Hospitals reported as destroyed are considered non-functioning and are excluded from the functionality assessments.

Out of 13 hospitals, those reported as destroyed, non-functioning, or inaccessible are considered unable to provide health services in their current state and are therefore excluded from this section as reporting ends upon confirmation of their inability to provide any health services.

**BASIC AMENITIES**

- **Main water sources**
  - Tube well/borehole: 70% Available
  - Piped Supply Network: 60% Partially available
  - Tanker truck: 30% Not available

- **Power sources**
  - Generator: 100% Available
  - Solar system: 75% Partially available

**INPATIENT BED CAPACITY**

- **ICU beds**
  - Out of 10 hospitals expected to provide ICU beds, 7 (70%) do not have sufficient bed capacity.
  - Availability: 23%
  - Number of available beds: 83

- **Maternity beds**
  - Out of 12 hospitals expected to provide maternity beds, 9 (75%) do not have sufficient bed capacity.
  - Availability: 23%
  - Number of available beds: 157

- **General inpatient beds**
  - Out of 13 hospitals expected to provide general inpatient beds, 9 (69.2%) do not have sufficient bed capacity.
  - Availability: 31%
  - Number of available beds: 1018

**SERVICE DOMAIN OVERVIEW**

- **General clinical and trauma care**
  - 27%
  - 37%
  - 28%
  - 9%

- **Child health and nutrition**
  - 15%
  - 23%
  - 29%
  - 33%

- **Communicable diseases**
  - 23%
  - 23%
  - 26%
  - 28%

- **Sexual and reproductive health**
  - 42%
  - 13%
  - 25%
  - 19%

- **NCD and mental health**
  - 10%
  - 12%
  - 31%
  - 48%

* Only 14 (40%) out of 35 hospitals evaluated are partially functioning.*

**Non-functioning or destroyed**

Out of 35 hospitals evaluated:

- **Building condition**
  - 89% partially damaged or destroyed

- **Equipment condition**
  - 86% partially damaged or destroyed

- **Functionality**
  - 100% partially or non-functioning

- **Accessibility**
  - 64% partially inaccessible

**OF THE 14 PARTIALLY FUNCTIONAL HOSPITALS, THE MAIN CAUSES OF...**

- **Building damage**
  - 100% Conflict / attack / looting
  - Top 3 causes of building damage reported by 11 partially damaged hospitals.

- **Equipment damage**
  - 100% Conflict / attack / looting
  - Top 3 causes of equipment damage reported by 1 fully damaged and 10 partially damaged hospitals.

- **Partial-functionality**
  - 79% Lack of equipment
  - 43% Lack of medical supplies
  - 43% Damage of the HSDU
  - Top 3 causes of partial-functionality reported by the 14 partially functioning hospitals.

- **Inaccessibility**
  - 100% Insecurity
  - 75% Physical barriers
  - 12% Financial
  - Top 3 causes of inaccessibility reported by 1 inaccessible and partially accessible hospitals.

**INPATIENT BED CAPACITY**

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  - Number of available beds: 83

- **Maternity beds**
  - Availability: 23%
  - Number of available beds: 157

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## General clinical and trauma care services

<table>
<thead>
<tr>
<th>WHO basic emergency care</th>
<th>Short hospitalization capacity</th>
<th>Emergency and elective surgery</th>
</tr>
</thead>
<tbody>
<tr>
<td>33%</td>
<td>46%</td>
<td>Not available up to standard in 8 (66.7%) out of 12 hospitals expected to provide the service.</td>
</tr>
<tr>
<td>Not available up to standard in 8 (66.7%) out of 12 hospitals expected to provide the service.</td>
<td>Not available up to standard in 7 (53.9%) out of 13 hospitals expected to provide the service.</td>
<td>Not available up to standard in 8 (61.5%) out of 13 hospitals expected to provide the service.</td>
</tr>
<tr>
<td>42%</td>
<td>31%</td>
<td>23%</td>
</tr>
<tr>
<td>25%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

## Child health and nutrition services

<table>
<thead>
<tr>
<th>Management of children classified as severe or very severe diseases</th>
<th>Integrated management of acute malnutrition</th>
<th>Stabilization center for SAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>45%</td>
<td>Not available up to standard in 6 (54.5%) out of 11 hospitals expected to provide the service.</td>
<td>Not available up to standard in 7 (60.6%) out of 11 hospitals expected to provide the service.</td>
</tr>
<tr>
<td>Not available up to standard in 6 (54.5%) out of 11 hospitals expected to provide the service.</td>
<td>Not available up to standard in 8 (88.9%) out of 9 hospitals expected to provide the service.</td>
<td>Not available up to standard in 7 (68.7%) out of 11 hospitals expected to provide the service.</td>
</tr>
<tr>
<td>45%</td>
<td>11%</td>
<td>12%</td>
</tr>
<tr>
<td>9%</td>
<td>2%</td>
<td>38%</td>
</tr>
<tr>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>60%</td>
<td>50%</td>
<td>50%</td>
</tr>
</tbody>
</table>

## Communicable diseases

<table>
<thead>
<tr>
<th>Syndromic surveillance</th>
<th>Event-based surveillance</th>
<th>Local priority diseases</th>
<th>Management of severe communicable diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>11%</td>
<td>30%</td>
<td>38%</td>
<td>38%</td>
</tr>
<tr>
<td>Not available up to standard in 6 (54.5%) out of 11 hospitals expected to provide the service.</td>
<td>Not available up to standard in 7 (70%) out of 10 hospitals expected to provide the service.</td>
<td>Not available up to standard in 5 (62.5%) out of 8 hospitals expected to provide the service.</td>
<td>Not available up to standard in 5 (62.5%) out of 8 hospitals expected to provide the service.</td>
</tr>
<tr>
<td>22%</td>
<td>50%</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>67%</td>
<td>20%</td>
<td>38%</td>
<td>38%</td>
</tr>
<tr>
<td>100%</td>
<td>86%</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>60%</td>
<td>43%</td>
<td>50%</td>
<td></td>
</tr>
</tbody>
</table>

## Sexual and reproductive health

<table>
<thead>
<tr>
<th>Clean home deliveries</th>
<th>Skilled care during childbirth</th>
<th>Basic emergency obstetric care</th>
<th>Comprehensive emergency obstetric care</th>
</tr>
</thead>
<tbody>
<tr>
<td>30%</td>
<td>55%</td>
<td>64%</td>
<td>60%</td>
</tr>
<tr>
<td>Not available up to standard in 8 (75%) out of 12 hospitals expected to provide the service.</td>
<td>Not available up to standard in 5 (45.5%) out of 11 hospitals expected to provide the service.</td>
<td>Not available up to standard in 4 (36.4%) out of 11 hospitals expected to provide the service.</td>
<td>20%</td>
</tr>
<tr>
<td>40%</td>
<td>20%</td>
<td>9%</td>
<td>20%</td>
</tr>
<tr>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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</tr>
<tr>
<td>80%</td>
<td>80%</td>
<td>80%</td>
<td></td>
</tr>
</tbody>
</table>

## Noncommunicable diseases and mental health

<table>
<thead>
<tr>
<th>Psychological first aid</th>
<th>Inpatient care for mental disorders</th>
<th>Inpatient care for mental disorders by specialists</th>
</tr>
</thead>
<tbody>
<tr>
<td>25%</td>
<td>17%</td>
<td>17%</td>
</tr>
<tr>
<td>Not available up to standard in 6 (75%) out of 8 hospitals expected to provide the service.</td>
<td>Not available up to standard in 5 (83.3%) out of 6 hospitals expected to provide the service.</td>
<td>Not available up to standard in 5 (83.3%) out of 6 hospitals expected to provide the service.</td>
</tr>
<tr>
<td>25%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>50%</td>
<td>67%</td>
<td>67%</td>
</tr>
<tr>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Management of mental disorders</th>
<th>Psychological first aid</th>
<th>Inpatient care for mental disorders</th>
<th>Inpatient care for mental disorders by specialists</th>
</tr>
</thead>
<tbody>
<tr>
<td>14%</td>
<td>25%</td>
<td>17%</td>
<td>17%</td>
</tr>
<tr>
<td>Not available up to standard in 6 (75%) out of 8 hospitals expected to provide the service.</td>
<td>25%</td>
<td>Not available up to standard in 5 (83.3%) out of 6 hospitals expected to provide the service.</td>
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<tr>
<td>14%</td>
<td>50%</td>
<td>33%</td>
<td>33%</td>
</tr>
<tr>
<td>100%</td>
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<td>100%</td>
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<td>67%</td>
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Note:
1. Causes of non-functionality, basic amenity types, and barriers impeding service availability, was limited to the top three most frequently reported responses.
2. The second page provides a restricted overview of essential health services, highlighting selected priority services.
3. The analysis of barriers impeding service availability was limited to hospitals where the health service is not available up to standard.

Thi's analysis was produced based on the information reported into HeRAMS up to May 31, 2024 and while the deployment of HeRAMS, including data verification and validation, continue. Hence, the analysis is not final and is produced solely for the purposes of informing operations. The designations employed and the presentation of the material in this report do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city, or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.