

1. Completeness of Reporting

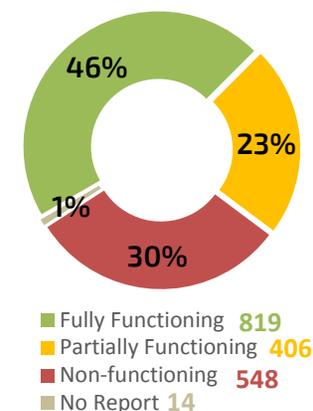
The completeness of reporting of public health centres across Syria has increased slightly in the 3rd Quarter 2016 to reach 99.2%, compared to 99.1% at the end of 2nd Quarter 2016.

2. Functionality Status

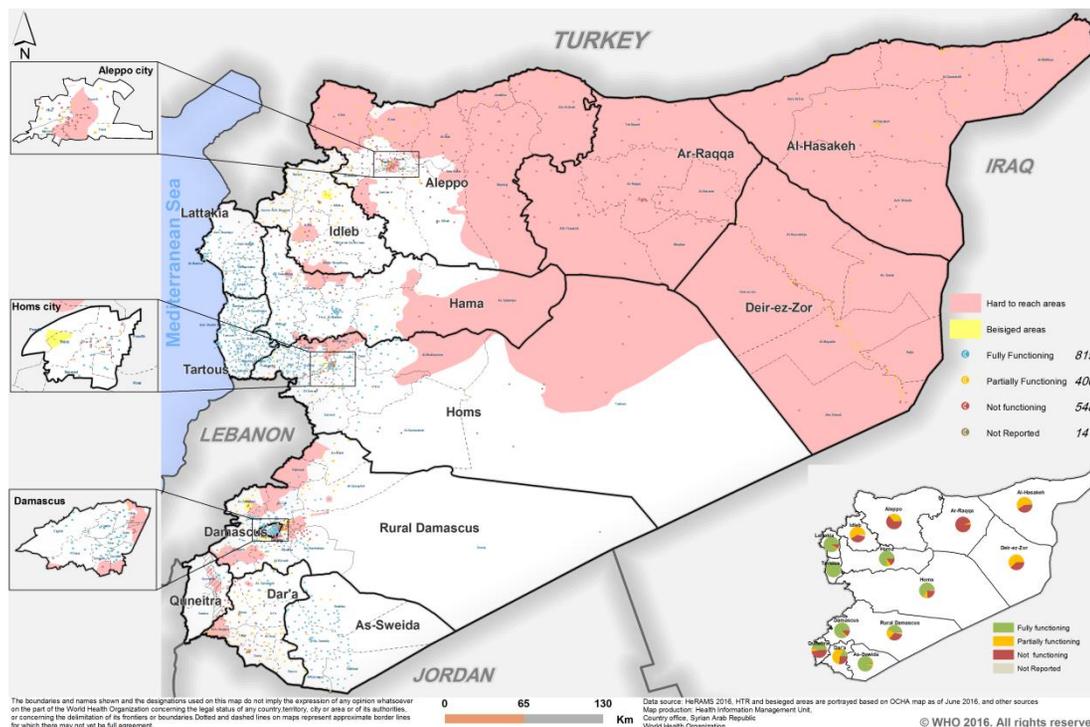
Functionality of the public health centres has been assessed at three levels: fully functioning, partially functioning, or not functioning. By end of the 3rd Quarter 2016 and out of 1,787 assessed public health centres, **46% (819)** were reported fully functioning, **23% (406)** partially functioning, **30% (548)** non-functioning (completely out of service), while the functionality status of **1% (14)** of health centres were unknown [Figure 1].

Distribution of public health centres by functionality status is presented in Map 1, which also portrays the HTR areas.

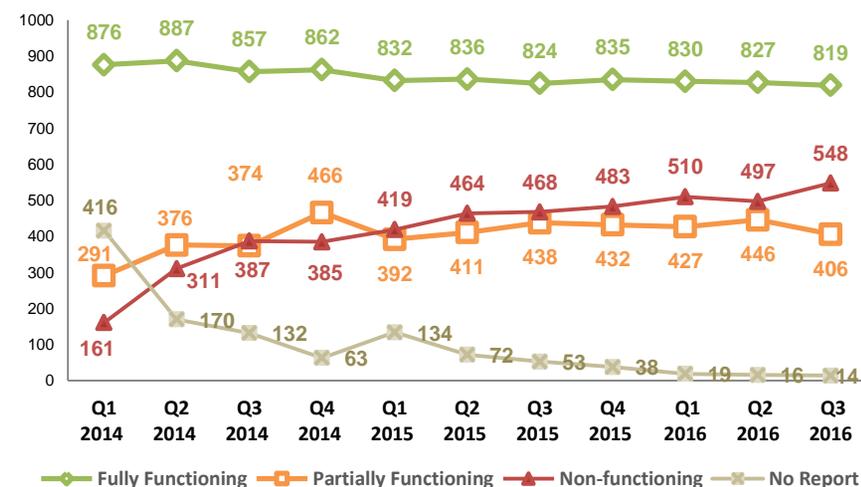
Figure 1: Functionality Status - Q3 2016



Map 1: Distribution and functionality status of the public health centres, 3rd Quarter 2016



Trend analysis of functionality status of public health centres from 2014 to 2016 is presented in Figure 2. The total number of non-functional health centres in 3rd quarter 2016 still high (**548**) compared to 3rd quarter 2015 (**468**).



¹ This is to acknowledge that the data provided in this snapshot is a product of joint collaboration between the World Health Organization, and Ministry of Health in the Syrian Arab Republic.

² HTR and besieged areas are portrayed based on OCHA map as of June 2016, and other sources

3. Accessibility Status

Accessibility to public health centres has been assessed at three levels: accessible, hard-to-access, or inaccessible health centre for patients.

By end of the 3rd Quarter 2016, **75% (1,340)** health centres were reported accessible, **1% (15)** hard-to-access, and **24% (423)** were inaccessible, while the accessibility status of **1% (9)** health centres were unknown [Figure 3].

4. Level of Damage

The condition of the public health centres' buildings has been assessed at three levels: fully damaged, partially damaged, and not damaged. By end of the 3rd Quarter 2016, 24% (435) health centres were reported damaged [7% fully damaged and 17% partially damaged], **66% (1,170)** were reported intact, while the building's condition of **10% (182)** health centres were unknown [Figure 4].

It is essential to cross-analyze the infrastructural damage of the public health centres in relation to the functionality status (i.e. provision of services). Some health centres have resiliently continued to provide services regardless of the level of damage of the building and by optimizing intact parts of the building or in a few cases operating from other neighboring facilities. The national figures translate as follows:

- ◆ Out of the **306 partially damaged health centres**, 131 health centres were reported partially functioning and 157 out of service (non-functioning), the functionality status of 2 of health centres were unknown, while 16 health centres were reported to be fully functioning providing all services through salvaging medical equipment from the damaged section of the health centre with full staffing capacity.
- ◆ Out of the **129 fully damaged health centres**, 103 were reported non-functioning, the functionality status of one of health centres was unknown, while 25 health centres have opted for innovative ways to continue providing health services to populations in need through partially functioning from other nearby temporary locations and provide health services with limited staff capacity and resources. *More details of the 25 health centres are available in the HeRAMS database.*
- ◆ Then again, health centres with **intact buildings (1,170 health centres)** does not directly reflect full functionality, only 802 of the 1,170 intact health centres are fully functioning, the functionality status of 3 of health centres were unknown, while 250 are partially functioning and 115 health centres are not functioning all together, due to limited access of patients and health staff to the facilities resulting from the dire security situation as well as critical shortage of supplies.

Trend analysis of the level of damage of the health centres' buildings between 1st quarter 2014 and 3rd quarter 2016 is presented in Figure 5. The total number of damaged health centres in 3rd quarter 2016 is higher (**435**) than the same time last year (**410**).

Figure 3: Accessibility status- Q3 2016

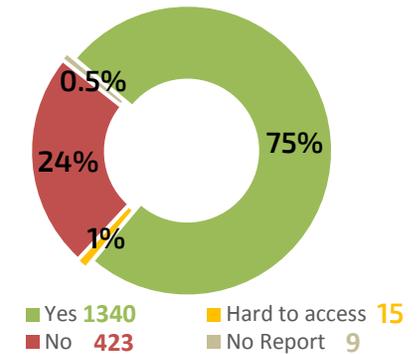
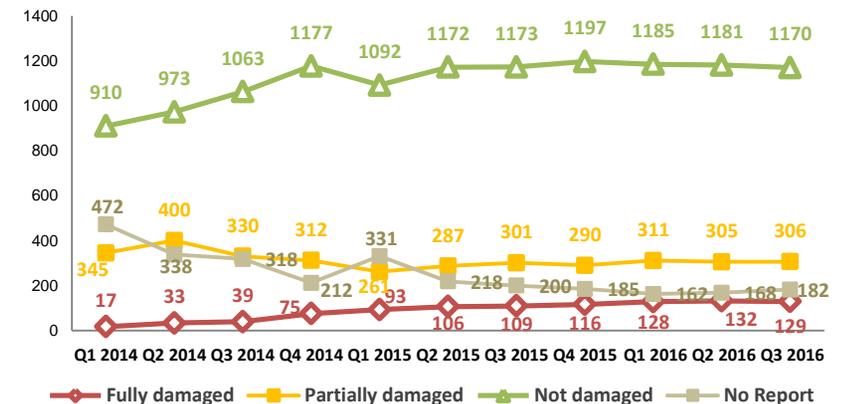
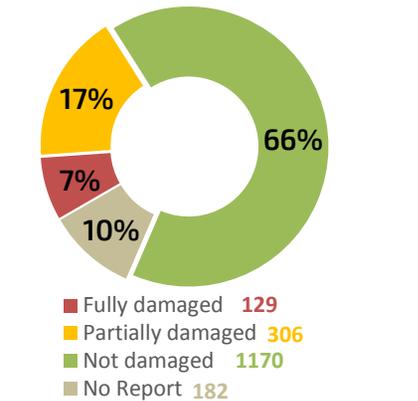


Figure 4: Level of Damage - Q3 2016



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