1. COMPLETENESS OF REPORTING

The completeness of reporting of public hospitals across Syria remained 100%, where all 98 Ministry of Health (MoH) hospitals and 13 Ministry of Higher Education (MoHE) hospitals continued to report to HeRAMS in November 2017¹.

2. FUNCTIONALITY STATUS

Functionality of the public hospitals has been assessed at three levels: fully functioning, partially functioning, or not functioning. By the end of November 2017, and out of the 111 assessed public hospitals (MoH & MoHE), 49% (54) were reported fully functioning, 25% (28) hospitals were reported partially functioning (i.e., shortage of staff, equipment, medicines or damage of the building in some cases), while 26% (29) were reported non-functioning [Figure 1].

Distribution of public hospitals by functionality status is presented in Map 1, which also portrays the HTR areas².

Trend analysis of functionality status of public hospitals Throughout 2016 and 2017 is presented in Figure 2.

Figure 1: Functionality Status - Nov 2017

- Fully Functioning: 54
- Partially Functioning: 28
- Non-Functioning: 29

Figure 2: Trend analysis of functionality status of public hospitals, from January 2016 to November 2017

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

² HTR and besieged areas are portrayed based on OCHA map as of September 2017, and other sources.
3. ACCESSIBILITY STATUS

Accessibility to public hospitals has been assessed at three levels: accessible, hard-to-access, or inaccessible hospital for patients. By the end of November 2017, 66% (73) hospitals were reported accessible, 9% (10) hard-to-access, and 25% (28) were inaccessible [Figure 3].

4. LEVEL OF DAMAGE

The condition of the hospitals’ buildings has been assessed at three levels: fully damaged, partially damaged, and not damaged. By the end of November 2017, 45% (50) hospitals were reported damaged [15% fully damaged and 30% partially damaged], while 55% (61) of public hospitals were reported intact [Figure 4].

It is essential to cross-analyze the infrastructural damage of the public hospitals in relation to the functionality status (i.e. provision of services). Some hospitals 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 33 partially damaged hospitals, 13 hospitals were reported partially functioning and 18 out of service (non-functioning), while 2 hospitals (Ophthalmology hospital in Homs, and Ebn Khalidoun Psychiatric hospital in Aleppo) were reported to be fully functioning providing all services with full staffing capacity.

- Out of the 17 fully damaged hospitals, 11 were reported non-functioning while 6 hospitals 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 6 hospitals are available in the HeRAMS database.

- Then again, hospitals with intact buildings (61 hospitals) does not directly reflect full functionality, only 52 of the 61 intact hospitals are fully functioning, while 9 are partially functioning and one hospital is 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 hospitals’ buildings between January 2016 and November 2017 is presented in Figure 5.