



IRAQ: A Syrian woman gave birth to a baby girl after she arrived in the Kurdistan Region. She is now living with her two children and family in Kwargosek camp in Erbil, benefiting from UNFPA reproductive health services provided in the primary health care centre close to the camp. Credit: UNFPA, 2013

HIGHLIGHTS

SYRIAN ARAB REPUBLIC: UNFPA delivers 168,000 intravenous fluids to the hospitals serving vulnerable internal displaced populations and provides reproductive health services, including emergency obstetric care, to 8,000 women. UNFPA expands the reproductive health voucher initiative to cover five more private hospitals in Homs, Tartus, Sweida and Rural Damascus.

LEBANON: UNFPA trains 44 social workers from the Ministry of Social Affairs on the reproductive health Minimum Initial Service Package (MISP). UNFPA implements a series of interventions targeting youth affected by the Syrian crisis for healthier and more active youth.

JORDAN: UNFPA builds the capacity of more than 400 women on contraception methods and family planning in Zaatari camp and in different governorates in Jordan.

IRAQ: UNFPA establishes a reproductive health clinic and a women's safe space in the new camp of Kwargosek and delivers eight different types of UNFPA's RH kits to the Ministry of Health of the Kurdistan Regional Government of Iraq.

TURKEY: UNFPA organizes 12 training courses on gender-based violence with special focus on trauma-informed approaches and secondary trauma prevention.

HUMANITARIAN SITUATION

More than two million people, mostly women and children, have left the Syrian Arab Republic over the past two and a half years, seeking refuge in neighboring countries. The majority have sought safety, protection, medical care and other urgently needed aid, and are suffering economically and emotionally, but count themselves lucky to be free and safe. Millions more inside Syria are in desperate need of help but aid has slowed due to the high level of violence.

UNFPA and partners are scaling up effort to achieve universal access to sexual and reproductive health (including family planning), promoting reproductive rights, reducing maternal mortality and improving the lives of youths and women by advocating for human rights and gender equality and by promoting the understanding of population dynamics.

SYRIAN ARAB REPUBLIC

Protection of civilians, particularly children and women, in areas of armed conflict is a grave concern to UNFPA and its partners. Provision of reproductive health services, including post-natal care, access to family planning services and reproductive health surgical interventions and emergency delivery, has been challenging given the unstable security situation, limited access to health facilities, reduced capacity of public health care facilities and the high fees for private facilities.

Armed conflict continues in different areas of rural Damascus, Homs and Deir Ezzor resulting in an increase in the number of internal displaced persons (IDPs) in need for protection and social services, including health care.

JORDAN

According to recent estimates, Jordan has opened its borders to more than 523,607 Syrian refugees since the conflict began in 2011. During the reporting period, the number of Syrian refugees remained stable as a result of the temporary blockage of Syrian refugees awaiting registration. Currently, the number of registered Syr-

ian refugees in Zaatari camp is 120,783, and the number of Syrian refugees dispersed in different places in Jordan is 399,345. Around 75 per cent of the total registered Syrian refugees are in host communities, mainly in Amman (118,150) and Irbid (105,288). The majority of registered Syrian refugees originate from Dara'a (56%), followed by Homs (15%), Rural Damascus (9%), and Damascus (7%). (UNHCR, September 2013)

LEBANON

As of 30 September, the number of Syrian refugees currently receiving assistance through UNHCR and partners is 755,000, of which over 650,000 are registered and 105,000 are awaiting registration. The current distribution of the registered population is as follows: North Lebanon: 211,000 (33%); Bekaa: 218,000 (34%); Beirut and Mount Lebanon: 134,000 (18%), South Lebanon: 86,000 (13%).

The situation at the main Lebanese-Syrian border crossing, Masnaa, East Lebanon, remained relatively calm during the reporting period. However, in view of possible military strikes against Syria, there was increased tension in Lebanon and extra security measures were

introduced – including for humanitarian actors and implementing partners - leading several activities being put on hold and suspending missions to several regions in Lebanon.

TURKEY

A total of 200,042 Syrians refugees are currently hosted through a temporary admission centre to the 15 tented sites in Hatay, Sanliurfa, Gaziantep, Kahramanmaras, Osmaniye, Mardin, Adana and Adiyaman provinces, and at five container sites in Malatya, Sanliurfa, Gaziantep and two in Kilis. During the reporting period, 456 refugees were admitted to hospitals along with 195 companions.

IRAQ

Since the start of the conflict in Syria in 2011 more than 220,000 refugees, have crossed into Kurdistan Region in northern Iraq. Tens of thousands arrived after the authorities opened the border to families fleeing violence and conflict, some of the whom are still waiting registration. Around 50 per cent of the refugees have no means of support and are hosted in refugee camps.

Given the continuously worsening situation in Syria, and according to the latest UNHCR data, Iraq is expected to receive 1,000 additional Syrian refugees on a daily basis till the end of 2013. The local authorities are building more refugee camps to provide for the refugees, as well as to guarantee their security in Iraq. To date, 12 permanent and transit camps have been set up and three are under construction.

EGYPT

The total number of registered Syrian refugees in Egypt 105,000, while some estimates suggest that the total number is closer to 300,000.

HUMANITARIAN RESPONSE (10 - 30 SEPTEMBER 2013)

SEXUAL AND REPRODUCTIVE HEALTH, INCLUDING FAMILY PLANNING

SYRIAN ARAB REPUBLIC:

Reproductive health services: Around 8,000 women received reproductive health services, including emergency obstetric care, through the Syrian Arab Red Crescent's mobile teams and the facilities of the Ministries of Health and of Higher Education, all supported by UNFPA. UNFPA has expanded its service delivery through the distribution of reproductive health vouchers to affected people in high risk areas, benefiting 1,000 women who received emergency obstetric care, including normal and Caesarean-section delivery services, free of charge.

UNFPA in collaboration with the Ministry of Health identified five additional private hospitals in Homs, Tartus, Sweida and Rural Damascus to be included in the reproductive health voucher initiative. Fifteen health workers participated in a consultation session organized by UNFPA to launch the voucher initiative programme in the selected hospitals.

Reproductive health supplies: UNFPA in collaboration with International Medical Corps provided reproductive health supplies and medicines to five health centres in Damascus and Rural Damascus. The supplies are sufficient to enable around 8,000 women to be treated for sexually transmitted diseases as well as providing support for clinical management of rape.

AT A GLANCE:

In Syria Arab Republic

6.8 MILLION PEOPLE AFFECTED
1.7 MILLION WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
68,000 PREGNANT WOMEN

In Jordan

523,000 REFUGEES
130,75 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
5,230 PREGNANT WOMEN

In Turkey

200,042 REFUGEES
50,010 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
6,000 PREGNANT WOMEN

In Lebanon

755,000 REFUGEES
188,775 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
7,550 PREGNANT WOMEN

In Iraq

AROUND 220,000 REFUGEES
55,000 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
2,200 PREGNANT WOMEN

In Egypt

105,000 REFUGEES
26,250 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
1,050 PREGNANT WOMEN

SOURCE:
UNHCR AND UNFPA: SEP 2013

UNFPA provided live-saving reproductive health commodities to the Syrian Family Planning Association clinics in Damascus, Rural Damascus, Aleppo, Homs, Idlib and Sweida, sufficient to enable around 100,000 women to receive high-quality reproductive health services, including emergency obstetric care.

Around 2,000 pregnant women from Mayadeen and Bokomal districts in Deir Ezzor will benefit from UNFPA-supplied lifesaving reproductive health supplies and safe delivery kits that will be distributed through the Syrian Arab Red Crescent's mobile teams.

UNFPA delivered **168,000 intravenous fluids to the hospitals of the Ministries of Health and of Higher Education and other health facilities serving vulnerable internal displaced populations.**

Reproductive health capacity building: To strengthen the timely delivery of basic emergency obstetric care at the community level, 25 midwives in Deir Ezzor, Homs, Hama, and Sweida completed training on the provision of high-quality antenatal and intra-natal care, identification of high risk pregnancies and timely referral to hospitals. This capacity-building event is part of the agreement between the Ministry of Health and UNFPA to improve the capacity of midwives at the community level.

JORDAN

Reproductive health awareness: During the reporting period, UNFPA built the capacity of **more than 400 women on contraception methods, infections, and family planning.** UNFPA in collaboration with the Institute for Family Health (IFH) organized a training session in the second week of September on the Minimum Initial Service Package (MISP) for 27 medical and paramedical staff from the Ministry of Health and IFH.

Reproductive health services: During the period of 28 August - 17 September, Aman Association and the Jordan Health Aid Society clinics, with the full support of UNFPA, supported the provision of reproductive health services for 4,768 women, most of which were related to family planning and cures for infections.

LEBANON

Minimum Initial Service Package (MISP) training courses for social workers from the Ministry of Social Affairs: Two reproductive health training courses were conducted on September 11-13 and 18-20, respectively, targeting a total number of 44 social workers from the Social Development Centres of the Ministry of Social Affairs.



Quote: "This training was definitely very useful to all of us; we were able to acquire a lot of information on reproductive health in a very short period of time." Social worker, Ministry of Social Affairs.

Minimum Initial Service Package (MISP) training courses in Lebanon. UNFPA, 2013

IRAQ

Reproductive health services: During the reporting period, **887 women received UNFPA-supported reproductive health services at the clinic in Domiz camp.** Of these, 368 women received gynecological and obstetrical services, 288 pregnant women received antenatal care services, 58 lactating mothers received postnatal care services, and 173 women/couples visited the clinic for family planning services, including contraceptives.

New reproductive health clinic in Kwargosek camp: UNFPA established a reproductive health clinic and a women's safe space in the new camp of Kwargosek and delivered a total of four male condom kits, four clinical management of rape kits, 30 kits of oral and injectable contraceptives and 12 IUD insertion kits, four clinical delivery kits A and B, four sexually transmitted diseases kits, four kits for suture of tears and four blood transfusion kits to the Ministry of Health in Kurdistan Regional Government of Iraq.



UNFPA establishes reproductive health clinic and a women's safe space in the new camp of Kwargosek, Erbil, Iraq. UNFPA, 2013



In an attempt to preserve the dignity of families in the violence-affected areas and in cooperation with the Syrian Arab Red Crescent, UNFPA continues to provide vital hygiene products to 17,500 women and 2,300 men in Deir Ezzor and Raqqa.

Gender-based violence training: UNFPA, in collaboration with UN-RWA, certified six practitioners who completed a training course on psychosocial first aid and an additional 15 relief workers serving in Damascus and Rural Damascus who completed a stress management training course.

JORDAN

Gender-based violence training: UNFPA conducted a training course on the clinical management of rape (CMR) for 20 medical and paramedical personnel who will work for UNFPA in International Medical Corps clinics in the new Azrak camp.

UNFPA, in collaboration with the International Red Crescent, continued the implementation of a **comprehensive prevention and response programme in Zaatri camp** and conducted four gender-based violence basic training courses during the period of 11-17 September, focusing on risk identification, available services and referral pathways for a total of 100 participants: 16 youth committee members, 66 participants from health committees, 6 female headed households, and 12 community outreach volunteers.

UNFPA trained six Syrian volunteers in Ma'an on the basics of community based protection and guidance for refugees.

The gender-based violence prevention and response services continued at UNFPA's sites and **new recreational activities, including alphabetization, computer literacy, and other life-skills activities to promote and empower Syrian women were introduced in the communities of Ma'an and Zarqa.**



UNFPA provides alphabetization course in Ma'an and Zarqa in Jordan to Syrian women. UNFPA, 2013



GENDER EQUALITY AND WOMEN'S EMPOWERMENT

SYRIAN ARAB REPUBLIC:

Gender-based violence services: Around 4,000 women residing in shelters in Damascus, Rural Damascus, Aleppo, and Homs received psychosocial support services and referrals and around 800 women in Deir Ezzor received psychosocial first aid through UNFPA community and Syria Arab Red Crescent volunteers.

During the reporting period, **75 women were screened for gender-based violence in a comprehensive reproductive health facility run by the Syrian Family Planning Association in Damascus,** 35 of whom received medical counseling, community support, legal counseling, and referral services as a result.

LEBANON

Gender-based violence prevention and response campaign with focus on basic life-skills, problem solving and psychological first aid targeting women: UNFPA, in collaboration with the American University of Beirut's Department of Psychology, conducted a two-day training course on psychological first aid on 19 - 20 September to six social development centres and local NGOs from Baalbek, North Lebanon (Halba, Meniyeh) and South Lebanon. This training will enable the trained social workers to provide necessary basic psychological aid to refugees and community members at the onset of trauma and help them go through a positive coping process until they are provided with specialized help.

TURKEY

Gender-based violence training: As part of "Helping the Helpers" programme, UNFPA organized 12 training courses on gender-based violence with special focus on trauma-informed approaches and secondary trauma prevention. Moreover, UNFPA also conducted three meetings for Syrian women aged 13- 62 to help them establish a women's committee, aiming to represent the voice of Syrian women in the camps.

IRAQ

Gender-based violence services: During the first week of September around 16 women received counseling sessions in the UNFPA women's social centre; the majority were suffering from psychological and domestic violence.

SUPPORTING ADOLESCENTS AND YOUTH

JORDAN

An animation workshop took place on 26 September targeting 8 Syrian young women, with the objective to **develop a short educational animation film on early marriage and harassment**.

LEBANON

Initiating youth assessment for Syrian refugees: The second meeting for the technical committee that consists of members from UNICEF, UNFPA, UNESCO and Save the Children International took place on September 20, where they discussed the progress of the implementation of the assessment, the data collection phases, and finalized the in-depth interview guides.

Interventions targeting youth affected by the Syrian crisis for healthier and more active youth, including Syrian and Palestinian refugees from Syria as well as youth from the hosting communities. During the reporting period, two group discussion sessions were conducted on 12 September with 22 Syrian youth in the Bekaa. The first group included 12 youth aged 15-18 years and the second group included 11 youth aged 19-24 years old.

A three day-training course was conducted on 7-9 September on **youth peer education programme** management and coaching targeting 15 focal points/youth programme coordinators from eight NGOs and two from the Ministry of Social Affairs' Social Development Centres.

IRAQ

Youth social centre: Several activities and trainings took place in the center under the youth initiative support programme: 35 youth participated in two peer education training courses and 20 youth participated in the 15-day drawing and painting course.



Syrian youth during peer education course in Domiz camp, Iraq, UNFPA, 2013

COORDINATION AND CAPACITY BUILDING

SYRIAN ARAB REPUBLIC

UNFPA participated in a United Nations' meeting held in Beirut on 26-27 September 2013 to discuss programme criticality analysis.

UNFPA participated in the sector meetings on health, protection and logistics in support of better assessment of needs and effective humanitarian response.

JORDAN

UNFPA chaired the national reproductive health sub-working group meeting on 10 September. During the meeting, the team discussed the reproductive health services plan for the Azraq new camp and the United States' Centers for Disease Control (CDC) team presented the findings and recommendation of the two-month mission.

UNFPA co-chaired with UNHCR the weekly sub-working group meetings on gender-based violence.

UNFPA co-chaired a task team working with youth in Zaatari camp.

LEBANON

On 9 September, UNFPA chaired the reproductive health sub-working group attended by 14 persons representing 12 national and international NGOs, and United Nations agencies, and discussed the following issues:

- o Caesarean-section delivery: the situation in Lebanon and analysis of Caesarean sections among Syrian refugees.
- o Clinical management of rape services for survivors.
- o Maternity card.
- o Minimum package for pregnancy care.
- o Adolescent sexual and reproductive health youth activities.

IRAQ

On 26 September, UNFPA participated in the second Strategic Gender-Based Violence (SGBV) working group, where the group developed terms of reference for the gender-based violence sub-sector and agreed on a joint calendar of activities to better enhance the coordination and complementarity of interventions in the field.

EGYPT

UNFPA participated in an inter-agency needs assessment of Syrian refugees, which included quantitative and qualitative components. The data collection is to be concluded on 27 September. The initial report will be received on 10 October. The assessment included questions on access to health services, reproductive health needs and exposure to gender-based violence.

CHALLENGES

In Syria: The security situation in Syria affects timely and effect delivery of health services, including reproductive health, to people in need.

Inadequate information and services are available to mitigate the consequences of gender-based violence in Syria.

More pregnant women are opting for Caesarean-section deliveries to avoid the risk of not reaching health facilities and having unattended birth: this demonstrates the urgent need for additional emergency obstetric care.

Inadequate information is available about the type and place of existing reproductive health services, including emergency and obstetrical services at the community level.

UNFPA and its partners are concerned about the deterioration of the economic and social conditions of families, which expose the families, particularly women, to various kind of violence, including gender-based violence.

In Jordan: The lack of security in certain parts of Zaatari camp impedes refugees' access to services. The continuing limitation of transportation options for refugees affects accessibility to health services for the most disadvantaged, including pregnant women in the camp.

The UNFPA reproductive health facility in the camp's District 5, which is operated by the Jordan Health Aid Society, becomes the only uncomplicated delivery services in Zataari camp after the departure of the government social franchise on 7 September.

In Lebanon: The highly fragile situation in Lebanon, with intensified hostility in the north, South and Bekaa, is affecting programme delivery and staff movement.

The issue of access to unregistered Syrians detained in Lebanon remains problematic. Refugees are moving into new areas.

In Iraq, the magnitude of the influx of refugees diminished compared to that in mid-August; however, there is a challenge to cope with huge number of refugees currently residing in the Kurdistan region.



CONTACT INFORMATION
Daniel Baker, UNFPA Syria Regional,
Response Advisor
baker@unfpa.org +962 79 7225 829

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