



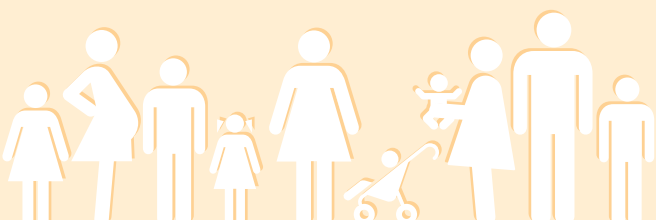
Syrian women plant seeds of hope among their communities.

Aya, a 20 years old visiting health clinic in Zaatari camp in Jordan says, "Of course I was scared, I was scared too much, but there was something inside me telling me that there is something that I am supposed to keep doing for the sake of my children... hope, love and peace. The best feeling is seeing her smile. There is nothing like being a mother, it has pushed me to want to make the world a better place for tomorrow."

Credit: Ruba Hikmat | UNFPA, 2014.

UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive health care and be effectively protected from gender-based violence. UNFPA and partners are scaling up efforts to empower and improve the lives of Syrian women and youths and impacted communities in host countries by advocating for human rights and gender equality to better cope with and recover from the crisis.

UNFPA delivers a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.



HIGHLIGHTS

SYRIAN ARAB REPUBLIC

UNFPA-assists partners reached 21,100 woman of reproductive age in Damascus, Rural Damascus, Homs, Aleppo, Deir-ez-Zor, Ar-Raqqa and Hama, Dar'a, Tartous and Lattakia with reproductive health and GBV services. On the occasion of the International Day of HIV/AIDS, UNFPA organizes a one-day policy dialogue for 80 participants of the Ministry of Information, Ministry of Health, the Syrian Arab Red Crescent, the Syrian Family Planning Association and other local NGOs to advocate for the importance of prevention and treatment of HIV/AIDS during the crisis.

LEBANON

300 adolescent boys attend peer-to-peer activities, 774 women receive basic life skills awareness session and 277 persons benefit from awareness sessions on GBV. UNFPA distributes 200 copies of the manual "Communication with Violence Survivors: Improving Health Care Response" and 500 copies of the family violence law manual targeting lawyers.

JORDAN

UNFPA supports 9,129 women and girls with reproductive health services, provides GBV-related services to 10,126 Syrian refugees and sensitizes 4,669 refugees through home-to-home visits. It conducts 81 youth activities benefiting 877 Syrian youth at the camps and the UNFPA-supported clinic.

IRAQ

UNFPA supports Syrian refugee women with 800 winterization kits in Dohuk, Basirma and Qushtapa camps. UNFPA launches its first of its kind basketball and volleyball tournament for girls. UNFPA-supported youth spaces in Duhok and Erbil starts a new round of Y-Peer trainings.

TURKEY

UNFPA procures 8,000 intra-uterine devices, 900,000 condoms and 62,700 oral contraceptive pills to be distributed according to the plan prepared with the Ministry of Health. UNFPA conducts assessment in Suruç temporary camp where around 8,000 Syrian refugees from Kobane residing in primary school.

EGYPT

UNFPA in collaboration with local NGOs holds two-day GBV awareness-raising activities for 1,000 Syrian refugees in living in Borg El- Arab and Montaza in Alexandria. The programme of the event includes many activities such as lectures on GBV awareness and prevention and positive coping mechanisms, presentation, a rap song against GBV by a Syrian youth group (Khatwa) and recreational activities.

It is 2015, after four years of bloody conflict in Syria with on-going efforts to response to the needs of almost half of the population and put an end to the crisis, which became worse with the expansion of so-called Islamic state in the region, yet the country remained a host to the largest humanitarian crisis in the world.

Millions of people have been displaced by violence in Syria, carrying the psychological marks of the trauma that they lived through in their country and during their escape, hundreds of thousands have been killed and the entire region has been destabilized as conflict and chaos have spread to Iraq, Lebanon and beyond.

Another year has passed in Syria, with no end in sight for a conflict. The suffering of more than four million Syrian women and girls of reproductive age of which half million are pregnant continues. Women become more vulnerable to exploitation as they are socially, psychologically and economically unsecure and many are at risk of being subjected to unsafe pregnancy due to limitation of qualified staff, shortages of tools or equipped facilities and difficulties in access.

Some of the few sustained aid efforts to address the human fallout of the Syrian crisis have at times seemed to fail: in December, the United Nations' World Food Program announced that funding shortfalls would force it to cancel food assistance for some two million refugees of the

Syrian conflict, of which more than 25 per cent are women and girls of reproductive age, however they were able to resume after the fundraising call was launched and citizens and private donors answered, unwilling to let the food assistance fail.

The United Nations called international community to substantially increase its funding of housing, food, health care and basic needs for refugees to minimize their vulnerability and they advocated for those who are stuck inside Syria under extremely hazardous conditions to not be left alone to their fate. During the month of December, the United Nations agencies launched two major strategic plans, requesting over \$8.4 billion to help nearly 18 million people in Syria and throughout the region. The Syria Strategic Response Plan 2015 (SRP) which requires \$2.9 billion in funding to address acute humanitarian needs inside Syria, aims to provide 12.2 million people with protection, life-saving assistance and livelihood support and the Regional Refugee and Resilience Plan (3RP) aim to delivering aid for the region. Requiring \$5.5 billion in funding to support the emergency humanitarian operations and host community support with longer-term programmes aimed at boosting resilience. In order to ensure long-term humanitarian relief and help Syrians in hard to reach areas who are trapped behind borders, The Security Council renewed for twelve months its authorization to use routes across conflict lines as well as specified border crossings, with notification to the Syrian authorities, through the unanimous adoption of resolution 2191 (2014).

HUMANITARIAN SITUATION



Poor infrastructure of the temporary camp settlement in Suruc, Turkey.

Credit: Behire Ozek | UNFPA, 2014.

SYRIAN ARAB REPUBLIC

During the reporting period, the main focus of the conflict remained concentrated in Dar'a, Idlib, Deir-ez-Zor, Rural Damascus and Aleppo governorates. It is assessed that Aleppo city, due to its strategic position and extreme political significance, will be under main focus in coming weeks. In eastern governorates, the battle for the strategic Deir-ez-Zor military base and the fighting in Rif Damascus continued with no major change. Mortar shelling has occurred in different areas of the capital Damascus, coupled with military operations in different governorates, has affected the ability of humanitarian actors including UNFPA to deliver reproductive health and GBV services. As such, the ability of women to have timely access service remains a challenge.

Protection of women residing in shelters and host communities has increasingly become a matter of concern for UNFPA and its implementing partners, due to increased incidences of undocumented early marriages since a large number of internally displaced persons do not have identity cards or supporting documents to document official marriage contract. The increased engagement of youth and adolescents in the continuous fighting continues to be a concern for UNFPA and implementing partners.

LEBANON

Security forces have arrested Syrians on terror charges in the Aley district, fears that militant infighting by the unmarked border between Lebanon and Syria will spill over during the holiday season have gripped the residents of Aarsal and the principle of a swap deal to win the release of captives servicemen has been approved - in principle- by the government.

During the reporting period, UNFPA initiated a mapping exercise with the participation of 26 national and international organizations for assessing their service and training needs.

JORDAN

As of December 31, a total of 620,441 Syrian refugees officially registered in Jordan, where Zaatari camp hosts 82,818 refugees (53.3 per cent female and 49.7 per cent male) and Azraq camp hosts 10,879 refugees of which a round 25 per cent of refugees are women aged 18-29, and 25 per cent are women aged 40-49 ages, while 30 per cent are elderly.

Syrian refugees living in urban areas in Jordan are struggling more than ever to cope with inadequate housing, high debts, rising costs of living and educational challenges for their children, thus hundreds started returning back to Zaatari camp seeking safe and comfortable zone to live.

As of 23 November, the cabinet of Jordan decided that registered Syrian refugees are no longer entitled to access free health services at the Ministry of Health facilities. Syrian refugees are now charged the same fees as non-insured Jordanians, which is around 35-60 per cent of what non-Jordanians pay. The rates are very low and might be affordable for non-vulnerable individuals; however, this is expected to add considerable hardship for many refugees, UNHCR issued temporary policy directing all agencies and refugees to refer clients needs reproductive health services to UNFPA-supported reproductive health clinics, meanwhile UNFPA have huge concerns regarding access to deliveries outside camps for pregnant women.

IRAQ

Today, the total number of Syrian refugees in Iraq stands at around 237,000 as the total new arrival from Kobane reached more than 15,000. The Country is still dealing with internal conflict and with terrorist attacks by the so-called Islamic State. The country is trying to cope with the number of internally displaced person which is said to exceed 1, 8 millions, most of them are in areas where Syrian refugees are currently residing. The Governorate of Duhok -for example- has almost doubled it is population with around 1 million people of refugees and IDPs. This very critical consreing the fact the Governorate resources are overstretched and that it is sharing a huge border line with the Mosul which is under the control of so-called Islamic State. The security constraints as well as other logistical and human resources constraints makes the humanitarian operation very complicated.

Q U I C K F I G U R E S

SYRIAN ARAB REPUBLIC:	
SYRIANS AFFECTED BY THE CRISIS	12.2 MILLION
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	3,050 MILLION
SYRIAN PREGNANT WOMEN	488,000
SYRIAN NEW BORN SUPPORTED BY UNFPA (SINCE THE CRISIS STARTED)	460,000
SYRIAN YOUTH	4 MILLION

LEBANON:	
SYRIANS AFFECTED BY THE CRISIS	1,140,036
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	284,897
SYRIAN PREGNANT WOMEN	20,178
SYRIAN NEW BORN SUPPORTED BY UNFPA (SINCE THE CRISIS STARTED)	N/A
SYRIAN YOUTH	195,042

JORDAN:	
SYRIANS AFFECTED BY THE CRISIS	620,441
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	150,070
SYRIAN PREGNANT WOMEN	10,981
SYRIAN NEW BORN SUPPORTED BY UNFPA (SINCE THE CRISIS STARTED)	2,305
SYRIAN YOUTH	127,541

IRAQ:	
SYRIANS AFFECTED BY THE CRISIS	237,000
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	51,546
SYRIAN PREGNANT WOMEN	4,194
SYRIAN NEW BORN SUPPORTED BY UNFPA (SINCE THE CRISIS STARTED)	N/A
SYRIAN YOUTH	60,557

TURKEY:	
SYRIANS AFFECTED BY THE CRISIS	221,447 (in camp) 742,093 (out of camp) 1,645,000 (AFAD's total)
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	65,000 (in camp) 435,000 (out of camp) 500,000 (total)
SYRIAN PREGNANT WOMEN	10,400 (in camp) 69,600 (out of camp) 80,000 (total)
SYRIAN NEW BORN SUPPORTED BY UNFPA (SINCE THE CRISIS STARTED)	N/A
SYRIAN YOUTH	39,000 (in camp) 261,000 (out of camp) 300,000 (total)

EGYPT:	
SYRIANS AFFECTED BY THE CRISIS	140,649
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	34,982
SYRIAN PREGNANT WOMEN	2,592
SYRIAN NEW BORN SUPPORTED BY UNFPA (SINCE THE CRISIS STARTED)	N/A
SYRIAN YOUTH	29,078

SOURCES:
Turkey's Disaster and Emergency Management Authority (AFAD), UNHCR, OCHA, and UNFPA - December 2014

TURKEY

The armed conflict in Syria has continued to be intense near the Syrian border with Turkey. A religious sectarian internal armed conflict escalated in Iraq and Northern Syria causing further serious instability and displacement of populations in the region. Thousands of Ezidis have been entering from southeastern borders of Turkey through legal gates and also illegally other than gates.

The estimated total number of Syrians in Turkey as 1,645,000 Syrian refugees, according to AFAD, while the total number of Syrian refugees registered by UNHCR in 22 camps located in 10 provinces is 221,447 refugees.

EGYPT

The numbers of Syrian people sought refuge in Egypt has reached this month 140,649. Most refugees are scattered in urban settings in rented households. Syrian refugees have access to public services including health, and education.

HUMANITARIAN RESPONSE

1-31 December 2014

SEXUAL AND REPRODUCTIVE HEALTH, INCLUDING FAMILY PLANNING



Group photo taken at the closing of the family planning counselling training in Tyre, Lebanon.

Credit: Order of Midwives, 2014.

SYRIAN ARAB REPUBLIC

REPRODUCTIVE HEALTH SERVICES: Around 18,000 women received reproductive health services and information: emergency obstetric care for 8,000 women, safe delivery for 2,300 women through reproductive health vouchers, family planning for 3,300 women, and 4,200 received other reproductive health services.

REPRODUCTIVE HEALTH SUPPLIES: UNFPA delivered reproductive health tools and supplies to the rural areas of Aleppo and Ministry of Higher Education (MoHE), maternal hospital in Aleppo which will enable around 15,800 of the affected people of getting better quality reproductive health services including emergency obstetrical care and safe delivery. Another 240 reproductive health kits to the Ministry of Health (MOH), MoHE, Syrian Arab Red Crescent (SARC) and Syria Family Planning Association (SFPA) cover the services of 475,425 women nationwide.

REPRODUCTIVE HEALTH AWARENESS ACTIVITIES: UNFPA assisted the 28 mobile teams of Syria Arab Red Crescent and Syria Family Planning Association reaching around 2,800 women residing in Damascus, Rural Damascus, Homs, Aleppo, Tartous, and Hama with awareness raising sessions on reproductive health including family planning.

SUPPORTING HUMAN RESOURCES: UNFPA is continuing to support the 28 mobile clinics, 27 static clinics, 13 medical points and mobile teams of the Syrian Family Planning Association and the Syrian Arab Red Crescents through the deployment of 207 obstetricians, gynaecologists, midwives, nurses and social workers in 12 governorates.

LEBANON

REPRODUCTIVE HEALTH SERVICES: UNFPA started in October 2014, a joint health education project, with the International Rescue Committee (IRC), Akkar Network for Development (AND) and Lebanon Family Planning Association for Development and Family Empowerment (LFPAD) in the region of Akkar, North Lebanon. During the month of December a total of 70 awareness sessions on hygiene were conducted. The sessions were facilitated by trained women leaders and reached around 1,200 refugee and Lebanese women.

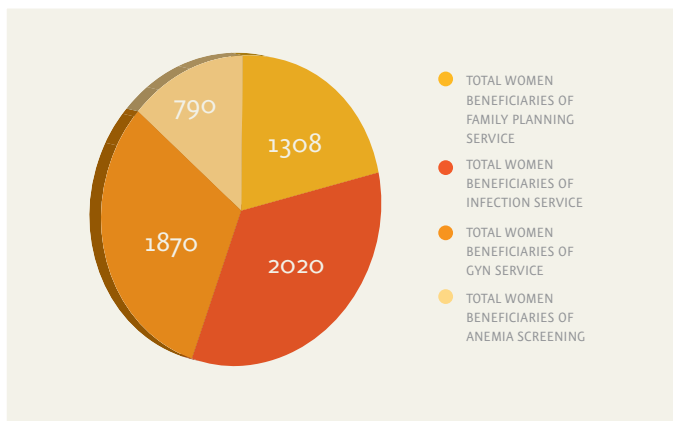
REPRODUCTIVE HEALTH TRAINING: UNFPA in partnership with its implementing partners trained 20 Syrian and Lebanese women as women leaders. The trainees have already started delivering awareness sessions on hygiene and will continue in the coming months focusing on various subjects, including on early marriage.

UNFPA partnered with the Order of Midwives to developing the capacities of 72 midwives on family planning counseling in three regional trainings organized in Tyre, Beirut and Mount Lebanon.

REPRODUCTIVE HEALTH SUPPLIES: A total of 2,400 sanitary pads and 1,000 pamphlets on different reproductive health topics were distributed during the awareness sessions implemented by LFPAD.

JORDAN

REPRODUCTIVE HEALTH SERVICES: UNFPA has delivered a total of 9,129 Individual reproductive health and family planning services inside the camps and in host communities. Of which 1,636 Syrian women received services in host communities and 7,050 in the camps and out of the total women 2,700 received antenatal care services.



The graph above presents the number of women benefited from UNFPA-supported services in reproductive health clinics in the camp.
Source : UNFPA, December 2014

REPRODUCTIVE HEALTH SUPPLIES: UNFPA thought its implementing partners distributed 35 dignity kits in the four women's centers.

REPRODUCTIVE HEALTH AWARENESS: A total number 3,308 Syrian refugees benifitted from the reproductive health awareness sessions, of which 1,079 women living in host communities and 2,000 women in the camps.

REPRODUCTIVE HEALTH TRAINING COURSE: A total of 14 health care providers participated in the reproductive health protocol in Zaatari and Azraq camps as well as Zarqa and Amman.

IRAQ

REPRODUCTIVE HEALTH OUTREACH ACTIVITIES: UNFPA is continuing it is outreach activities with the teams of volunteers in the seven camps, in total more than 10 teams each consists of well trained social workers educating women on reproductive health issues, including pregnancy and safe delivery.

REPRODUCTIVE HEALTH EDUCATIONAL MATERIALS: 10,000 new copies of the women health booklet were printed to be distributed to women who did not receive them in the past including women from the Kobane crisis

REPRODUCTIVE HEALTH TRAINING: Training of trainers for doctors on family planning counselling was commenced with 20 doctors befitting from session organized by UNFPA.

UNFPA procured a new patch of family planning methods, including pills, condoms, IUDs and injectable to be used amongst the Syrian refugees, internally displaced persons and impacted people in host community

REPRODUCTIVE HEALTH SERVICES: In December, a total of 99 healthy and safe deliveries were accredited by the health authority to UNFPA support to hospital and maternities in term of supporting personnel, equipment and Reproductive health kits.

UNFPA continued to support 50 midwives working maternities, in addition to 10 doctors and 18 midwives in camps to maintain the quantum of care for women of reproductive age, namely pregnant women.

EGYPT

REPRODUCTIVE HEALTH SUPPLIES: UNFPA has supported the Ministry of Health procurement of five ultrasound devices that are going to serve five primary healthcare units in Damietta and Giza. In addition, UNFPA supported reproductive health equipment purchase for obstetric centre in New Damietta which hosts 10,484 Syrian refugees, of which 3,149 are women and girls in reproductive age.

UNFPA conducted a 3-day training for 30 primary care and family medicine physicians on obstetric ultra sound in Alexandria and Damietta. The physicians involved serve in primary health care units involved in the mapping of areas with highest Syrian populations. The trainers were faculty members of gynaecologic and obstetric imaging unit at Faculty of Medicine, Alexandria University.

TURKEY

UNFPA visited Suruç temporary camp where around 8,000 Syrian refugees from Kobane residing in primary school premises and in partnership with the UNFPA with the Ministry of Family and Social Policies' (MoFSP) conducted an assessment based on observations and meetings with local key officials.

UNFPA procured 8,000 intra-uterine devices, 900,000 condoms, 62,700 oral contraceptive pills (Microgynon blisters to be distributed according to the plan prepared with the Ministry of Health.

Through the grant agreements signed with International Middle East Peace Research Center (IMPR) and Harran University in Sanliurfa, and Syrian Social Gathering (SSG) in Mersin, preparations are ongoing for the establishment of women counselling units. The SSG collected reproductive health data of about 200 patients as per the UNFPA framework of the information system on services. UNFPA is reviewing the collected data to assess the utility of the framework tools.



Syrian children in front of the temporary camp at the previously been the primary boarding school in Suruc, Turkey.
Credit: Behire Ozek | UNFPA, 2014.

GENDER EQUALITY AND WOMEN'S EMPOWERMENT



Syrian refugee women participating in crochet course in Nergiz women's centre in Kawaregosh camp in Erbil, Iraq.

UNFPA through its partners aim to invest in and empower the Syrian refugee women to meet with their expectations and interests. The creational activities are planned to support women's integration into the new society and go help them realise their dream and power in building a healthy family and society.

Credit: Veronica Njikko | UNFPA, 2014.

SYRIAN ARAB REPUBLIC

GENDER-BASED VIOLENCE SERVICES: During the reporting period, UNFPA supported the mobile teams providing psychosocial support to around 3,100 women residing in the affected areas of Damascus, Rural Damascus, Idleb, Homs and Tartous.

In Damascus and Rural Damascus, GBV screening services were provided to 480 women, of whom 65 women turned to be GBV survivors who consequently received medical examination, community services and legal advices by UNFPA assisted clinic.

A total of 38,594 residing in in Damascus, Rural Damascus, Aleppo, Idleb, Dar'a, and Homs received dignity kits as part of joint United Nations convoy targeting these areas.

During the reporting period, UNFPA-assisted clinics and mobile teams in Damascus, Rural Damascus, Homs, Lattakia, Tartous, Idleb and Dar'a, provided 8,100 GBV counseling and services including 2,300 psychosocial support services for the violence affected people.

A total of 25 social workers received training on psychosocial support and psychological first aid interventions to serve around 1,200 people residing in Damascus, Rural Damascus Dar'a and Homs.

UNFPA supported nine centers, that provide GBV screening and services for women in Damascus and Rural Damascus, through the deployment of gynecologists, midwives, psychosocial support counselors and nurses.

LEBANON

GENDER-BASED VIOLENCE SERVICES: UNFPA-supported KAFA's listening and counseling centre (LCC) in Beirut provided social counseling to 31 new cases and other 67 cases were followed up by social workers. A total of 29 women benefited from legal consultations, 99 psychotherapy sessions were conducted benefitting 38 women and supported a court representation.

Supported by UNFPA, Intersos has provided psychological counseling benefitting 29 women and organized emotional support groups reaching 124 women. While, SHEILD, UNFPA's implementing partner provided psychological support services benefitting 87 Syrian and Lebanese women and girls in the south part of Lebanon.

GENDER-BASED VIOLENCE OUTREACH ACTIVITIES: During the reporting period, 300 adolescent boys attended peer to peer activities, 774 women received basic life skills awareness session and 277 persons benefitted from awareness sessions on GBV.

As part of the 16 days of Activism Against Gender Violence, UNFPA in partnership with Heartland Alliance conducted a three-day theater workshop for 16 Lebanese and Syrian girls. The workshop was concluded through the presentation of a play at the Halba women friendly centre. UNFPA in partnership with KAFA continued its online campaign "Zalfa guide to the newly adopted law". The campaign consisted of Facebook posts and interactions, online banners, and media features in several Lebanese newspapers. The campaign reached an estimate of 750,000 individual through ace book and 200,000 others through the online banners.

UNFPA in partnership with SHEILD organized a problem solving and awareness sessions targeting 44 women, life skills sessions targeting 33 women, peer to peer sessions reaching 1,233 women and girls and communication and vocational training with the participation of 114 women and girls.

GENDER-BASED VIOLENCE TRAINING: During December, UNFPA with its partner organized a training workshop on the communication manual "Communication with Violence Survivors: Improving Health Care Response" targeting 14 doctors, midwives, and nurses from various primary health care centres and a round table meeting for 17 participants, including doctors who participated earlier in a former training of trainers (TOT) on the same manual. Moreover, a workshop on the content of the law to protect women and other family members from family violence was organized and targeted representatives from 12 civil societies and local NGOs.

UNFPA trained 25 specialized and non-specialized GBV actors on several GBV topics, 30 women aiming at developing their capacities to be part of the women peer support group network.

GENDER-BASED VIOLENCE SUPPLIES: with the support of UNFPA, KAFA developed 200 copies of the manual "Communication with Violence Survivors: Improving Health Care Response" and developed 500 copies of the family violence law manual targeting lawyers. Moreover, supported Intersos to distribute leaflets on sexual and reproductive health, domestic violence and early marriage to more than 600 people.

JORDAN

GENDER-BASED VIOLENCE SERVICES: a total of 10,126 women, girls, men and boys benefitted from the UNFPA supported GBV services including safe, confidential, and specialized multispectral services, case management services, medical care, vocational trainings.

UNFPA through its implementing partner conducted self-defense activity in Azraq camp targeting more than more than 30 women and adolescent girls, and conducted a "My Space Free Of Violence" workshop, covering painting skills, graffiti artist, as well as focus group discussions.

GENDER-BASED VIOLENCE OUTREACH ACTIVITIES: A total of 4,669 women, girls, men and boys were sensitized by GBV awareness sessions on violence against women and the power imbalances between males and females

As part of the 16 days of Activism Against Gender Violence, UNFPA in partnership with Heartland Alliance conducted a three-day theater workshop for 16 Lebanese and Syrian girls.

IRAQ

GENDER-BASED VIOLENCE: During the reporting period, 2,840 women and girls benefited from UNFPA women centers' services. In Erbil alone a total of four new GBV cases were identified and managed, 70 parents/families were reached through outreach sessions and 195 women and girls benefited from some 18 socio-recreational activities such as sewing, hairdressing, make-up and language basic courses (English and Kurdish).

The three UNFPA supported women spaces in the host community are heavily involved in production of women winter cloths as part of the joint UNFPA, UN-women program aiming at women empowerment and protection from GBV.

GENDER-BASED VIOLENCE AWARENESS AND OUTREACH ACTIVITIES: 1,446 women and girls visited the women spaces, a total of 18 formal lectures conducted on reproductive health and GBV concerns, especially early and forced marriage.

GENDER-BASED VIOLENCE SUPPLIES: More than 800 dignity were distributed to most vulnerable women and girls in reproductive age in the camps and host communities as part of the outreach activities.

UNFPA supported the overall winterization campaign for Syrian refugees with 400 winterization kits to Basirma and Qushtupa to meet the needs of the most vulnerable group of women including pregnant women in both camps. Equal amounts of kits were distributed in Domiz camp in Duhok.

TURKEY

AFAD – Prime Ministry Disaster and Emergency Management Presidency local managers has established two new tents for women's social activities. The UNFPA with the Ministry of Family and Social Policies' (MoFSP) visited Nizip-1 camp and developed an annual plan to be implemented in the women's tents. The plan includes education sessions on reproductive health supported by information-education and communication materials.

EGYPT

UNFPA held two-day GBV awareness activities for Syrian refugees in Alexandria in collaboration with local NGOs. Each day hosted over 500 Syrian refugees living in Borg Elarab and Montaza, two districts that host a high concentration of Syrian population (17,828). The program included lecture on GBV awareness and prevention, positive coping mechanisms, importance of volunteerism, and Syrian cultural performances. In addition, material related to GBV, and sexual harassment and reproductive health was distributed.

UNFPA supported training of 40 healthcare providers working in primary health care units in Sadat city on GBV response and services. The training included sensitization of the trainees to specific needs and vulnerabilities of Syrian population in Egypt and familiarization with the national medical protocol/guidelines for management of GBV that was launched this November by the Ministry of Health and National council for Women through support of UNFPA.



Syrian women and girls attending animation skills at the UNFPA-supported women's center as part of the 16 Days of Activism Against GBV in Zaatari camp, Jordan. Credit: UNFPA, 2014.



Syrian women and girls attending animation skills at the UNFPA-supported women's center as part of the 16 Days of Activism Against GBV in Zaatari camp, Jordan. Credit: UNFPA, 2014.

SUPPORTING ADOLESCENTS AND YOUTH



Syrian refugee youth participating in the first annual humanitarian football cup organised by UNFPA in Jordan.

Credit: UNFPA, 2014.

JORDAN

UNFPA provided information and services for youth such as applying for country scholarships and document needed. Discussed issue such as transportation and next year planning.

UNFPA's implementing partner conducted 81 youth activities benefiting 877 Syrian youth (570 female and 307 male) at the camps and the UNFPA-supported clinic in Deir Alla on reproductive health and GBV, including life skills and recreational activities.

IRAQ

UNFPA-SUPPORTED YOUTH SPACES: Iraq youth interventions in Duhok has reached it is epic with the new expansion of the youth space in Duhok, the space now stretches over more than 1,400 sqm, with five halls for the different activities including music, painting, computer, Y-Peer and most recently a multiuse hall (8x8 m) that will be used for theater training and for overall fitness.

YOUTH ACTIVITIES: Sports for women and girls is a reality now in the camps in Iraq.

The youth space in Domiz camp has launched it is first of its kind basketball and volleyball tournament for girls, this comes after the great success of the soccer tournament that was a big success and was sponsored by the government authorities in the camps.

Soccer tournaments are ongoing in Domiz camp with 12 different teams of young men competing against each other, each team member is getting life skills coaching by each coach, the coach is formally trained on life-skills by UNFPA-supported volunteers.

TRAINING FOR YOUTH: Y-Peer training commenced in the youth spaces in the camps of Basirma, Kawergosk and Darashakran with more than 60 youth being trained

EGYPT

UNFPA conducted a four-day training on volunteerism for 20 Syrian and Egyptian youth in 6th October. The training was conducted by Y-Peer volunteers and included sessions on value and definition of volunteerism, NGO structure, fund raising, communication skills and presentation skills. Issues related to gender, stigma and discrimination were discussed briefly during the sessions.

UNFPA SUPPORTED FACILITIES



Number of women's spaces

SYRIAN ARABIC REPUBLIC

3

JORDAN

17

(10 in camps)

LEBANON

5

IRAQ

11

(3 in host communities)



Number of reproductive health clinics or mobile teams

SYRIAN ARABIC REPUBLIC

68

JORDAN

17

(10 in camps)

IRAQ

7



Number of youth centres

JORDAN

7

(10 in camps)

LEBANON

5

IRAQ

5



Number of health facilities

SYRIAN ARABIC REPUBLIC

300

JORDAN

All Ministry of Health Facilities
/all NGOs providing RH services

IRAQ

26

COORDINATION & CAPACITY BUILDING

SYRIAN ARAB REPUBLIC

UNFPA participated in the United Nations sector group meetings on health, protection, and logistics, as well as the United Nations Humanitarian Country Team and United Nations Security Cell meetings.

UNFPA participated in Launch of the 2015 SRP held in Germany

UNFPA met with the Ministry of Information professionals and discussed the possibility on increasing partnership especially in advocating for reproductive health and GBV priorities during the crisis as well as the visibility of UNFPA humanitarian response.

UNFPA participated in the launch of International Planned Parenthood Federation (IPPF) strategy that was organized by SFPA in cooperation with several implementing partners.

LEBANON

UNFPA participated in the official launching of the 2015-2016 Lebanon crisis response plan – including sectors' plans - which spell out the Government priorities for addressing the impact of the Syria crisis. UNFPA in Lebanon along - with other United Nations organizations - specified its priorities namely under health, protection and social cohesion sector plans.

UNFPA co-chaired the monthly sexual and gender-based violence task force. During the meeting the Inter agency standard operating procedures for GBV prevention and response in Lebanon were endorsed and UNFPA together with UNHCR and UNICEF have provided input to be enclosed in United Nations Secretary General annual report on sexual violence in conflict situations.

UNFPA participated in the reproductive health sub-working group meeting with participation of 21 representatives from 15 local and international agencies. The participants discussed the awareness programs on reproductive health and the results of the rapid mapping exercise carried out by UNFPA. The participants were updated on the reproductive health commodities procured by UNFPA for the Ministry of Public Health and which will be distributed as of January 2015 to cover all health centers in Lebanon offering services to Lebanese and Syrian refugees. Moreover, the participants were updated on the Clinical Management of Rape (CMR) trainings and revised the reproductive health service delivery guidelines.

JORDAN

UNFPA co-chaired the weekly Youth Task Force (YTF) meetings in Zaatari camp, where members discussed desk-review study on youth and developed concept note of three-phase analysis of Syrian youth in Jordan, covering situation at start of crisis, current programming and future plans/trends (2015).

IRAQ

UNFPA is chairing a taskforce for GBV roll-out in Iraq. Initial discussions and consultations have started with stakeholders including government entities.

UNFPA co-chaired the SGBV working group in Erbil, Dohuk and Sulaymaniyah. In Sulaymaniyah UNFPA has been a lead agency in compiling service mapping for GBV service providers, which will help to

analyze gaps and type of services. While in Erbil, UNFPA has been leading the process of working on behalf of SGBV WG to compile and contribute the GBV component to the overall protection working group strategy.

TURKEY

UNFPA participated in a coordination meeting in Gaziantep to develop the ECHO - Humanitarian Implementation Plan for 2015.

UNFPA participated in the development of the Central Emergency Response Fund proposal together with the United Nations Syria Task Force agencies and under the coordination of UNHCR for the emergency response to the needs of refugees in Suruç.

UNFPA participated in a briefing meeting organized by the Directorate General of Migration Management of the Ministry of Interior in Ankara.

UNFPA participated in bimonthly humanitarian coordination meetings (including health, protection and logistics sectors) in Gaziantep and Hatay. The Fund also participated in the United Nations Task Force weekly meetings in Ankara and conducted a field visit to Nizip Camp.

UNFPA participated in the monthly GBV working group meeting, where participants reviewed and discussed agency collaboration activities on the GBV humanitarian response.

EGYPT

UNFPA contributed to the "Assessment of the health status and health care needs of displaced Syrians in Egypt" which is carried under coordination of WHO. The assessment will include 599 registered Syrian refugee households in six governorates with highest concentration of Syrian populations. The objectives include assessment of socio-economic characteristics, health status of adults and children, measure the prevalence of selected diseases and health problems among the study sample, including those related to reproductive health among women, and psychological/mental health problems among children; and to explore the life style of Syrian displaced families.

UNFPA co-chaired the SGBV sub-working group meeting, where members shared statistics concerning cases of early marriage among the Syrian refugee population, provided information regarding planned activities during the 16 Days of Activism.

UNFPA attended GBV standard operation core group where they discussed with UNHCR and Care international the GBV mapping.

UNFPA participated in Child Protection subgroup where membered discussed coordination efforts for early marriage.

CHALLENGES

SYRIAN ARAB REPUBLIC

The lack of a comprehensive assessment of the status of the maternal health facilities' infrastructure and equipment is a challenge hindering the effectiveness and efficiency of the humanitarian response.

The situation of the affected people deteriorates due to strict entry procedures imposed by the Lebanese authorities on the Syrian people fleeing to Lebanon.

The limited number of implementing partners hinders the ability of UNFPA to reach the violence-affected people especially in the opposition controlled and besieged areas.

Monitoring the outcome of humanitarian response for internally displaced persons residing in urban setting continue to be a challenges due to limited access and capacity of implementing partners to provide timely and quality reports on needs and delivery of response.

LEBANON

Shortages of fund poses a great challenge in terms of sustaining and expanding key interventions currently implemented by UNFPA's implementing partners. Discontinuation of several projects and interventions is expected to take place by end December 2014 and therefore could have serious implications on delivering against priorities set in the 2015-2016 Lebanon crisis response plan.

Difficulties to organize various project related coordination meetings since concerned members seem to be involved with other initiatives and priorities and thus unable to meet on a unified time. This matter has resulted in

Transportation fees for social workers and facilitators, especially for the peer-to-peer sessions, remain a problem that requires more attention and funding.

The new procedures issued by the Government (namely the customs) on custom clearance have not been clearly disseminated to all humanitarian actors. This matter has led to serious difficulties and delays in clearing large RH commodities purchased by UNFPA such as reproductive health drugs and contraceptives as well as dignity kits.

JORDAN

There are challenges in deploying qualified gynaecologists and obstetricians for new reproductive health centres in the camps since most of local female obstetricians have their own private clinics and do not accept full time outside employment; the majority of refugees have expressed a strong preference for female obstetricians and health workers.

High turnover between health care professionals had led to interruption of some services and there is continuous demand for capacity building of new staff.

Increasing salaries scales among health care professionals due to high demands and competitiveness between organizations are stretching already scarce resources.

Movement of Syrian refugees and the inability to reach cases by phone creates a challenge to arrange visit and implement protection programme and assure delivering continuity of the required care.

Challenge in the referral system for obstetric emergencies from the camp to hospital outside the camp; most of the cases were initially refused by the referral hospital outside the camp.

IRAQ

There is inadequate staffing in GBV programming, both within UNFPA and its implementing partners, to be able to cope and manage the complex needs in Iraq since the Mosul and Sinjar crisis, which has presented new and complex issues.

The new refugees arriving from Kobane in the Kurdistan region have increased the burden and brought in new dimensions to the existing programmes already established in the camps, initially for Syrian refugees.

The implementation of a referral mechanism in host communities where many refugees are located (60 per cent) remains a challenge and hampers effective access to services by refugees, as most of the focus by humanitarian partners has been in the camps.

There is an information gap on the availability of GBV and reproductive health services among refugees residing in host communities.

TURKEY

Host community and humanitarian services are negatively affected by collateral damage at the border region.

The discomfort of host communities is increasing for socio-economic and other reasons. There have been protests and violence against Syrians in Gaziantep, Sanliurfa and in some other places.

Significant changes have been made in the structure and leadership of the Turkish Ministry of Family and Social Policies and Ministry of Health. Ministry of Health structural changes at central and provincial levels have loosened the integrated primary health care, particularly affecting reproductive health.

Escalating regional conflict with additional fighting in Iraq and northern Syria (Kobani) has caused dramatic displacement of populations with higher needs for the humanitarian aid.

EGYPT

Refugees are scattered over large urban areas, which poses a challenge for most aid agencies to provide support for all refugees residing in Egypt. In addition, since the population is still regularly moving, allocation and provision of services are still difficult.

Registration of births of Syrian newborns in absence of the father or marriage certificate remains an issue that requires advocacy, although currently several legal and human rights organizations provide aid for registration for those cases.

Although the Egyptian Government has allowed access to medical and educational public services for Syrians, the issue of improving accessibility and quality of service provision remains a challenge and necessitates continual support and capacity building of those sectors in areas with a high concentration of Syrians.

There have been 1,300 arrests of Syrian nationals trying to depart Egypt through irregular migration by sea, including 500 children and 300 women.

The living conditions of the refugees are alarming, often living in crowded quarters with multiple family households. Lack of privacy contributes to tensions and increased domestic violence.

FUNDING

A million dollar received from the Canadian government and another million pounds from UK aid for cross-border operations.

UNFPA participated in the ECHO meeting for launching the 2015 Humanitarian Implementation Plan (HIP) in response to the Syria crisis. The meeting outlined the strategy and priorities of ECHO funding for 2015 in Lebanon.

UNFPA Egypt signed a grant agreement with the Arab organization for Human Rights which sponsors Syrian Women Association in Egypt (Rabetat Souriyat). The grant covers a variety of activities concerning youth and women, including two adolescent safe spaces, reproductive health awareness campaigns and volunteerism training.

DONORS & PARTNERS

UNFPA IS GRATEFUL FOR THE SUPPORT OF THE FOLLOWING DONORS IN THE SYRIA CRISIS:

Australia, Canada, European Commission, Germany, Italy, Kuwait, Netherlands, Norway, OCHA/CERF, Qatar, United States, United Kingdom, UNDP.

IMPLEMENTING PARTNERS

UNFPA IMPLEMENTING PARTNERS IN SYRIAN ARAB REPUBLIC: Ministry of Social Affairs and Labor (MOSA), Ministry of Health (MoH), Ministry of Higher Education (MoHE), Syrian Family Planning Association (SFPA), Syrian Arab Red Crescent (SARC) and International Medical Corps (IMC).

UNFPA IMPLEMENTING PARTNERS IN LEBANON: Lebanese Family Planning Association, Ministry of Public Health, Ministry of Social Affairs, Palestinian Red Crescent Society, Humedica, Makhzoumi Foundation, Amel Association, International Medical Corps and Caritas Lebanon, KAFA ("Enough Violence and Exploitation"), Akkarouna, INTERSOS, SHEILD, LOST, Heartland Alliance. Makassed Primary Health Care Centers, Mazloun Hospital and International Organization for Migration (IOM).

UNFPA IMPLEMENTING PARTNERS IN JORDAN: Institute for Family Health (IFH), International Medical Corps (IMC), International Rescue Committee (IRC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Ministry of Health (MOH), Un Ponte Per (UPP), Jordanian Women's Union (JWU), Youth Peer Education Network (YPE), NCFA (National Council for Family Affairs).

UNFPA IMPLEMENTING PARTNERS IN IRAQ: Ministry of Culture, Sport and Youth (MCSP), Ministry of Labor & Social Affairs (MLSA) and local NGOs.

UNFPA IMPLEMENTING PARTNERS IN EGYPT: Ministry of Health (MOH), Resala, Tadamon and FARD Foundation.

UNFPA IMPLEMENTING PARTNERS IN TURKEY: The Disaster and Emergency Management Presidency (AFAD) of the Prime Ministry of Turkey, Ministry of Foreign Affairs (MoFA), and Ministry of Health (MoH), Ministry of Family and Social Policies (MoFSP), Turkish Red Crescent Society (TRCS), universities including Harran in Sanliurfa, NGOs including Woman Solidarity Foundation, the Turkish Medical Students' International Committee, and International Medical Corps (IMC).



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RELEVANT RESOURCES

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