Aleppo, Hama, and Lattakia. Each team consists of a gynaecologist, midwife, psycho-social support (PSS) worker, and three community outreach volunteers. The IMTs provide PSS, sexual and reproductive health care and GBV response. Additionally, they offer information to the community on available RH/GBV services and how to access safe delivery services, provision of family planning methods and referral where advanced care is needed for GBV and / or SRH services.

**In North West Syria**, UNFPA is supporting 9 health facilities to provide essential sexual and reproductive health services. UNFPA is still assessing if these facilities are able to function at full capacity. It is already known that one of the UNFPA support health facilities, the Idleb hospital - which includes a maternity ward - has had to be completely evacuated.

UNFPA cross border operations had already pre-positioned IARH kits inside North West Syria and these will be shifted immediately to support the emergency needs.

UNFPA, as the lead of the Sexual and Reproductive Health Working Group under the Health Cluster, is assessing current needs and required resources to ensure the delivery of life saving SRH services.

**Initial Estimated financial needs**

The initial needs for the delivery of SRH and GBV services, the provision of cash assistance and the procurement of supplies for the earthquake response across the Whole of Syria are estimated at US$18.6M.

- UNFPA Syria will establish 10 additional IMTs, two SRH static field clinics and one Women and Girls Safe Space in each of the three affected Governorates. UNFPA will also send available / procure additional inter-agency reproductive health (IARH) kits with the essential medical equipment, drugs and consumables to assist with the most immediate life-saving and integrated SRH and GBV response.

- The estimated needs for protection in North West Syria would cover individual protection cash assistance and tents to support the re-establishment of GBV services. The health funding needs are still being assessed with a focus on ensuring the implementation of sexual and reproducing health services and the availability of essential RH supplies. These needs are expected to increase.

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1 More data on financial needs and specific response interventions will become available over the next few days as UNFPA is finalising its assessments and will contribute to the OCHA Whole of Syria 3 months flash-appeal that will be launched Saturday 11th February 2023.