



A staff member provides medical services in Tabqa Hospital.

Hostilities have escalated across Syria in recent days, with reports of violence from Aleppo—particularly near the Tishreen Dam—as well as from Al-Hasakeh, Ar-Raqqa, Homs and Quneitra. In Menbij, ongoing clashes have led to the displacement of approximately 15,000 people from the surrounding rural areas. The situation underscores the persistent instability affecting much of the country.

The deteriorating security environment has placed increased strain on humanitarian efforts, particularly in northeastern Syria. Operations in areas such as eastern Aleppo, Ar-Raqqa and Deir-ez-Zor face frequent disruptions, while in the Coastal Area aid activities in Lattakia and Tartous are further impeded by theft, vandalism and other conflict-driven challenges. Such conditions continue to limit the capacity of organizations to deliver vital support to affected populations.

For the 24,600 internally displaced persons (IDPs) living in 204 emergency collective shelters across northeast Syria, conditions remain particularly dire. Overcrowding in these centers has become a significant issue, compounded by inadequate access to clean water, functional sanitation facilities and heating. Many of these individuals have been unable to return to their homes since their initial displacement in December, forcing them to endure prolonged hardships in unsuitable environments.

Access to healthcare remains an acute concern, particularly in the northwest. Findings from a recent rapid assessment revealed that 61% of respondents reported severe limitations in accessing medical services, leaving IDPs disproportionately affected. Immediate needs include emergency medical care for injuries, treatment for chronic diseases and access to essential medicines. Additionally, an assessment of maternal and newborn

FAST FACTS

- Recent clashes in Aleppo, Al-Hasakeh, Ar-Raqqa, Homs and Quneitra, as well as fighting in Menbij, have displaced an estimated 15,000 people and disrupted stability across Syria.
- Volatile security conditions and conflict-related violence are hindering humanitarian operations.
- Displaced children and families in northeast Syria show increasing signs of psychological distress, but access to mental health and specialized support remains critically limited.

OUR FOOTPRINT

- International Medical Corps has been providing humanitarian aid in Syria since 2008, operating in 12 of 14 governorates with 745 staff members. We support 1,404 healthcare workers, 14 hospitals, 21 PHCs, 23 MMUs and five specialized facilities strategically placed in underserved areas.
- In 2024, we reached more than 1 million people with healthcare, nutrition, MHPSS, WASH and protection services.

OUR RESPONSE

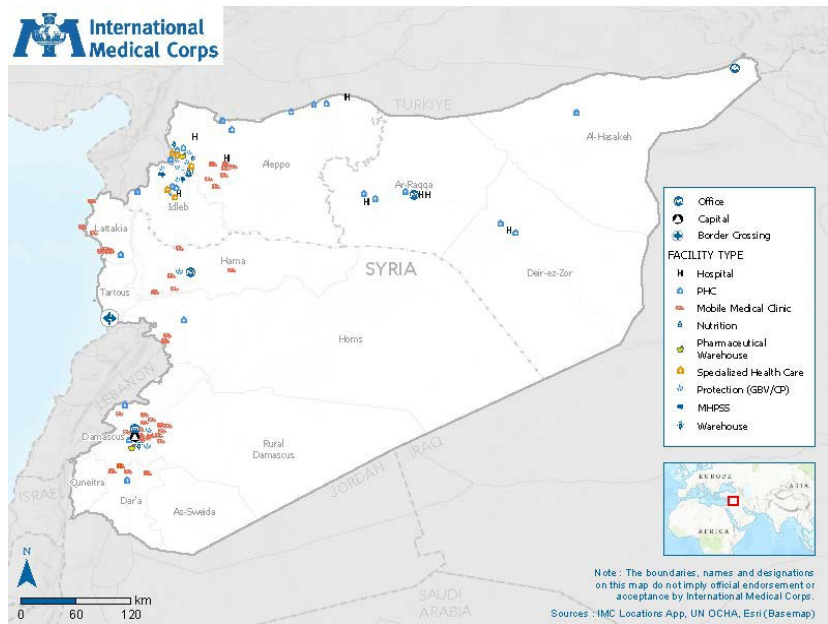
- International Medical Corps has expanded healthcare support across Syria, enhancing services at hospitals and PHCs with essential resources like medications, trauma kits, fuel, oxygen and staffing. This ensures uninterrupted care in trauma, MHPSS, mass-casualty management and disease monitoring.
- Mobile medical units now serve 23 underserved areas, including Aleppo, Idleb and Rural Damascus, providing healthcare, mental health, and nutrition services. Rapid response teams address outbreaks, while ambulances transport patients to specialized facilities.
- Since November, we have conducted 18,612 health consultations, distributed 463,933 medications and delivered 451 mental health and psychosocial support (MHPSS) services, along with 801 protection services.

healthcare facilities found that while 60 centers remain operational, five have already exhausted their funding and another 29 are at risk of financial collapse within three months, threatening essential services for women and infants.

The growing psychological toll on families, particularly children, has become increasingly evident in northeast Syria. Many display signs of profound distress, highlighting the urgent need for mental health and psychosocial support (MHPSS) services. However, specialized care and referral pathways remain scarce, leaving many without the assistance required to address their emotional and mental well-being.

International Medical Corps Response

International Medical Corps has provided essential humanitarian aid in Syria since 2008, operating in 12 of the country's 14 governorates. We directly employ 745 staff members, and work with 1,404 healthcare staff at supported facilities. Our network includes 14 hospitals, 21 primary healthcare centers (PHCs), 23 mobile medical units (MMUs) and five specialized healthcare facilities. These resources are placed strategically to serve underserved areas and ensure that vital healthcare services reach those in need. We collaborate with Syria's Ministry of Health (MoH) and Department of Health (DoH) to strengthen public health infrastructure, improve healthcare facility operations and support local partners managing PHCs by providing medical supplies, operational assistance and workforce training.



In response to increased conflict and displacement, we have scaled up emergency operations to enhance healthcare facilities, provide critical medical supplies and protect healthcare workers. We continue to focus on long-term plans to rebuild health infrastructure, train local healthcare staff and create sustainable programs addressing physical and mental health needs. Our emergency operations support PHCs, hospitals and healthcare facilities with essential resources, such as assistive devices, infection prevention materials, laboratory supplies, medical consumables, medical equipment, medications and trauma kits. We ensure uninterrupted service delivery by supplying facilities with electricity, fuel, oxygen, water and sanitation supplies. We address staffing shortages by deploying additional personnel to ensure uninterrupted care. Our expanded services include communicable disease monitoring, immunization, mass-casualty management, physical rehabilitation, maternal and newborn health, surgical services, trauma and emergency care. Integrated mental health, nutrition and protection services. Our rehabilitation efforts help people with war-related injuries, disabilities or mobility challenges regain independence and improve their quality of life. This week, we provided six hospitals in Dara'a and five in Homs with additional supplies of both liquid and standard oxygen.

International Medical Corps increased access to healthcare in underserved areas by deploying MMUs to regions like Aleppo, Daraa, Deir El Zor, Homs, Idleb, Latakia, Raqqa, Rural Damascus and Tartous. These MMUs provide a broad range of healthcare services, including maternal and newborn health, while integrating mental health, nutrition and protection support. We are preparing rapid response teams to manage disease outbreaks like cholera, and expanding ambulance services to ensure that people needing specialized care can reach facilities such as Kobane Hospital and Tabqa Maternity Hospital. These initiatives improve access to advanced treatments for vulnerable populations.

We engage communities through activities such as disease prevention, health education, hygiene promotion and psychosocial support, delivered via community centers, family centers, MMUs and safe spaces. Feedback gathered from returnees—in coordination with partners in Jordan, Lebanon and Türkiye—guides reintegration planning and identifies required resources and services.

To align with national health strategies and optimize resources, International Medical Corps collaborates with key stakeholders such as the DoH, MoH and WHO. This cooperation ensures that critical support reaches those most in need. Since November, we have conducted 18,612 health consultations, distributed 463,933 medications and delivered 451 MHPSS services, along with 801 protection services. These efforts reflect our commitment to addressing immediate needs and strengthening Syria's healthcare system for the future.