



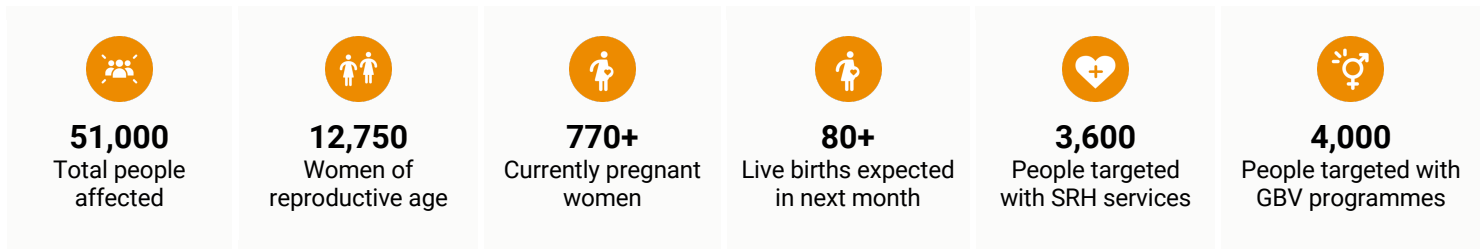
# Flash Update #1

## Syria: Coastal Area Violence

Photo: © UNFPA Syria / Alaa Ghorra

Country:	Syria
Emergency type:	Conflict - Latakia and Tartous
Start Date of Crisis:	6 March 2025
Date Issued:	14 March 2025
Covering Period:	6 to 12 March 2025
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### Key Figures (Estimated)<sup>1</sup>



### Highlights

- More than 1,000 civilians have been reportedly killed, including women and children<sup>2</sup>, and many more injured during a recent surge in violence in Syria’s coastal areas of Hama, Homs, Latakia and Tartous governorates.<sup>3</sup> Unverified reports also indicate that an estimated 51,000 civilians (including 6,000 who crossed the border into Lebanon) have been displaced by the violence.

<sup>1</sup> Based on an unverified number of displaced people, including in Lebanon, and MISP calculations.

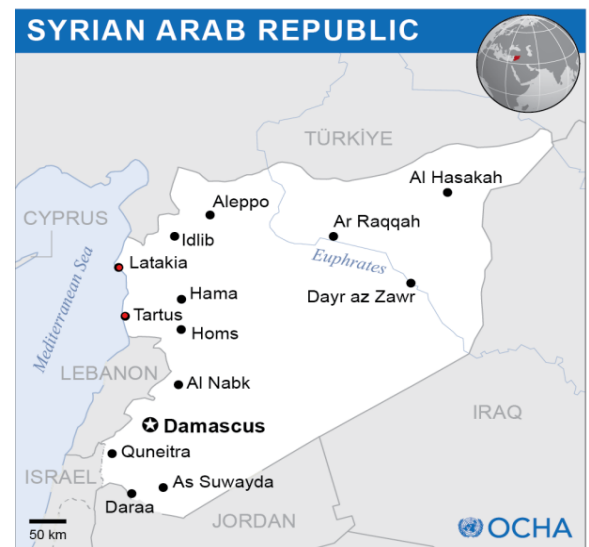
<sup>2</sup> [United Nations, Syria: Children among the dead amid reports of mass killings and looting, 10 March 2025.](#)

<sup>3</sup> [OCHA, Joint Statement by UN Resident Coordinator and Humanitarian Coordinator for Syria, Adam Abdelmoula, and Regional Humanitarian Coordinator for the Syria Crisis, Ramanathan Balakrishnan, on the recent hostilities in Syria, 8 March 2025.](#)

- All health facilities providing essential and life-saving sexual and reproductive health (SRH) services have been suspended in coastal areas due to instability, access issues and the safety of both patients and providers. All facilities providing gender-based violence (GBV) services in Latakia and Tartous are also closed.
- Humanitarian operations have been severely disrupted; there is no access to displaced families, and all missions to and within coastal areas have been suspended. All mobile teams are currently suspended. Curfews and movement restrictions have been imposed, curtailing access to basic services. Humanitarian access is urgently needed.
- The UN, international and local humanitarian actors are prioritizing the provision of life-saving humanitarian assistance to those in need once access allows.

## Situation Overview

- Displaced civilians have sought shelter in Latakia and Tartus – around 1,000 households were received at a shelter in Himimim village (east of Latakia city) and a further 1,000 households sought shelter at Ibn Khaldoon school in Tartous-Banyas city.
- Multiple incidents of theft and murder have been reported, further increasing instability, and raising protection concerns for women, girls, and children.
- The Homs-Latakia highway was blocked, hindering humanitarian aid from reaching the area. There are still movement restrictions in some areas; roads are closed and activity is subject to governmental and Humanitarian Action Coordination (HAC) office approval. Costs for transportation are high due to current fuel shortages in Syria.
- In Latakia, seven key hospitals out of 118 public health facilities – which had been fully functioning prior to the violence – are in immediate need of medical supplies. One hospital has sustained damage. Due to the security situation, the majority of staff have not been able to report for work. Damage to infrastructure, and a lack of medical supplies and staff, are negatively impacting women and girls' access to critical health services, including SRH services.
- The instability is exacerbating protection risks for women and girls, and cutting off survivors of violence from services and support. There is an urgent need to expand the availability of services to prevent and respond to GBV. Engagement with local stakeholders remains key to raising awareness of GBV and supporting access to life-saving services, as well as activities that address social norms that perpetuate violence.
- Disruptions to infrastructure are impacting access to clean water and electricity supply across the coastal region. Inter-sectoral efforts to strengthen access to water, sanitation and hygiene (WASH), and increasing lighting in communities by providing women and girls with solar lamps, are key to improving safety of movement and strengthening GBV risk mitigation.
- Most of UNFPA's partners have been given permission to continue operations in Syria while the re-registration process<sup>4</sup> is completed, in line with the Ministry of Social Affairs and Labour (MOSAL) requirements. Other partners have reduced operations as a result of the suspension of USAID. The reduction in funding for some GBV service



Map Disclaimer: The boundaries and names shown and the designations used on this map do not imply official endorsement by the United Nations.

<sup>4</sup> All NGOs/INGOs working in Syria have been asked to re-register even though I/NGOs were already registered at the Ministry of Social and Labour Affairs under the previous regime.

providers has increased pressure on remaining organizations, who do not have the capacity to respond effectively to growing needs, including case management, psychosocial support, and access to legal aid.

## UNFPA Response

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### Overall response

- UNFPA delivered critical supplies to partners (5 in Latakia: the Syrian Arab Red Crescent (SARC), the Syrian Youth Council (SYC), the Syrian Family Planning Association (SFPA), the Institut Européen de Coopération et de Développement (IECD), and Mosaic; and 3 in Tartus) to address the needs of affected populations through 6 health clinics; 6 women and girls' safe spaces (WGSSs); one community well-being centre; 5 youth friendly spaces; and 13 integrated mobile teams (IMTs).
- While all implementing partners have suspended interventions due to the insecurity, UNFPA, along with other agencies, has been coordinating with local governmental bodies, the HAC office, partners, as well as sub sectors and interagency groups, to facilitate the resumption of interventions.

### Sexual and Reproductive Health

#### Service delivery

- 176 Interagency Reproductive Health kits<sup>5</sup> have been provided to two UNFPA partners – SFPA and SARC – to provide SRH services. Supplies will support clean deliveries for 8,000 women without access to health facilities; assist deliveries for 1,350 pregnant women at health facilities; treat sexually transmitted infections (STIs) for up to 20,000 people; and strengthen 200 community midwives' capacity to provide increased and quality care to pregnant women in communities.
- In response to pressing needs arising from the violence in coastal areas, UNFPA, in collaboration with the SYC, organized a blood donation campaign in Jableh to bolster local blood supplies.
- In collaboration with the Sexual and Reproductive Health Working Group (SRHWG), UNFPA is planning to conduct a rapid needs assessment in coastal areas to identify the reproductive health needs of women and girls, including those with disabilities.
- To strengthen partnerships, UNFPA is coordinating closely with local partners (SYC, Mosaic, SARC, SFPA) sharing resources and streamlining the delivery of SRH services.

#### Sexual and reproductive health coordination

- Regular updates are being received from partners in the SRHWG on service availability. These are being collated and shared with the Health Sector Coordinator, who is leading the updating of a prioritization and crisis response plan for the coastal area (Latakia, Tartous, Homs and Hama).
- SRHWG partners, including UNFPA, are exploring options, such as the deployment of mobile health teams and the potential deployment of UNFPA staff and partners from different governorates, to ensure the continuation of services in coastal areas.

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<sup>5</sup> 40 Kit 2A (clean delivery kit-individual); 40 Kit 2B (clean delivery kit-birth attendants); 66 Kit 5 (for management of sexually transmitted infections); 30 Kit 6B (for clinical delivery assistance).

## Gender-Based Violence

### Service delivery

- UNFPA is working with partners to provide immediate services for GBV through existing WGSSs, IMTs and the community wellbeing centre. Services will include GBV case management, psychosocial support (PSS), psychosocial first-aid (PFA), referrals and other related services once the security situation allows.
- UNFPA is coordinating with partners to distribute approximately 2,400 female dignity kits. An additional 5,000 are being prepositioned for distribution at a later date. Dignity kits include basic hygiene items and also serve as an important entry point for GBV survivors and those at risk of GBV.

### Gender-based violence coordination

- The GBV sub-sector is mapping the capacity of GBV partners to deliver emergency supplies, including dignity kits and menstrual supplies, as well as strengthening referral pathways through the relocation of mobile GBV teams, the establishment of temporary WGSSs, and the deployment of specialized GBV personnel to existing static GBV facilities. As of 10 March 2025, 100% of GBV facilities are suspended in coastal areas (Lattakia and Tartous governorates). In Hama, 73% of GBV facilities are operational, 10% partially operational and 17% suspended. In Homs, 82% of GBV facilities are operational, 15% partially functional and 3% suspended.
- As the Syria HCT explores ways of delivering additional supplies, UNFPA, in its capacity as the lead agency for the GBV sub-sector, is facilitating coordination with protection, health, food security and other sector lead agencies to ensure the timely dispatch of available GBV supplies and personnel to affected areas.
- The inter-sector team is currently working to adapt an inter-sector tool to use in the upcoming rapid assessment, while negotiations with caretaker authorities and HAC for humanitarian access are ongoing under OCHA leadership at the national and sub-national level.

## Results Snapshots



**6**  
Health facilities supported



**7**  
women and girls' safe spaces supported providing specialized GBV services



**13**  
Integrated SRH and GBV mobile teams deployed



**2,400**  
Dignity kits provided to partners for distribution to women and girls



**176**  
Inter-Agency Reproductive Health kits with supplies to support 84,500 sexual and reproductive health services



**5,000**  
Dignity kits prepositioned for distribution to women and girls