



A nurse provides an examination to a woman at an International Medical Corps-supported primary health center in Jaramana, Damascus.

Since the fall of President Bashar al-Assad on December 8, Syria has experienced profound political and security transformations. Ahmed al-Sharaa has assumed leadership, implementing decrees mandating the disarmament of all armed groups to restore central state control. This policy seeks to reestablish authority and promote stability nationwide. However, widespread hostilities persist, particularly in Aleppo, Deir-ez-Zor and Tartous, significantly impeding recovery efforts.

On December 16, airstrikes were reported in Abu Kamal, Deir-ez-Zor and Tartous, intensifying the challenges faced by affected regions. Simultaneously, territorial shifts in southern Syria have raised concerns about water supply disruptions in the Dar'a governorate. Despite a temporary ceasefire implemented on December 17, insecurity remains acute in Ain Al-Arab and Menbij districts. NGOs have been unable to access Menbij for more than a week, and critical infrastructure requires urgent repair. Parts of northeastern Syria, including Al-Hasakeh and Ar-Raqqa, have exhibited improved stability, although curfews continue to restrict normalcy.

The humanitarian crisis in Syria remains severe, marked by widespread displacement and a scarcity of essential resources. The population faces significant challenges in accessing health services, water, sanitation, education and protection. The healthcare system is particularly strained, with numerous facilities either non-operational or functioning at minimal capacity. Acute shortages of pharmaceuticals and medical supplies exacerbate the crisis, while damaged or stolen ambulances severely impede the transport of critical patients. These challenges are especially pronounced in Aleppo, Deir-ez-Zor and northeastern Syria.

In Aleppo, several major hospitals—including Aleppo University Hospital, Ibn Khaldoun and Ibn Rushd—face critical water shortages, heightening the risk of disease outbreaks. Al Zahi Azraq Hospital is struggling with inadequate resources, limiting its ability to provide essential care. In Hama, 30 health facilities—including seven primary health centers (PHCs)—remain out of service. Deir-

FAST FACTS

- Following President Assad's fall on December 8, Ahmed al-Sharaa assumed leadership and mandated the disarmament of all armed groups to restore state control. However, hostilities persist, particularly in Aleppo, Deir-ez-Zor and Tartous.
- The humanitarian crisis has worsened, with severe shortages in healthcare, water, sanitation, education and protection, especially in Aleppo, Deir-ez-Zor and northeastern Syria.
- In Aleppo, hospitals face water shortages. Hama has 30 out-of-service health facilities, and five out of eight PHCs in Deir-ez-Zor are operating at half capacity.
- Despite a ceasefire on December 17, insecurity in Ain Al-Arab and Menbij continues to prevent NGO access. Critical infrastructure is in urgent need of repair.

OUR FOOTPRINT

- International Medical Corps has operated in Syria since 2008, providing healthcare, nutrition, mental health, child protection, GBV response, and WASH services across 12 governorates with a team of 745 direct staff and 1,404 staff at supported facilities.
- From January to November, International Medical Corps reached more than 1 million people with healthcare services, conducted nutritional screenings for 230,000, and provided WASH services to 110,000 people and mental health support for 30,000.

OUR RESPONSE

- International Medical Corps is responding to this emergency by:
 - operating 21 MMUs that provide primary healthcare and MHPSS services;
 - facilitating the transfer of emergency cases to five hospitals we support through our ambulance services; and
 - procuring 1,200 hygiene kits and 800 mini dignity kits to promote hygiene and reduce the risk of disease among displaced populations.

ez-Zor faces a similarly dire situation, with only three out of eight PHCs fully operational and the remaining five functioning at half capacity, due to security concerns. In northeastern Syria, 14 health facilities—including 10 PHCs and one emergency operations center—have been forced to suspend operations due to vandalism, looting and restricted access. Additional damage to the Kherbet Al Faras PHC in Tartous and the Naseeb Border Health Center in Dar'a have further strained the already overstretched healthcare system.

As Syria navigates this critical transitional period, the challenges remain multifaceted and fluid. Diligent monitoring and coordinated efforts are essential to address immediate needs and lay the groundwork for long-term recovery and stability.

International Medical Corps Response

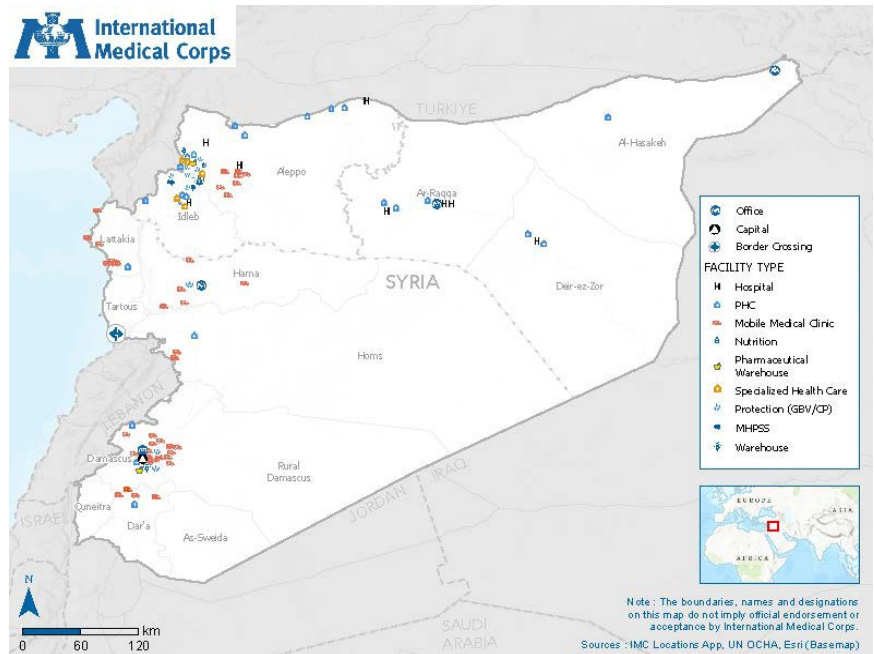
Operating in Syria since 2008, International Medical Corps has played a vital role in delivering essential services to at-risk populations. Our work spans critical areas, including healthcare, nutrition, mental health and psychosocial support (MHPSS), child protection, gender-based violence (GBV) prevention and response, and water, sanitation, and hygiene (WASH). International Medical Corps operates in 12 governorates across Syria, including Aleppo, Damascus, Rural Damascus, Dara'a, Deir ez-Zor, Hama, Hassakeh, Homs, Idleb, Lattakia, Raqqa and Tartous. International Medical Corps employs 745 staff and further supports 1,404 health staff based at supported facilities, including doctors, nurses and healthcare workers.

From January to November, International Medical Corps delivered healthcare to more than 1 million people, performed nutrition screenings for nearly 230,000 people, provided WASH services to 110,000 people, assisted 49,000 with protection services and supported nearly 30,000 people with MHPSS services. Amid the latest conflict and displacement, we have significantly ramped up our emergency operations to address urgent needs. Working closely with local entities such as health departments and community committees, International Medical Corps continues to prioritize access to lifesaving healthcare and essential services in affected regions.

Before the recent escalation of conflict, International Medical Corps operated 12 mobile medical units (MMUs) across seven governorates in southern and central Syria, including Aleppo, Damascus, Rural Damascus, Dara'a, Hama, Homs, and Latakia. These units provided healthcare services to vulnerable populations in hard-to-reach areas, addressing critical needs in underserved communities. In response to the recent wave of mass displacement, International Medical Corps has expanded operations to meet the growing demand for healthcare services among internally displaced persons (IDPs). Since December 2, we have deployed nine additional MMUs to deliver medical care to IDPs residing in hosting facilities and surrounding areas. These units have been strategically positioned in high-need locations, including four in Idleb, one in Kobane, two at Raqqa Stadium and two in Tabqa (one at Tabqa Stadium and another serving schools repurposed as temporary shelters). To further enhance healthcare access, International Medical Corps plans to deploy an additional five MMUs in Raqqa later this week.

The MMUs are providing a comprehensive range of healthcare services, including general healthcare, reproductive health services, dressing stations and pharmacy support. These units are designed to ensure both privacy and efficiency while prioritizing accessibility in underserved and hard-to-reach areas. They address a variety of medical needs, including the treatment of common acute and chronic illnesses, injuries and endemic diseases, while providing essential acute and chronic medications, diagnostic tools and medical equipment. The units also focus on controlling communicable diseases and implementing community health interventions. In the area of reproductive and maternal health, the MMUs deliver basic sexual and reproductive health, and maternal, newborn and child health, services. These include antenatal care, postnatal care, family planning services and syndromic management of sexually transmitted infections, ensuring critical support for vulnerable populations.

Alongside our mobile healthcare efforts, International Medical Corps is delivering essential support through ambulance services. Among the facilities receiving support are Al Zahawri, Raqqa National, Raqqa Pediatric, Tabqa and Tabqa Maternity hospitals.



International Medical Corps also is working to mitigate the risks associated with the displacement crisis. We have distributed 1,200 hygiene kits, 800 mini dignity kits and 1,600 winterization items for both adults and children in areas experiencing high influxes of IDPs, where there is a particularly high demand for sanitation supplies. Distribution of these items will help reduce the spread of communicable diseases, promote healthier hygiene practices and improve the living conditions of displaced individuals.