HUMANITARIAN SITUATION

In the early hours of 6 February, multiple earthquakes, the strongest being of 7.7 magnitude on the Richter Scale, struck southern Türkiye and northern Syria. At least 1,206 aftershocks have been confirmed as of date of publication. Severe human and material damages were reported mainly in Aleppo, Hama, Idleb, and Lattakia Governorates, and impacting almost every person living in north-west Syria.

The earthquakes have created a disaster of colossal proportions and casualty numbers keep climbing. As of 13 February, in Syria at least 5,814 people have reportedly been killed and around 11,000 injured, this includes over 4,400 deaths and more than 8,600 injuries in north-west Syria with many still trapped. While the full extent is still unfolding, women and children are likely to be most affected.

Many homes and basic service infrastructure has been destroyed or damaged. More than 8.8 million people – including 3.7 million children – have been affected and many are now in urgent need of food, water, shelter, and emergency medical and psychosocial assistance. The crisis also hit Internally Displaced Persons (IDPs) already living in the affected areas, particularly those living outside of camps and in damaged houses or apartments. This placing them at greater risks in the face of weather events and further natural disasters.

Several factors are influencing and exacerbating the severity of humanitarian needs, including the ongoing winter season with below freezing temperatures, pre-existing largescale humanitarian needs and damaged social service infrastructure, recent cholera outbreak alongside significant shortages in electricity, water and fuel, within an overall context of challenging economic conditions and 12 years of protracted crisis.

Girls and boys, many of whom have lost their entire families, now see the chance of returning to a normal life further jeopardized, hence leaving unprecedented levels of traumatic stress. Those who have lost their homes, can also no longer find the safety of school learning spaces as many were damaged and school materials lost. Children have become more vulnerable and at greater risk of exploitation and abuse.

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1 The plan will cover the period from 6 February to 31 May 2023 and includes response activities for UNICEF Whole of Syria.
Water, Sanitation and Hygiene (WASH)

While an increasing number of displacement movements have been recorded in earthquake affected areas in Syria, Water and Sanitation infrastructure have faced extensive damage in all affected areas. An increasing number of vulnerable children and their families are dangerously exposed to the risk of infectious diseases, including cholera, diarrheal diseases, and COVID-19, due to reduced access to safe water and sanitation goods and services.

Water treatment plants and facilities are subject to different levels of damage. Water supply and sewage networks have been damaged and disrupted, increasing the possibility of cross-contamination during times of no pumping and causing losses in the much-needed potable water. Several elevated water tanks, used to guarantee the needed water pressure in the network, were either completely collapsed or heavily damaged. For example, 18 water towers and elevated water tanks in Hama alone were affected.

Initial rapid needs assessments conducted by UNICEF field teams and partners on 7 February in Aleppo, Lattakia, Idlib and Hama indicate immediate need for water trucking to temporary shelters/displacement sites and locations where the network is no longer functional. In addition, hygiene kits, jerry cans, water purification items, installation of water tanks and rapid emergency repair of water and sewage networks are required.

In Idlib and parts of Aleppo, the 16 km long, strategic circular pumping line is believed to be heavily damaged with some parts being beyond repair. Cracks were reported in the water reservoir over the Medanki dam which could impact drinking water for over 190,000 people in Afrin and Azaz districts.

Health

Significant needs were identified during the initial rapid assessments conducted by health authorities and partners in 172 health facilities across Aleppo, Lattakia, Tartous and Hama.

During an earthquake, the main causes of mortality and morbidity with direct impact is generally caused by internal injuries, burns, crush syndrome, trauma, asphyxia, dust inhalation (acute respiratory distress), and/or exposure to the harsh winter conditions (i.e., hypothermia). Preliminary reports indicate that about 80 per cent of the injuries correspond to orthopedic trauma. The risk of wound infection and tetanus are high due to difficulties related to the...
provision of immediate health care, access to health facilities, and delayed admission to hospitals for acute injuries.

Cold weather and falling temperatures, combined with a lack of shelter and access to clean water and sanitation, are increasing the risk of infectious respiratory, diarrheal, vector-borne and other disease outbreaks. An interruption in access to essential health services might also result in increasing maternal and child deaths, vaccine preventable diseases as well as deaths from chronic diseases. The injured are being treated in tents due to the damages to health facilities. Medicines are running short and there is concern of a resurgence of the cholera outbreak due to reported contaminated water in parts of Idleb and Aleppo.

Caregivers and frontline workers are also prone to high levels of distress and anxiety as they experience displacement, grief, and loss. Frontline workers, who are the ones that usually provide lifesaving support, are themselves experiencing high levels of fatigue and require mental health and psychosocial support (MHPSS).

**NUTRITION**

Nearly 1 million people are in need of nutrition support in the affected governorates of Aleppo, Idleb, Lattakia, Tartous and Hama.

The earthquake further added to the huge burden on the already exacerbated nutrition situation of the most vulnerable children and women due to current economic crisis and high food prices in the country. Millions of children and pregnant and lactating women (PLW) are directly affected.

During the 2022 needs analysis for the Syria Humanitarian Needs Overview (HNO), the nutrition situation for children and women in Syria already showed continued deterioration posing a significant public health problem. The acute malnutrition level among children and women is steadily rising, whilst stunting, micro-nutrient deficiencies and uptake of Infant and Young Child Feeding (IYCF) and care practices remain concerning. These pre-existing needs are further heightened with the impact of the earthquake.

**EDUCATION**

UNICEF and other education partners were immediately mobilized to identify the impact of the devastating earthquake on schools and children's learning, assessments are ongoing and data verification processes, reported numbers are likely to change due to the evolving situation. As of 14 February, it has been reported that over 900 schools in Aleppo, Tartous, Latakia, Homs, Hama and Idlib have sustained damages at varying levels. In addition, over 170 schools were reported as being used as shelters.

**Child Protection, Gender-Based Violence in Emergencies (GBViE)**

It is estimated that at least 920,000 children in Aleppo, Idlib, Lattakia, Tartous, Hama and Homs are in need of immediate support to ensure protection from risks with direct impact on their mental and physical wellbeing. More than 70 cases of family separation and children without parental care have been identified by UNICEF and partners, which were all reunified or provided with alternative care. This number is expected to increase in the coming days and weeks. Beyond physical wounds, mental health issues such as anxiety, sleeplessness, and/or night terrors are likely to be particularly experienced by children after such events requiring immediate services to continue their critical work. Additional stress and weakened protection mechanism will likely expose children to violence, exploitation, abuse, and neglect.

Proximity of temporary and informal shelter increases protection and Gender based violence (GBV) risks, affecting prominently the most vulnerable women and girls. It is vital to mitigate those risks and also provide assistance to potential survivors of GBV, including via appropriate referrals for multi-sectoral support and to coordinate around dissemination of key Preventing Sexual Exploitation and Abuse (PSEA) messages.

**Cash transfers and social protection**

The earthquake has hit families who were already struggling to cope with the disastrous economic situation and meet their basic needs during the harsh winter months. The earthquake is yet another shock, especially for highly vulnerable families caring for children with disabilities and female-headed households. Preliminary assessments indicate that over 40,000 highly vulnerable families (200,000 people) have been heavily affected, including families who have been displaced and now live in collective and temporary shelters in Aleppo, Hama and the coastal areas. They are in dire need of cash assistance to meet their basic needs in terms of food, energy, hygiene, water and sanitation, health and warm clothes for children.
Priority response activities

**WASH**

UNICEF’s WASH earthquake response targets 4.3 million people (2.1 million children).

To immediately support families and children displaced and most in need, UNICEF, along with local partners, including the private sector, will provide water trucking to shelters and affected communities in Aleppo, Hama, Idlib, Lattakia and Tartous and governorates. Emergency Non-Food Items (NFI) including aqua tabs will be distributed to secure a minimum level of hygiene and water purification at household level. Cash voucher assistance will also be used as a modality to deliver WASH services through rapid response teams in Idlib and parts of Aleppo.

In addition, UNICEF will temporarily provide direct water pumping into the network, and until the elevated tanks are reinstated. Water quality surveillance which has already started needs to continue. Rapid repairs to the water and sewerage networks will need to start as soon as possible to enable early phasing out of water trucking and eliminate possibilities of contamination. Quick assessment to define the scope of repair works to water tanks and other infrastructure will define the scope of the much-needed repair works.

UNICEF will also support rehabilitation of/ provide gender sensitive WASH facilities for people in IDP camps and informal settlements. Assessments of required repair works for water and sewerage networks are also currently being undertaken so that interventions can start on a priority basis.

UNICEF will also intensify its community engagement and communication interventions to promote hygiene practices and safe handling of water. Social and behavior change activities will utilize the offered services through WASH and Health sectors to reach children and their families with an integrated package of social interventions.

**HEALTH**

UNICEF health response will target an estimated 3 million people (1.5 million children) in Aleppo, Idlib, Hama, Tartous and Lattakia.

For the immediate most urgent needs UNICEF will focus on life-saving interventions (medical supplies, medical check-ups, and vaccinations) for the affected population including women and children. UNICEF will support the continuous medical check-ups and increase awareness on maternal and child health issues. UNICEF will support primary health care centres, collective shelters, and referral hospitals with the needed medical supplies including newborn care units to ensure life-saving interventions for new babies.

In addition, we will enhance available health services through fixed health centres and mobile medical teams, in addition to the emergency repair works of primary health centres. Through NGO partners and health directorates, UNICEF will support mobile medical teams to reach the displaced population, providing maternal and child health care.

UNICEF will ensure effective engagement with the affected population through different strategies such as community volunteers and youth networks, expressive art, digital engagement to maintain practicing protective behavior and avoid the risk of spread of diseases particularly cholera. Interventions will also promote routine vaccination and exclusive breastfeeding and other routine healthy habits. UNICEF will ensure rehabilitation of health centers in the affected areas to ensure sustainable health services for the affected population and will support capacity building for health workers on maternal and child health.

**NUTRITION**

For Nutrition, UNICEF will target more than 1 million people (including 452,000 children) in Aleppo, Idlib, Hama, Tartous and Lattakia with preventive and curative nutrition services in order to prevent child mortality and morbidity attributed to malnutrition. As an immediate life-saving intervention, UNICEF and partners will implement rapid nutrition assessments and will provide high energy biscuits for children 24-59 months of age and for pregnant and lactating women, along with the provision of lipid-based nutrient supplements for children 6-23 months of age. UNICEF will also provide infant and young child feeding in emergency (IYCF-E) in the affected communities and collective shelters to protect, promote, and support optimal breastfeeding practices and ensure the adherence to the international guidelines for breastfeeding substitute use.

UNICEF will continue with the early detection and treatment of acute malnutrition, and through partners will continue provision of preventive nutrition supplies and IYCF programming. UNICEF will continue strengthening the health system and building the capacity of nutrition workers to provide essential nutrition services.

**EDUCATION**

A total of 610,000 students will be reached through education-in-emergencies interventions while about 120,000 teachers and education personnel will also be provided with assistance.

UNICEF will immediately prioritize support the safe reopening of affected schools in Aleppo, Hama, Lattakia, Homs and Idlib and ensure children resume their education in a safe environment with adequate and single-sex WASH facilities. Conducting school safety assessments and undertaking repairs of the broken windows and doors of schools that sustained light damage will be a priority to make them safe for students.

Affected children and teachers will need to be provided with basic Psychosocial Support (PSS) as well as health and safety awareness, in coordination with the Child Protection, WASH and Health sectors. To support children who have missed out on their learning, UNICEF will work with education partners, including local NGOs and community organizations, to provide catch-up and remedial support lessons in which PSS will be integrated. Schools that have sustained more damages will be rehabilitated and provided with furniture and single sex latrines to accommodate children. The rehabilitation component will be conducted in coordination with the WASH Sector. Teachers and education personnel will be trained on the provision of PSS and supporting learning recovery.
UNICEF will work in collaboration with protection partners to address the immediate MHPSS needs of around 770,000 affected girls, boys, women, men and frontline workers in Aleppo, Idlib, Lattakia and Hama and other locations affected by the earthquake. A multi-layered and cross-sectoral approach to address MHPSS needs will be adopted, resulting in an integrated package of services, including community-based support and targeted psychosocial support interventions, including through child friendly spaces. Winterization Non-Food Items (NFIs) will also be provided to supplement the MHPSS interventions. Referrals and case management will also focus on children without parental care and children separated from their families including family tracing and reunification or appropriate alternative care support. Risk Communication and Community Engagement (RCCE) messaging on awareness of child protection areas will decrease the level of distress and risks of violence against children, family separation, Gender based violence (GBV) and negative coping mechanisms.

### Cash transfers and social protection

Within 96 hours of the devastating earthquake that hit Syria, UNICEF started providing emergency cash assistance to help meet the basic needs of the most affected children and their families in Aleppo and Hama governorates. UNICEF will continue to provide immediate cash relief to 333,000 people (66,600 families) in affected areas of Aleppo, Hama, Idlib and the coastal areas to target winterisation needs. Unconditional cash assistance will be provided to the most vulnerable families, such as families caring for children with disabilities, orphans, children with chronic illness and female-headed families, as well as all families with children in affected geographical locations and collective shelters through the vertical and horizontal expansion of the ongoing cash for winter interventions and the children with disabilities programme. This will allow quick and effective relief to the most affected families to cover their most basic and immediate needs.

In addition to cash, families with vulnerable children who have been displaced because of the earthquake, and the most vulnerable children in need of social protection (children with no legal document / out of school children and children with disabilities), will also receive case management support and referral to social services.

### Coordination and cross-sectoral (Preventing Sexual Exploitation and Abuse (PSEA), Accountability to Affected Populations (AAP), Evaluation)

UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. UNICEF will ensure affected persons are reached through messaging on prevention and access to services, and existing complaints and feedback mechanisms (including Sexual Exploitation and Abuse (SEA)) will be scaled up across all interventions. Aside from the community engagement and social and behavior change support to above mentioned sectors, UNICEF will lead the coordination across UN and non-UN organizations for relevant response in this area. This will ensure streamlining assessments, messaging, complementarity of activities and unifying tools of monitoring and reporting in line with Communications Coordination Committee (CCC) and other global commitments. In addition, UNICEF will lead strategic activities catered to building resilience of children and their families affected by the earthquake and strengthening partners emergency preparedness following the humanitarian program cycle. All of the response will be supported and quality assured by UNICEF MENA regional office experts in the various areas.

### FUNDING REQUIREMENTS

UNICEF requires US$172.7 million to deliver immediate life-saving support for 5.4 million people (including 2.6 million children) impacted by the earthquake. Assistance will be delivered to highly impacted areas through the Whole of Syria approach, using all modalities possible, including within Syria and through cross-border and cross-line operations. Flexible and unearmarked contributions are requested to enable UNICEF to rapidly respond based on emerging needs. This initial three-month response plan is part of the inter-agency Flash Appeal for the earthquake response and will be integrated into the revised 2023 UNICEF Syrian Arabic Republic Humanitarian Action for Children (HAC).

<table>
<thead>
<tr>
<th>PROGRAMME</th>
<th>AMOUNT (USD)</th>
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<tbody>
<tr>
<td>WASH</td>
<td>47,890,008</td>
</tr>
<tr>
<td>Health</td>
<td>29,265,371</td>
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<tr>
<td>Nutrition</td>
<td>18,361,542</td>
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<td>Education</td>
<td>31,300,000</td>
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<tr>
<td>Child Protection GBV</td>
<td>19,950,000</td>
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<tr>
<td>Cash transfers and social protection</td>
<td>23,623,079</td>
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<tr>
<td>Cross-sectoral (PSEA, AAP, Evaluation, RO technical support)</td>
<td>2,400,000</td>
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</tbody>
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**Total**: **172,700,000**

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2 All cluster coordinators costs are included into sectoral programme budgets.

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