As host to some of the world's biggest emergencies, the Eastern Mediterranean Region carries the largest burden of people in need of aid, with more than 76 million people directly or indirectly affected by political conflict, environmental threats, and natural disasters.

In 2017, Syria entered into its 7th year of conflict and Yemen's health system is failing due to two years of intensified conflict, the economic crisis and a huge cholera outbreak. In Iraq, a military offensive aiming at liberating Mosul led to the displacement of almost 1 million people. Somalia is facing a triple threat of drought, impending famine, and disease outbreaks. Libya, OPT and Afghanistan struggle to provide health care services in insecure and under-resourced settings. Health security threats present in the region, such as acute watery diarroeah/ cholera, place populations at increasing risk.

Following are key highlights of WHO's work in emergencies in 2017.

{besps}eha/2017_review|width=640|height=427|inout=0|align=1|auto=0{/besps}

 {besps_c}0|01.jpg|  **Syria**

Intensified fighting in  north-east Syria  in 2017 led to the  displacement  of hundreds of thousands of vulnerable men, women and children. WHO has worked on all aspects of health services including scaling up its
 trauma response activities
and supporting
 life-saving services to all people in camps and host communities.
WHO also made sure that vaccines were available to protect children against life-threatening diseases. In countries facing conflict, the most direct victims are people who sustain life-threatening trauma injuries. But in the longer term, conflict affects another group of people: those who need treatment for diseases such as diabetes, kidney diseases and other chronic conditions. In November, WHO delivered the first shipment of its
 new emergency health kit
for noncommunicable diseases cross-border from Turkey to northern Syria, three years after the kit was first conceptualized.

More links:

[Timeline of the Syrian crisis: 6 lives affected by 6 years of war](#)

[WHO welcomes international support for Syrians](#)

[WHO support saves lives of malnourished children in Syria](#)

[Addressing the silent impact of war: WHO expands mental health care services across Syria](#)

[WHO increases support for cancer patients, the forgotten casualties of the Syrian war](#)

[WHO shipment of polio vaccines to launch local vaccination campaigns in Deir-ez-Zor and Ar-Raqqa](#)

[WHO reinforces health care services for thousands of people in newly accessible areas of Ar-Raqqa governorate, Syria](#)

{/besps_c} {besps_c}0|02.jpg| **Iraq**

In the first nine months of the [Mosul](#) conflict, WHO supported trauma care services for almost 20,000 men, women and children. Civilians caught in the cross-fire in Mosul often faced long travel times to the nearest medical facility, with many unable to survive the journey. WHO saved lives by setting up [5 field hospitals](#) and [8 trauma stabilization points](#) near the front lines, and deploying [96 ambulances](#). WHO also trained and deployed 64 [mobile health teams](#)

, and provided
[medicines](#)
for almost 2 million patients to health facilities.
 More links:

[WHO steps up medical preparations in response to west Mosul operations](#)

[WHO responds to reported use of chemical weapons agents in East Mosul, Iraq](#)

[Within hours of opening its doors, Athbah trauma field hospital treats casualties from west Mosul](#)

[National immunization campaigns launched in Iraq](#)

[WHO strengthens the capacity of family physicians in Iraq as an approach towards achieving universal health coverage](#)

 {/besps_c}    {besps_c}0|03.jpg|  **Yemen**

In April, cases of suspected cholera began to rapidly increase throughout Yemen, and within months, the country was facing the worst outbreak of cholera in the world. Together with partners, WHO worked to aggressively respond by [strengthening surveillance and laboratory testing](#)                                                   , deploying Rapid Response Teams, [providing medicines](#) , and educating communities on how to protect themselves. In October,
[diphtheria](#)
also made an alarming comeback in war-torn Yemen. WHO delivered medicines to tackle the fast-spreading outbreak. At the end of November, a shipment of 1,000 vials of life-saving anti-toxins and 17 tonnes of medical supplies arrived in Sana'a after being stalled by a three-week blockade that led to the closure of sea and air ports. Prior to the arrival of the WHO shipment, no supplies to treat diphtheria were available in the country.
 More links:

[Yemeni health system crumbles as millions risk malnutrition and diseases](#)

[WHO responds to resurgent cholera in Yemen](#)

[WHO delivers 70 tons of life-saving medicines and supplies to Sana'a](#)

[A concerted effort to strengthen emergency response in war-torn Yemen](#)

[New life granted to family after cholera diagnosis and treatment](#)

[Electronic integrated disease early warning system launched in Yemen](#)

[Nationwide immunization campaign protects 5 million children against polio in war-torn Yemen](#)

{/besps_c} {besps_c}0|04.jpg|  **Somalia**

In Somalia,  [drought](#)  conditions and a  [worsening food crisis](#)  left almost 350,000 children hungry and at risk of contracting deadly diseases. As health conditions deteriorated, the country faced its worst cholera outbreak in years. In March 2017, WHO and health partners conducted the first ever                                                                                  [oral cholera](#) [vaccination campaign](#) in the country and the largest for Africa, with one million people aged 1 year and above successfully  reached and immunized.
 More links:

[5 things you need to know about the crisis in Somalia and 5 reasons why you should care](#)

[WHO and Federal Ministry of Health of Somalia call for urgent support to address measles outbreak in Somalia](#)

[WHO delivers lifesaving trauma medicines and supplies for victims of Mogadishu blasts](#)

 {/besps_c}  {besps_c}0|05.jpg|  **Sudan**

In 2017, increasing numbers of South Sudanese men, women and children fleeing conflict and food insecurity arrived in Sudan, overstretching basic services, including health services. WHO supported national health authorities and partners to respond to the  [health needs of refugees](#) and to ensure they were protected against life-threatening diseases. This included strengthening disease surveillance systems in camps, conducing vaccination campaigns, paying health staff incentives, and providing medicines and medical supplies.
 More links:

[Capacity development workshop for hospital managers in Sudan](#)

[Towards zero cases: experts from Bangladesh share decades of AWD knowledge with Sudanese responders](#)

 {/besps_c} {besps_c}0|06.jpg|  **Libya**

In April 2017, cases of suspected cholera began to rapidly increase throughout Yemen, and within months, the country was facing the worst outbreak of cholera in the world.  [Together with partners, WHO worked to aggressively respond](#) by establishing diarrhea treatment centres and oral rehydration points, conducting safe water and sanitation activities, strengthening surveillance and laboratory testing, and deploying Rapid Response Teams. WHO also provided medicines, and conducted risk communication activities to educate communities on how to protect themselves against cholera, and when to seek treatment.
 Getting medical supplies into Yemen and distributing them to vulnerable people across the country is no easy task, with active conflict, damaged port infrastructure, intermittent blockades and logistical difficulties impeding access.  [In July 2017](#) , WHO successfully delivered ambulances, cholera kits, hospital equipment and intravenous fluids to the country via Hodeida Port. Additional ambulances were delivered through Aden Port.  In December, A WHO-chartered aircraft carrying more than
[70 tons of essential medicines and surgical supplies](#)
landed in Sana'a Airport, the largest planeload delivered by WHO to Yemen this year.
 As  [diphtheria](#)  made an alarming comeback in war-torn Yemen in October 2017, WHO delivered medicines to tackle the fast-spreading outbreak. At the end of November, a WHO

shipment of 1,000 vials of life-saving anti-toxins arrived in Sana'a after being stalled by a three-week blockade that led to the closure of sea and air ports. Prior to the arrival of the WHO shipment, no supplies to treat diphtheria cases with complications were available in the country.

[WHO delivers essential medical supplies to Benghazi-based clinic for internally displaced persons from Tawergha, and Benghazi Medical Centre](#)

[Libya conducts round of national immunization days for polio, measles, rubella and mumps](#)

[Rising health worker abductions in Libya threaten fragile health system](#)

{/besps_c} {besps_c}0|07.jpg| **Afghanistan**

The number of civilian casualties claimed by the war in Afghanistan continues to rise. As violence rages in Helmand, WHO supported the provision of [trauma care services](#) in the province through a 90-bed surgical centre for war victims in Lashkar Gah and 6 first aid trauma posts. These trauma posts provide life-saving first aid and stabilize trauma victims, and are connected to the surgical centre by a free [ambulance service](#)
operating 24 hours a day, 7 days a week.
More links:

[Hospitals should never be a target, WHO reiterates](#)

[Afghan women leading the battle against polio](#)

[Prevention is crucial for tackling Afghanistan's cancer burden](#)

[WHO improves trauma care facility in Afghanistan's busiest border crossing](#)

{/besps_c} {besps_c}0|08.jpg|

## Gaza

In 2017, increasing power cuts and shortages of fuel crippled all 14 public hospitals in Gaza and threatened the closure of essential health services, leaving thousands of  people at risk and without access to life-saving health care
. WHO immediately alerted partners and the international community, mobilized health cluster partners and advocated for a
humanitarian pooled fund allocation
to ensure that life-saving emergency services could be sustained.
 More links:

WHO and Ministry of Health strengthen capacities for International Health Regulations for Palestine

Strengthening mental health services for Palestinians

 {/besps_c} {besps_c}0|09.jpg| **Islamic Republic of Iran**

The Islamic Republic of Iran experiences both natural and man-made events. A 7.3 magnitude earthquake hit Kermanshah Province, western Iran, on 12 October 2017. Almost 9400 were injured and more than 1000 people hospitalized with serious injuries. WHO airlifted trauma kits and medical supplies from its hub in Dubai to provide surgical care for up to 4000 trauma patients. Since the devastating Bam earthquake in 2003, Iran has moved forward substantially in developing the national capacities for all hazard emergency response. The emergency medical system has been institutionalized in the Ministry of Health to reach out to communities across various provinces prone to different types of hazards.

WHO airlifts medical supplies to treat wounded in Islamic Republic of Iran-Iraq earthquake

Islamic Republic of Iran scaling up operational readiness of the country's health sector

 {/besps_c} {besps_c}0|10.jpg| **Attacks on health care**

Despite international laws and conventions calling for their safety and protection, health staff

working in emergency settings in WHO's Eastern Mediterranean Region continue to live in constant fear of attack. Syria remains the world's most dangerous place for health workers. On World Humanitarian Day in August 2017, WHO  recognized health workers across the region who remains committed to the oath they took to save lives, knowingly risking their own lives as they refused to abandon their patients.
 More links:

Attacks on Health Care Dashboard : 1 July to 30 September 2017

Attacks on health care on the rise in Afghanistan

Attack on vaccines sets back immunization efforts in eastern Syrian Arab Republic

WHO condemns attacks on hospitals and health workers in Idlib and Hama

Photo Essay: Attacks on Health Care

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