RESPONDING TO THE INCREASE IN HUMANITARIAN NEEDS IN THE SYRIAN ARAB REPUBLIC



HIGHLIGHTS OF THE ICRC'S ACTIVITIES IN 2024



Damascus. We worked with the Syrian Arab Red Crescent to install water tanks, complete with bases and taps, for displaced people.

THE SITUATION IN SYRIA

Hostilities intensified across the Syrian Arab Republic (hereafter Syria) in the final quarter of 2024, further worsening the humanitarian situation. In late November, a coalition led by Hayat Tahrir al-Sham launched large-scale and coordinated attacks, capturing several cities and prompting a shift in control to new authorities: a transitional government. Detention facilities were opened, prisoners were released, and new arrests took place. Remnants of the Islamic State group remained active in several areas.

The regional destabilization related to the conflicts in Israel and the occupied territories since October 2023, and in neighbouring Lebanon, made the security situation in Syria even more volatile.

This escalation occurred in the context of more than a decade of armed conflicts, which have caused hundreds of thousands of deaths, pushed 90% of the population below the poverty line, reduced essential services and critical infrastructure to less than half their operating capacity, and left many cities damaged or contaminated with unexploded remnants of war.

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1



In 2024, life remained difficult for millions in Syria. Ongoing conflicts and economic hardship continued to affect nearly every aspect of daily life. Many civilians were killed or injured, homes were lost and families were once again displaced. Health services were disrupted, with attacks on facilities and staff limiting access to care.

Most Syrians struggled to obtain or even afford essentials like food, medicine, fuel and clean water. Critical water and electrical infrastructure serving millions was at risk of collapse, and the presence of mines and explosive remnants of war (ERW) continued to endanger lives and delay recovery.

Displaced families endured dire living conditions in temporary shelters, host communities or camps such as al-Hol and al-Roj, while those who sought to return home often found their communities unsafe and without basic services.

Family separation remained a deep concern. By the end of 2024, we were actively tracing over 30,000 cases of people missing in connection with the past decade of conflicts – though the real number is much higher.

OUR RESPONSE

Present in Syria since 1967, the ICRC expanded its support for people affected by armed conflicts and other situations of violence in 2011. Together with the Syrian Arab Red Crescent and other partners, we continue to adapt our response as humanitarian needs evolve.

In 2024, as hostilities intensified across the country, we scaled up emergency support and postponed certain planned activities to focus resources where they were needed most.

CIVILIANS

Authorities and the ICRC discuss respect for IHL and the protection of civilians

We reminded authorities, weapon bearers and other pertinent parties of their obligations under IHL and other applicable international law to protect civilians and civilian infrastructure, particularly health facilities, and to facilitate access to essential services and humanitarian aid. We alerted them confidentially to documented allegations of IHL violations and other abuses, and to the protection-related concerns of internally displaced people, returnees, missing people's families and other conflict-affected people, particularly children.

2

Local actors are supported in mitigating the impact of mines/ERW

Syria remains one of the most heavily weapon-contaminated countries in the world. Children account for one in every three casualties caused by explosive ordnance.

Together with Syrian Arab Red Crescent volunteers, we collected data on mine/ERW-related incidents and surveyed suspected contaminated areas. In Aleppo and Rural Damascus, local workers were supported in visually inspecting approximately 1.9 million square metres of land. To further strengthen local capacities to reduce risks, new workers received training in mine clearance activities.

Around 2,000 people – including schoolchildren – took part in risk-awareness sessions on mine/ERW, organized by the National Society and the ICRC. Through our joint SMS campaign, we reached over 4 million atrisk individuals in hard-to-reach areas. Some of those wounded by mines/ERW received cash assistance or were referred for specialized surgery and post-operative care.



Rural Damascus. Detected hazardous items were marked, removed or stored for later disposal.

Millions of people gain improved access to water and other essential services

About 14 million people experienced improved access to essential services following maintenance and renovations carried out by the Syrian authorities, the National Society and the ICRC on the country's fragile infrastructure.

During emergencies, around 500,000 people met their immediate needs through ICRC-installed water tanks and sanitation facilities, as well as distributions of water, hygiene and shelter supplies. Water trucking to neighbourhoods, hospitals, bakeries and prisons, benefitted some 180,000 of these individuals.



We continued prioritizing the uninterrupted functioning of seven major water-pumping and treatment plants, along with their distribution systems, which serve millions, including hospitals and key facilities. Repairs, maintenance work, and the provision of spare parts (e.g. batteries, transformers) and consumables (e.g. water-purification chemicals, fuel) benefited some 9.5 million people. Water boards also received support from the ICRC, reaching around 3 million people – some of whom were included in the previous figure.

In December, the ICRC facilitated the safe passage of water providers to repair the electrical system of the al-Khafsa water station, enabling the gradual restoration of water for 3.2 million residents in Aleppo.

With the National Society, we implemented smaller-scale projects that provided clean water, sanitation and shelter to around 3.7 million internally displaced people, returnees and residents. At the al-Hol camp, maintenance was carried out on latrines, a collective kitchen and a market, while a generator was supplied for the water system at the al-Roj camp. Around 24,000 displaced people benefited from renovations and upgrades to housing, water and sanitation facilities. Public infrastructure, including water and irrigation systems and power plants, was also repaired, and a bakery selling subsidized bread was refurbished and restored.

As part of these efforts, seven schools were renovated, allowing 1,649 students to resume education. Thousands of water bottles were delivered to 18 schools in Hassakeh to support students during their national exams. Additionally, we made improvements to electrical facilities – for example, installing solar panels – and completed minor renovations at 10 primary-health-care centres.



People in remote and conflict-affected areas receive basic health care

In remote and conflict-affected areas, people obtained primary care at 40 health facilities, for which we provided supplies, equipment, infrastructural improvements, training and staff incentives. They included 14 facilities run by the National Society or the health ministry offering curative care, maternal and child health services, diabetes treatment, and care for leishmaniasis and other diseases. Some facilities were mobile units attending to people in hard-to-reach areas.

During disease outbreaks and other emergencies, some facilities were given medical items, expert advice and financial support. Health staff also attended ICRC information sessions on mitigating risks to their safety and documenting violence against health services.

Around 2,000 people emotionally traumatized by violence – including people in camps and people with physical disabilities – received mental-health and psychosocial support from health workers or community members trained or supported by us.



Conflict-affected households obtain food and other essentials

Conflict-affected households strengthened their livelihoods or met their basic needs with support from the National Society, the ICRC and pertinent authorities. Around 165,580 households (827,900 people) – including those with missing or disabled breadwinners – planted crops, farmed fish, raised livestock or started businesses with ICRC supplies (e.g. seed, fertilizer, sheep, fodder, tools) and financial support. Some also benefited from ICRC-supported livestock vaccination and irrigation improvements with the agriculture ministry. Around 66,600 destitute households (332,839 people) received cash for food, education and other necessities.



After seven years of displacement, Nadwa and her family finally returned to their hometown in Aleppo, determined to rebuild their lives from the ground up. With support from the ICRC and the Syrian Arab Red Crescent, they were able to raise sheep – a small beginning with a big impact.

- "The milk tastes like honey," Nadwa says with a smile.
- "A blessing that brought sweetness to our lives."

After the influx of people into Syria from Lebanon and escalating hostilities, the ICRC and the National Society donated food parcels, hygiene items and other household essentials to about 14,800 vulnerable households (73,927 people), including newly displaced families.

In Hassakeh, 6,238 people (1,200 households) received high-calorie supplements at homes, shelters, clinics and the al-Hol hospital to prevent malnutrition and support recovery.



Hassakeh. The ICRC distributed essential household items – including mattresses, blankets, mats, carpets, solar lights and hygiene kits – to families displaced from Aleppo owing to the escalation of hostilities in late 2024.

Members of separated families stay in touch

We stepped up our efforts to help bring answers to families of missing people in Syria, building on its consistent, long-standing support for the missing in the country.

Families separated by conflict, detention or migration reconnected through the Red Cross and Red Crescent Movement's family-links services. Many families lodged tracing requests with us, including via hotlines set up in December for those seeking relatives released from detention. We resolved 255 missing-persons cases by analysing internal and external data, including satellite imagery and information on human remains.

In Aleppo, the first Judicial Forensic Conference was held to discuss the state of forensic science in Syria and possibilities for its development. We provided forensic services with training, supplies and equipment, supplied generators to the al-Hol camp cemetery, renovated morgues in Damascus and Deir ez-Zor, and installed a solar-powered system at a forensic centre in Damascus. Graves at the al-Roj camp were marked for future identification.





A ray of hope. In 2024, eight children were reunited with their families after many years of separation.

KEY FIGURES



Provided **6,238 people** in residential areas, IDP shelters and health facilities in Hassakeh with high-calorie supplementary food to prevent and treat malnutrition;



Supported **40 primary-health-care facilities** with medicines and medical equipment to treat wounded people;



Gave **1,234,666 people**, including newly displaced by the hostilities, income support for covering their immediate expenses and bolstering their livelihoods;



Helped **thousands of people** living near weapon-contaminated areas learn more about the risks associated with mines/ERW; and



Helped **14,099,633 people** to have better access to essential services such as water, electricity and health care;



Determined the fate of **255 people** reported missing in connection with over a decade of armed conflicts and other crises, and gave answers to their families.

PEOPLE DEPRIVED OF THEIR LIBERTY

The ICRC visits people held in connection with the hostilities

We visited detainees at 15 places of detention, monitoring some 800 security detainees, and others with specific vulnerabilities individually. Most of these visits were carried out in accordance with the ICRC's standard procedures. After these visits, we communicated our findings confidentially to the detaining parties, and made recommendations for improving detainees' treatment and living conditions. Detainees used our family-links services to send Red Cross Messages — short, confidential notes to inform their families of their wellbeing.

Following the prisoner releases in December, we urged the pertinent parties to preserve vital records to prevent disappearances. Through our post-release programme, we also assisted newly released detainees in contacting their families, provided financial support and offered referrals for health care, including mental-health care and physical rehabilitation.



Four-year-old Rima, born with a complex heart condition, had been detained alongside her mother for nine months without access to medical care.

After their release in December, we arranged and funded her life-saving surgery, giving her a chance for recovery and hope beyond detention.

Read more about her story here.

Detention conditions are improved

The Syrian authorities drew on the ICRC's expertise to improve health services for detainees by training prison staff and introducing care procedures aligned with medical ethics. We equipped prison officials and doctors with the skills and resources needed to better manage detainees' medical records and medicine stocks. In the north–east, detainees received improved tuberculosis care and joined educational sessions on its prevention and treatment.

To make daily life safer and more comfortable, we upgraded water, sanitation and electrical systems in several places of detention, benefiting around 10,900 detainees. Prison staff were trained to keep these facilities functioning well. Around 26,700 detainees, including juveniles, received essential items such as mattresses, blankets, winter clothes, hygiene kits and recreational items to ease their hardship. In the north–east, approximately 4,700 detainees improved their nutrition with access to fresh food and supplements, especially those undergoing tuberculosis treatment or facing malnutrition.

KEY FIGURES



Made **55 visits** to **15 places of detention** holding around **26,000 detainees** to monitor their treatment and living conditions;



Provided **26,720 detainees**, including juveniles, with mattresses, blankets, winter clothes and other items, to help ease their situation; and



Helped **10,872 detainees** gain improved access to water, sanitation and electricity, by supporting renovations and donating spare parts and cleaning supplies; and



Helped ensure **4,743 detainees** in the north-east had access to fresh food and nutritional supplements.

WOUNDED AND SICK

Wounded people obtain life-saving care

We strengthened the casualty care chain across Syria by supporting hospitals, ambulance services and frontline medical capacity. Twenty hospitals received supplies, equipment and training, with three facilities regularly monitored by our staff. As hostilities intensified, more hospitals than planned received emergency items, such as weapon-wound treatment kits, alongside hot meals and water where needed.

At the al-Hol camp, thousands of residents accessed 24/7 care at the field hospital run by the ICRC and the Syrian Arab Red Crescent, in coordination with other organisations. The hospital provided vital services, including surgery, dental care, obstetrics, paediatrics and laboratory services.

Hospital staff joined our workshops on emergency care, advanced trauma treatment and mass-casualty management. To further enhance clinical knowledge and response capacity, we distributed war surgery reference books.

Tens of thousands of patients were treated or evacuated by the Syrian Arab Red Crescent and the Ministry of Health ambulance services, supported by our training and supply provision.



We worked with the National Society to restore operations at the Aleppo University Hospital, which was damaged by hostilities.

People with physical disabilities receive good-quality treatment

Over 3,000 people with physical disabilities, including detainees, received treatment and assistive devices at physical rehabilitation centres supported by the ICRC. In Hassakeh, assistive devices were also provided through the National Society/ICRC field hospital at the al-Hol camp and a hospital in Qamishli. We regularly supported these facilities with supplies, infrastructural improvements, staff training and patient feedback mechanisms.

In Damascus, we advised a prosthetics and orthotics training institute on building instructor ca-pacity and enhancing its curriculum. The health ministry received materials and guidance to adopt our polypropylene technology, enabling more efficient and affordable production of prostheses and orthoses.

Patients from hard-to-reach areas were assisted with transport via ICRC-supported shuttle services, cash assistance or accommodation arrangements. Some also received mental-health support to help them cope with the emotional impact of their disability, as well as referrals for livelihood support. At the ICRC centre in Aleppo, children with disabilities engaged in collective art projects, storytelling and other recreational activities.



Nour, a bright nine-year-old, has been receiving orthopaedic care at the ICRC's physical rehabilitation centre in Aleppo since she was just two. This year, she's starting school with a new prosthesis – an important step towards independence and returning to the classroom.

Despite all she's been through, she spoke with excitement about the new school year, the lessons ahead, and the friends she hopes to make.

"Without this prosthesis, Nour wouldn't be able to go to school," her mother says. "It's not just about walking, it's about her future, her education and her dreams."

Nour loves mathematics and hopes to become a teacher one day.

KEY FIGURES



Gave **21 hospitals** with supplies, equipment, training and emergency water and meal deliveries, to treat wounded patients and other conflict-affected people;



Supported **seven physical rehabilitation projects** with supplies, training and expert advice, to provide people with disabilities treatment and assistive devices; and



Renovated **four hospitals and two physical rehabilitation centres** to improve their services for people in need.

ACTORS OF INFLUENCE

We engaged government officials, weapon bearers, the general public, and other influential people and organizations to garner support for the Movement and broaden understanding of International Humanitarian Law. Following the developments in late 2024, priority was given to expanding dialogue with the transitional government, as well as a wide range of weapon bearers and stakeholders in Syria.

Influential actors learn about the Movement's work

Through ICRC field visits and events, communities, government officials, weapon bearers and other stakeholders gained a clearer understanding of the ICRC's neutral, impartial and independent humanitarian approach.

We engaged with journalists on covering humanitarian action in Israel and the Gaza Strip and at the Syria-Lebanon border. Together with media and Movement partners, campaigns were launched to raise public awareness of regional humanitarian issues. In response to escalating hostilities, we adapted our public communication across traditional and social media to better address requests for assistance, inquiries about missing people and detainees, and to broaden awareness of our work. Millions of affected people accessed life-saving information via meetings, printed materials, text messages and digital platforms.

Humanitarian concerns in Syria were discussed with Syrian authorities and international actors, including the impact of international sanctions, the impending collapse of water infrastructure, threats from mines/ERW, and the situation of displaced people –particularly foreigners still living in camps.

Authorities and the military strengthen their grasp of International Humanitarian Law (IHL)

We supported Syrian authorities in integrating IHL and international human rights law into military training, operations and doctrine by organising various IHL events for weapon bearers. Working with the national IHL committee – comprised of officials from various ministries and the Syrian Arab Red Crescent – efforts were made to strengthen authorities' understanding of IHL and promote its incorporation into domestic law. Lawmakers, judges and diplomats participated in ICRC workshops focused on their roles in IHL implementation, while selected government officials were sponsored to attend advanced IHL courses at the Sanremo International Institute of Humanitarian Law, further advancing their technical knowledge and capacity.

RED CROSS AND RED CRESCENT MOVEMENT

The Syrian Arab Red Crescent sustained its emergency response in all 14 governorates, which we supported with funding, technical guidance and essential supplies. We continued supporting its mobile communication centre and equipped selected branches with office and IT equipment, generators and solar panels to ensure continuity of operations during power outages. Our assistance also covered part of its operational costs and included financial incentives, food and first-aid equipment for staff and volunteers.

Together with the International Federation, we contributed to strengthening the National Society's financial management systems. Throughout the year, Movement partners in Syria – including the Syrian branch of the Palestine Red Crescent Society – convened regularly to coordinate a unified emergency response and discuss security-related developments.



TOO BIG TO FAIL: STABILIZING CRITICAL INFRASTRUCTURE

In Syria, more than a decade of conflict has severely damaged critical infrastructure. Electricity production has fallen by 80%, and half of all water treatment facilities no longer function. This interconnected collapse has created a cascading crisis – without reliable power, clean water becomes scarce, putting greater strain on essential services like hospitals.

In response, we launched one of our biggest multi-year programmes in 2022, in partnership with the Syrian Arab Red Crescent and the Ministry of Water Resources. Together, we have been working to maintain and rehabilitate seven major water stations that supply clean water to nearly 12 million people across the country. This includes repairing the stations' electrical and mechanical systems to ensure they remain operational for years to come.

This intervention has improved access to safe drinking water for millions, but the work is not over. With your support, we can continue to strengthen essential services, and restore dignity to the daily lives of countless people.



FINANCIAL INFORMATION

The table below shows the breakdown of our total expenditure in the Syrian Arab Republic for 2024, by programme.

EXPENDITURE IN KCHF¹

13,044
82,700
2,908
5,442
148
104,243
6,362

^{1.} KCHF: Figures expressed in thousands of Swiss francs

THANK YOU

We would like to thank **Fondation Ead Samawi** for its generous donation of **CHF 400,000** which supported our Too Big to Fail project in Syria in 2024. Your contribution has helped bolster critical services and enabled people living with the consequences of more than a decade of armed conflict and other violence to address their emergency needs and work towards rebuilding their lives.

Our operations in Syria were among the ICRC's ten largest in 2024. Your continued support enables us to ensure the dignity and save lives of people in need.

Thank you for working with us to bring hope to people in Syria.

The scars of 13 years of war run deep, and upholding international humanitarian law is critical for restoring stability in Syria. This is key to ensuring that families finally get answers about their loved ones, humanitarian aid reaches all those in need, detainees are treated humanely and people feel safe to return home.

- Mirjana Spoljaric, ICRC President



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ANNEX: KEY RESULTS

MAIN FIGURES AND INDICATORS: PROTECTION	TOTAL				
CIVILIANS					
RCMs and other means of family contact		UAMs/SC			
RCMs collected	1,248	9			
RCMs distributed	1,456	2			
Phone calls facilitated between family members	554				
Reunifications, transfers and repatriations					
People transferred or repatriated	8				
including people registered by another delegation	8				
Tracing requests, including cases of missing persons		Women	Girls	Воу	
People for whom a tracing request was newly registered	2,059	72	51	13	
including people for whom tracing requests were registered by another delegation	482				
Tracing cases closed positively (subject located or fate established)	255				
including people for whom tracing requests were registered by another delegation	122				
Tracing cases still being handled at the end of the reporting period (people)	30,410	1,484	1,088	2,07	
including people for whom tracing requests were registered by another delegation	11,306				
Unaccompanied minors (UAMs)/separated children (SC), including demobilized child soldiers		Girls Demobiliz		Demobilized children	
UAMs/SC newly registered by the ICRC/National Society	9	4			
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting	254	109			
Documents					
People to whom travel documents were issued	2				
People to whom official documents were delivered across borders/front lines	24				
Protection for the deceased					
Training sessions on the recovery, identification and protection of human remains	3				
People trained	53				
PEOPLE DEPRIVED OF THEIR LIBERTY					
ICRC visits		Women		Mino	
Places of detention visited	15				
Detainees in places of detention visited	26,189	1,089	1,612		
Visits carried out	55				
		Women	Girls	Воу	
Detainees visited and monitored individually	800	78	3	20	
of whom newly registered	470	31	3	15	
RCMs and other means of family contact					
RCMs collected	248				
RCMs distributed	1,117				
Phone calls made to families to inform them of the whereabouts of a detained relative	2				
Detainees released and transferred/repatriated by/via the ICRC	2				
People to whom a detention attestation was issued	1				

MAIN FIGURES AND INDICATORS: ESSENTIAL SERVICES		TOTAL	WOMEN	CHILDREN	ı
CIVILIANS					
Economic security					
Food consumption	People	6,238	1,872	2,495	
of whom IDPs		811	243	324	
Food production	People	1,234,666	382,282	479,414	
of whom IDPs		205,753	64,032	79,381	
Water and habitat					
Water and habitat activities	People	14,099,633	4,229,813	5,640,00	4
of whom IDPs		4,700,000	1,409,999	1,880,002	2
Primary health care					
Health centres supported	Structures	40			
of which health centres supported regularly		40			
Average catchment population		6,446,206			
Services at health centres supported regularly					
Consultations		759,746			
of which curative		750,098	105,881	104,772	
of which antenatal		9,648			
Referrals to a second level of care	Patients	7,400			
of whom gynaecological/obstetric cases		1,419			
Mental health and psychosocial support			Women	Children	Girl
People who received mental-health support		1,995			
of whom members of families of missing persons		*	*		
People who attended sessions to raise awareness about mental health		7,826			
People trained in mental-health care and psychosocial support		115			
PEOPLE DEPRIVED OF THEIR LIBERTY					
Economic security					
Food consumption	People	4,743			
Living conditions	People	26,720	2,578	1,140	
Water and habitat					
Water and habitat activities	People	10,872	718	537	
Health in detention					
Places of detention visited by health staff	Structures	12			
Health facilities supported in places of detention visited by health staff	Structures	8			

^{*} This figure has been redacted for data protection purposes. See the User guide for more information.

MAIN FIGURES AND INDICATORS: ESSENTIAL SERVICES		TOTAL	WOMEN	CHILDRI	EN .
WOUNDED AND SICK					
Hospitals					
Hospitals supported	Structures	21			
including hospitals reinforced with or monitored by ICRC staff		4			
Services at hospitals reinforced with or monitored by ICRC staff			Women	Children	Girl
Surgical admissions		2,308			
of which weapon-wound surgical admissions		659			
(including those related to mines or explosive remnants of war)		22			
of which non-weapon-wound surgical admissions		1,649	19	45	2
Operations performed		5,506	92	143	4
Medical (non-surgical) admissions		63	40	*	
Gynaecological/obstetric admissions		53	48	*	
Consultations		42,887			
Services at hospitals not monitored directly by ICRC staff					
Surgical admissions (weapon-wound and non-weapon-wound admissions)		3,373			
Weapon-wound admissions (surgical and non-surgical admissions)		976			
Weapon-wound surgeries performed		205			
Patients whose hospital treatment was paid for by the ICRC		140			
First aid		110			
First-aid training sessions		10			
Participants (aggregated monthly data)		538			
Water and habitat					
Water and habitat activities	Structures	6			
Physical rehabilitation			Women	Children	Girl
Projects supported		75			
of which physical rehabilitation centres supported regularly					
People who benefited from ICRC-supported projects	Aggregated monthly data	3,348			
of whom service users at physical rehabilitation centres (PRCs)		3,143	505	785	22
of whom participants in social inclusion projects not linked to PRCs		205			
of whom victims of mines or explosive remnants of war		527			
of whom weapon-wounded		1,231			
Services at physical rehabilitation centres supported regularly					
Prostheses delivered	Units	1,040			
Orthoses delivered	Units	273			
Physiotherapy sessions		12,311			
Walking aids delivered	Units	798			
Wheelchairs or postural support devices delivered	Units	493			
Mental health and psychosocial support					
People who received mental-health support		559			

st This figure has been redacted for data protection purposes. See the User guide for more information.