

UNITED NATIONS POPULATION FUND

REGIONAL SITUATION REPORT

FOR THE SYRIA CRISIS

The Regional Situation Report for the Syria Crisis offers a bird's eye view of UNFPA's operations within the context of the Syria Crisis. The report is prepared by the UNFPA Regional Syria Response Hub in Amman, Jordan, and spans operations conducted by UNFPA offices in Syria, Jordan, Lebanon, Turkey, Iraq, and Egypt, in addition to operations conducted inside Syria and managed from cross-border Turkey.

In addition to providing aggregated quantitative results for each country, the report also brings stories from the field that highlight the plight of communities inside Syria and in host countries, in addition to underscoring the positive impact of the response services provided by UNFPA in the areas of sexual and reproductive health, gender-based violence, youth, and others.

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"We, women and girls, are the most oppressed. A little more oppression and they will hold us accountable for the breaths we take."

Mariam, an adolescent girl from Aleppo, Syria

THE MISSION OF UNFPA

THE UNITED NATIONS SEXUAL AND REPRODUCTIVE HEALTH AGENCY

UNFPA's core mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.

UNFPA calls for the realization of sexual and reproductive rights for all, and supports access to a wide range of services, including voluntary family planning, maternal healthcare and comprehensive education on sexuality.

As the Syria crisis enters its ninth year, UNFPA believes that every Syrian woman and girl has the right to have access to affordable sexual and reproductive healthcare and be effectively protected from gender-based violence. UNFPA and its partners are scaling up efforts to empower and improve the lives of Syrian women and youth and impacted communities inside Syria and in host countries, including by advocating for human rights and gender equality, to better cope with and recover from the crisis.





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The crisis in Syria has been globally recognized as one of the worst humanitarian crises of our time. As of 2019, more than 11.7 million people inside Syria are in need, while close to 5.7 million have taken refuge in neighbouring countries throughout the region. They continue to suffer the effects of nearly nine years of conflict, including disruption of community networks, safety nets and rule of law. Even as some parts of Syria stabilize, the crisis has long since passed a critical point in terms of generational change, and its effects will undoubtedly continue for many years to come. This is particularly true in the case of women and girls due to the deep-rooted complexity of the issues they continue to face on a daily basis.



THE SYRIA CRISIS IN 2019

OVERVIEW OF THE SITUATION

DARAA, AL-HASSAKAH, DEIR-EZ-ZOR, LATTAKIA, HAMA, ALEPPO AND IDLIB GOVERNORATES REMAIN PRIMARY HOTSPOTS.

The security situation in Syria remains volatile. Idlib, Aleppo, Daraa, Al-Hassakah, Deir-ez-zor, North Latakia and North Hama governorates remain primary hotspots.

The recent Turkish incursion in northern Syria has resulted in the displacement of 108,514 from Al-Hassakah, including 27,130 women of reproductive age. Current population movements include IDPs in host communities, IDPs in collective shelters, relocation between camps, temporary displacement to host communities as well as movements from camps to host communities, collective shelters, informal settlements, and others. With the recent drops in temperatures and winter months approaching, women and girls are expected to adversely suffer the effects.

The current situation has put the lives of women, men, girls and boys at risk every day and has significantly impacted their psychosocial well-being with reportedly high levels of trauma. According to a rapid needs assessment conducted by REACH, safety and security concerns severely restricted freedom of movement, while damage to civilian infrastructure prevented access to essential services. This exacerbates the vulnerability of communities, making the provision of humanitarian assistance in these areas even more critical.

“The current situation has put the lives of women, men, girls and boys at risk every day and has significantly impacted their psychosocial well-being with reportedly high levels of trauma.”

Access to healthcare continues to be an essential need for newly-displaced individuals and for host communities, including pregnant women. Multiple displacements and lack of access to basic services further exacerbate the needs of individuals and communities, in addition to significantly increasing the risks of gender-based violence (GBV). Additional displacements further strain already-stretched coping mechanisms of individuals and families, leading to desperate measures that further increase the likelihood of protection threats, such as sexual exploitation, forced and early marriage, amongst others.

In response to these dire needs, UNFPA continues to provide services to people in need of sexual and reproductive health (SRH) and GBV integrated services, with a focus on the needs of women and adolescent girls. A variety of SRH services are being delivered, including antenatal care, family planning, normal delivery services, postnatal care, referrals, treatment of reproductive tract/urinary tract infection, treatment of trauma, and others. UNFPA also addresses the needs of women and adolescent girls by providing GBV response services such as case management, psycho-social support, clinical management of rape, and referrals.

“Additional displacements further strain already-stretched coping mechanisms of individuals and families, leading to desperate measures.”

Meanwhile, recent months have seen additional displacements to Al Hol camp in Al Hasakah due to instabilities in Deir-ez-zor governorate. The population at the camp today stands at around 74,000 people, 90 percent of whom are women and children. Escalating violence and displacement often exacerbate women’s vulnerability to higher risks of maternal mortality and morbidity, and increase the threat of gender-based violence and harmful practices. Over 50 percent of maternal deaths occur in humanitarian and fragile settings. Additional displacements further strain already-stretched coping mechanisms of individuals and families, leading to desperate measures that further increase the likelihood of protection threats, such as exploitation and early marriage.

UNFPA aims to provide integrated sexual and reproductive health (SRH) and gender-based violence (GBV) services, including family planning supplies, personal hygiene items, counselling, gynaecological consultations, ultrasound diagnostics, ante-natal care, post-natal care, psychological first aid, psychosocial counselling, referral for safe deliveries, comprehensive emergency obstetric and neonatal care, legal assistance, and case management.

RESPONSE FROM ALL OPERATIONS

DELIVERING LIFE-SAVING REPRODUCTIVE HEALTH AND GENDER-BASED VIOLENCE SERVICES TO COMMUNITIES IN NEED INSIDE SYRIA AND THROUGHOUT THE REGION.

The conflict in Syria has created one of the most severe and protracted humanitarian crises in the world today. Millions have been displaced both inside the country and outside as refugees, especially in Egypt, Iraq, Jordan, Lebanon and Turkey. The crisis has permanently altered the fabric of society in the nation, with far-reaching ramifications for its future resilience.

Even in these circumstances, UNFPA believes that every Syrian woman, adolescent girl and child has the right to sexual and reproductive health and protection from gender-based violence.

UNFPA operations in Syria are run from the Syria Country Office, as well as from the UNFPA hub in Gaziantep, Turkey for cross-border operations.

REPRODUCTIVE HEALTH

INDICATOR

| INDICATOR | SINCE JANUARY |
|---|---------------|
| People reached with sexual/reproductive health services | 2,063,671 |
| Family planning consultations | 803,920 |
| Normal / assisted vaginal deliveries | 69,179 |
| C-Sections | 48,578 |
| Ante-natal care consultations | 830,324 |
| Post-natal care consultations | 15,792 |
| People trained on SRH-related topics | 4,204 |

GENDER-BASED VIOLENCE

INDICATOR

| INDICATOR | SINCE JANUARY |
|--|---------------|
| People reached with GBV programming / services | 1,139,091 |
| People reached with Dignity Kits | 175,672 |
| People provided with GBV case management | 21,155 |
| People reached with GBV awareness messages | 1,017,561 |
| People trained on GBV-related topics | 3,021 |

YOUTH SERVICES

INDICATOR

| INDICATOR | SINCE JANUARY |
|---|---------------|
| Beneficiaries reached with youth programming | 125,240 |
| Beneficiaries trained on youth-related topics | 367 |



* Above figures reflect fully-supported service-delivery points. Inside Syria additional 954 primary healthcare facilities are being partially supported through the Ministry of Health.



SYRIA COUNTRY OFFICE

DELIVERING EMERGENCY AND LONG-TERM ASSISTANCE TO SYRIAN COMMUNITIES NATIONWIDE.

REPRODUCTIVE HEALTH

INDICATOR

| INDICATOR | SINCE JANUARY |
|---|---------------|
| People reached with sexual/reproductive health services | 1,599,965 |
| Family planning consultations | 694,776 |
| Normal / assisted vaginal deliveries | 50,340 |
| C-Sections | 43,004 |
| Ante-natal care consultations | 667,701 |
| Post-natal care consultations | 83,223 |
| People trained on SRH-related topics | 1,544 |

GENDER-BASED VIOLENCE

INDICATOR

| INDICATOR | SINCE JANUARY |
|--|---------------|
| People reached with GBV programming / services | 690,612 |
| People reached with Dignity Kits | 76,309 |
| People provided with GBV case management | 12,950 |
| People reached with GBV awareness messages | 753,671 |
| People trained on GBV-related topics | 821 |

YOUTH SERVICES

INDICATOR

| INDICATOR | SINCE JANUARY |
|--|---------------|
| Beneficiaries reached with youth programming | 73,751 |



* Above figures reflect fully-supported service-delivery points. Inside Syria, an additional 954 primary healthcare facilities are being partially supported through the Ministry of Health.

UNFPA Syria continues to provide emergency and long-term support to communities in need inside Syria. As part of the cooperation between UNFPA and the Ministry of Health, five mobile hospitals will start providing health services in the governorates of Hama, Homs, Daraa, Raqqa and Deir-ez-Zor, which will include four normal delivery hospitals and one C-section hospital.

UNFPA also continues to provide integrated SRH services, including ante-natal care, family planning, normal delivery services, post-natal care, referrals, treatment of reproductive tract/urinary tract infections, treatment of trauma, and others. UNFPA also delivers GBV services that span psychological first aid, referrals to public health institutions and GBV awareness raising. For the protection of health, hygiene and to preserve dignity, UNFPA also distributes female dignity kits, sanitary napkins, protection kits for adolescent girls, kits for pregnant/lactating women, and male dignity kits. UNFPA services are being provided in partnership with its implementing partners and in coordination with other UN agencies to meet the needs of IDPs and those affected by the crisis in Syria.



HIGHLIGHT

SAVING LIVES AS TENSIONS IN NORTHEASTERN SYRIA CONTINUE

As clashes rage on in northeastern Syria, the toll on civilians and health systems continues to mount. Mass displacements have complicated the delivery of basic health services, including sexual and reproductive health and maternal healthcare. The onset of military operations in the area in October had caused more than 200,000 people to flee their homes, many for the second or third time. Some 117,000 people have returned to their places of origin, but more than 75,000 remain displaced, according to recent UN reports.

Humanitarian partners in areas affected by the current hostilities, including Alahras, Alamiriyah, Abu Rasian, Um Alkhair, Dahr Alarab and Almahmoudiya, have diverted their programmes and resources to meet the needs of the newly displaced populations. General services have deteriorated in several affected areas, including losses in electricity and closure of education facilities in Raqqa governorate. Meanwhile, colder weather conditions have left civilians particularly vulnerable.

It is estimated that approximately 18,860 women of reproductive age are among the currently displaced. These women and girls require services, including menstrual hygiene supplies and maternal health care. "I was really worried before giving birth," Asma Al Issa, 32, told UNFPA.

Asma was first displaced three years ago when her house in Al Qadisia Village was demolished, and subsequently displaced again. Today, she lives in Al Tapqa, a city in Raqqa governorate, in an unfinished house provided by a host family. During the final months of her pregnancy, she was able to receive maternal health services from a clinic supported by UNFPA. The clinic serves 50 to 60 women a day, about half of them pregnant.

Weeks into the escalation of hostilities in the area, Asma went into labour. Yet despite the many tensions and dangers that paved her journey, the delivery went fairly smoothly, thanks to skilled care provided by Hanan, a midwife at the clinic. Asma and her new daughter, Sarah, were discharged in good condition, taking home the post-partum and neonatal care supplies provided by the clinic. Holding a healthy baby had left Ms. Al Issa in high spirits. "Now I am very happy to have a baby girl," she told UNFPA.

In response to the crisis, UNFPA has expanded its coverage in hard-to-reach villages, including Mabada and Al Jawadia in Al-Hassakeh, Al-Qamishly, Tabqa, Jurnia and Twehina, as well as the Newroz and Mahmoudi camps. Despite the challenging environment, UNFPA, with funding from European Civil Protection and Humanitarian Aid Operations, has been able to reach tens of thousands with urgent assistance.

Between 9 October and 7 December, some 27,700 women of reproductive age — including around 8,000 pregnant women — were reached with reproductive health care in north-eastern Syria. UNFPA also reached nearly 31,000 people with services to prevent and respond to gender-based violence. There are also 27 mobile reproductive health and maternal health teams performing outreach in underserved areas.

UNFPA is working with local partners to expand these efforts, aiming to meet the needs of up to 580,000 people in the governorates of Al-Hasakah and Raqqa. Dr. Adnan, a reproductive health coordinator working in the area, is proud of the care that health workers have been able to provide, even amid the recent unrest. "Asma is not a special case or an exception," explains Dr. Adnan. "She is one of thousands displaced and deprived families that we serve every day."

CROSS-BORDER TURKEY

ENSURING ACCESS TO LIFE-SAVING SERVICES FOR ALL COMMUNITIES INSIDE SYRIA.

Local sources reported a renewed escalation in airstrikes in Idlib area, which have affected 22 communities in total, while 11 communities within Idlib were impacted by shelling. Intensive airstrikes and shelling continue in southern Idlib governorate, while local sources reported difficulties in fleeing these areas due to non-stop bombardment. As a result of airstrikes and shelling, 23 people, including six women and five children, were reportedly killed across Idlib.

UNFPA and partners continued to provision integrated SRH and GBV services in various areas of Idlib and Aleppo through 34 delivery points (14 safe spaces, 12 health facilities, and 8 mobile clinics) reaching a total of 260k people. Two of the UNFPA supported health facilities were hit resulting in a permanent closure of one facility, and a temporary for the other.

REPRODUCTIVE HEALTH

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Primary health facilities | 12 |
| Health facilities that provide Emergency Obstetric Care (EmOC) | 12 |
| Functional mobile clinics | 8 |
| People reached with sexual/reproductive health services | 205,268 |
| Family planning consultations | 49,981 |
| Normal / assisted vaginal deliveries | 14,805 |
| C-Sections | 4,733 |
| Ante-natal care consultations | 102,638 |
| Post-natal care consultations | 14,957 |
| People trained on SRH-related topics | 386 |

GENDER-BASED VIOLENCE

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of women and girls' safe spaces (WGSS) | 14 |
| People reached with GBV programming / services | 133,932 |
| People reached with Dignity Kits | 49,916 |
| People provided with GBV case management | 1,167 |
| People reached with GBV awareness messages | 89,392 |
| People trained on GBV-related topics | 646 |



EGYPT COUNTRY OFFICE

WITH NEARLY HALF A MILLION SYRIANS LIVING ALONGSIDE EGYPTIANS, UNFPA CONTINUES TO PROVIDE ASSISTANCE TO SYRIAN REFUGEES IN THE COUNTRY, FOCUSING ON ISSUES RELATED TO GENDER-BASED VIOLENCE.

Egypt remains a destination and transit country for refugees and asylum-seekers, most of whom live in urban areas. The country continues to generously host Syrian refugees, despite the absence of a land border with Syria. Currently, there are 127,414 Syrian refugees registered with UNHCR Egypt.

Egypt constitutes a successful model with regards to the social inclusiveness dimension. The country hosts nearly half a million Syrians who live alongside Egyptians in various areas, sharing public services, resources and many of the privileges afforded to local citizens.

Among refugees in Egypt, women and girls, boys, adolescents, and unaccompanied and separated children face disproportionate risks. According to UNHCR, 94 percent of the Syrian population in Egypt have been identified as either highly or severely vulnerable. UNFPA Egypt continues to provide essential services to Syrians, focusing on prevailing social predicaments associated with forced migration such as various forms of gender-based violence.

REPRODUCTIVE HEALTH

INDICATOR

| | SINCE JANUARY |
|---|---------------|
| People reached with sexual/reproductive health services | 9,081 |
| Family planning consultations | 860 |
| Ante-natal care consultations | 203 |
| Functional mobile clinics | 3 |

GENDER-BASED VIOLENCE

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of women and girls' safe spaces (WGSS) | 11 |
| People reached with GBV programming / services | 18,930 |
| People provided with GBV case management | 3,379 |
| People reached with GBV awareness messages | 8,482 |
| People trained on GBV-related topics | 196 |

YOUTH SERVICES

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| People reached with youth programming | 731 |
| People trained on youth-related topics | 63 |



IRAQ COUNTRY OFFICE

WITH HUNDREDS OF THOUSANDS TAKING REFUGE IN THE COUNTRY, UNFPA IRAQ CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES IN BASIRMA, DRASHAKRAN, KWARGOSK, AND QWSHTAPA CAMPS.

Currently, around 235,000 Syrian refugees are seeking safety in camps and host communities in Iraq. The recent military activity in northern Syria has also caused around 15,000 individuals to seek refuge in the Kurdistan Region of Iraq.

UNFPA supports seven women community centres, seven health facilities, one delivery room, and four youth centres serving the refugee population in the Kurdistan region of Iraq. UNFPA ensures that antenatal, postnatal, and emergency obstetric referral services are offered. In addition, UNFPA provides reproductive health kits in six maternity hospitals and supports referral services. Response activities are targeting refugees in the eight primary camps in Iraq: Basirma, Darashakran, Kawergosk, and Qwshtapa in Erbil Governorate, Domiz 1, Domiz 2, Gawilan in Dohuk Governorate and Arbat in Sulaymaniyah Governorate with programmes that span vocational training, awareness sessions, lectures on topics related to sexual and reproductive health and gender-based violence, peer education sessions on reproductive health and life skills sessions for youth, in addition to various community engagement activities.

REPRODUCTIVE HEALTH

INDICATOR

| | SINCE JANUARY |
|---|---------------|
| Primary health facilities | 7 |
| People reached with sexual/reproductive health services | 37,647 |
| Family planning consultations | 6,452 |
| Normal / assisted vaginal deliveries | 1,696 |
| C-Sections | 715 |
| Ante-natal care consultations | 8,125 |
| Post-natal care consultations | 2,434 |
| People trained on SRH-related topics | 1,304 |

GENDER-BASED VIOLENCE

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of women and girls' safe spaces (WGSS) | 7 |
| People reached with GBV programming / services | 19,438 |
| People reached with dignity kits | 1,156 |
| People provided with GBV case management | 867 |
| People reached with GBV awareness messages | 26,892 |
| People trained on GBV-related topics | 131 |

YOUTH SERVICES

INDICATOR

| | SINCE JANUARY |
|---------------------------------------|---------------|
| People reached with youth programming | 39,110 |
| Number of functional youth centres | 4 |





Every day I think about my daughter and her future. As I see what has been happening to girls since the war, it frightens me. I want her to have a real life, not to be sold off into a life of abuse.

Yara, a Syrian refugee from Aleppo

JORDAN COUNTRY OFFICE

WITH 1.3 MILLION SYRIANS NATIONWIDE, UNFPA JORDAN CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEE AND HOST COMMUNITIES THROUGHOUT THE KINGDOM.

Jordan is currently hosting more than 1.3 million Syrians, including 655,000 registered refugees, who face increasing vulnerability as their savings, assets and resources are long exhausted. Providing for their needs and ensuring their access to basic sexual and reproductive health and gender-based violence services is among the top priorities of UNFPA Jordan.

According to the 2015 population census, the total population of Jordan was estimated at 9.531 million, including 1.265 million Syrians, who represent 13.2% of the overall population.

Approximately 79% of Syrian registered refugees, representing 516,000 people, live in host communities in urban and rural areas of Jordan. The remaining 21% is settled in camps, either in Azraq, Emirati Jordanian Camp, or Za'atari. The highest concentration of refugees is found in the northern governorates of Amman, Irbid, Mafraq and Zarqa.

UNFPA Jordan has been providing essential sexual and reproductive health and gender-based violence prevention services to Syrian refugees throughout the kingdom, whether in refugee camps or in host communities.

REPRODUCTIVE HEALTH

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of primary health facilities | 20 |
| People reached with sexual/reproductive health services | 113,917 |
| Family planning consultations | 24,912 |
| Normal / assisted vaginal deliveries | 2,177 |
| Number of C-sections | 431 |
| Ante-natal care consultations | 39,013 |
| Post-natal care consultations | 5,622 |
| Health facilities that provide Emergency Obstetric Care (EmOC) | 2 |

GENDER-BASED VIOLENCE

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of women and girls' safe spaces (WGSS) | 20 |
| People reached with GBV programming / services | 25,223 |
| People provided with GBV case management | 2,196 |
| People reached with GBV awareness messages | 13,891 |

YOUTH SERVICES

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of functional youth centres | 1 |
| People reached with youth programming | 6,539 |
| People trained on youth-related topics | 243 |



LEBANON COUNTRY OFFICE

WITH THE HIGHEST PER CAPITA NUMBER OF SYRIAN REFUGEES IN THE WORLD, UNFPA LEBANON CONTINUES TO PROVIDE VITAL SERVICES TO SYRIANS NATIONWIDE.

Since the onset of the Syria crisis in 2011, Lebanon has continued to be a generous host, welcoming around 1.5 million displaced Syrians — the highest per capita number of refugees in the world.

Given the significant refugee-per-capita ratio and the undue strain the crisis has placed on Lebanon's economy and services, UNFPA Lebanon continues to provide a wide array of programmes and services to displaced Syrians in Lebanon.

More than 75 percent of refugees in Lebanon are women and girls, making it all the more vital to provide them with essential reproductive health services as well as programmes to respond to and prevent gender-based violence.

Since the beginning of the crisis, UNFPA Lebanon has continually worked on enhancing coordination, expanding partnerships, and assessing needs in close collaboration with key humanitarian actors including pertinent agencies within the United Nations.

REPRODUCTIVE HEALTH

INDICATOR

| | SINCE JANUARY |
|---|---------------|
| People reached with sexual/reproductive health services | 5,867 |
| Family planning consultations | 1,197 |
| Normal / assisted vaginal deliveries | 161 |
| C-Sections | 126 |
| Ante-natal care consultations | 1,915 |
| Post-natal care consultations | 230 |
| Functional mobile clinics | 9 |
| People trained on RH-related topics | 88 |

GENDER-BASED VIOLENCE

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of women and girls' safe spaces (WGSS) | 18 |
| People reached with GBV programming / services | 21,359 |
| People provided with GBV case management | 1,270 |
| People trained on GBV-related topics | 267 |

YOUTH SERVICES

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of functional youth centres | 3 |
| People reached with youth programming | 1,050 |
| People trained on youth-related topics | 40 |



TURKEY COUNTRY OFFICE

WITH THE LARGEST NUMBER OF REFUGEES WORLDWIDE, TURKEY CONTINUES TO PROVIDE MUCH NEEDED ASSISTANCE TO DISPLACED SYRIANS THROUGHOUT THE COUNTRY.

Turkey hosts the largest number of refugees and asylum-seekers in the world, which includes more than 3.5 million Syrians registered with UNHCR.

Most refugees in Turkey are situated in host communities around the country, which has stretched the absorptive capacities of many host communities and resulted in tensions between refugees and host community members.

As the refugee crisis in Turkey becomes more protracted, delivering support to national and local systems, with a strong focus on supporting women, children and youth, is more vital than ever to reinforce the country's resilience.

UNFPA Turkey continues to provide essential sexual and reproductive health and gender-based violence services to Syrian communities in need, addressing assistance gaps and organizing far-reaching programs that serve to protect vulnerable members of the community.

REPRODUCTIVE HEALTH

INDICATOR

| | SINCE JANUARY |
|---|---------------|
| Number of primary health facilities | 6 |
| People reached with sexual/reproductive health services | 91,193 |
| Family planning consultations | 25,742 |
| Ante-natal care consultations | 10,729 |
| Post-natal care consultations | 2,738 |
| People trained on SRH-related topics | 858 |

GENDER-BASED VIOLENCE

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of women and girls' safe spaces (WGSS) | 6 |
| People reached with GBV programming / services | 229,597 |
| People reached with dignity kits | 47,021 |
| People provided with GBV case management | 594 |
| People reached with GBV awareness messages | 59,760 |
| People trained on GBV-related topics | 960 |

YOUTH SERVICES

INDICATOR

| | SINCE JANUARY |
|--|---------------|
| Number of functional youth centres | 4 |
| People reached with youth programming | 4,028 |
| People trained on youth-related topics | 21 |

OTHER SERVICES

INDICATOR

| | SINCE JANUARY |
|---|---------------|
| Number of social service centers (SSC) | 27 |
| Number of Key Refugee Service Units (KRG) | 7 |



A black and white photograph of a woman wearing a patterned headscarf, looking out a window. Her hand is resting on the window frame. The window has lace curtains on the left side. The background is bright and out of focus.

HIGHLIGHT

“BORN INTO A PRISON SENTENCE.”

“I’ve often felt like I was somehow born into a prison sentence, that I’m being punished for a crime I did not commit,” says Malak, a Syrian refugee living in Turkey.

Malak, a survivor of child marriage, gave birth to her two children years before reaching adulthood. She was forced into marriage at age 13, entering a life of restriction, emotional blackmail and verbal and physical abuse at the hands of her husband and family. It was then that the Syria crisis erupted, forcing her and her family to take refuge in Turkey around 2013.

Six months ago, Malak left her husband and returned to live with her parents in Turkey. She had been experiencing consistent physical and emotional abuse since the day she had gotten married, and all attempts at reasoning with her husband had failed. Her own family, on the other hand, were adamant in their efforts to reconcile the marriage.

“My family is extremely conservative and regard divorce as a scandal,” explains Malak. “Even after leaving my husband, it often feels like I’ve escaped one prison and joined another. My uncles never allow me to leave the house on my own, so I live my days in the house and cannot even begin to imagine a future for myself.”

The pressure placed upon her by her family had twice forced Malak into attempted suicide. This had rendered her parents more sympathetic to her plight, but failed to move her uncles, who often made her feel as if she will be the downfall of the family. “I had entered a depression unlike any other I had ever experienced. Between the abuse, the war, and the feelings of resentment I had felt from the men in my family, I felt like I had nowhere to turn to in this world. I needed help.”

Malak was able to seek counseling from the Diyarbakir Youth Center — a UNFPA-supported center that offers awareness building and engagement activities to those in need. She was immediately referred to individual counselling, followed by an in-depth planning session where the counselor helped her set her objectives for the coming session. During the session, Malak had made it clear that divorce was the only avenue she deemed acceptable, and so she was referred to the Turkish Bar Association to receive legal assistance in the divorce proceedings.

“The safe space at the center was more than a last resort,” explains Malak. “Before going there, I was completely alone. Now, I at least feel as though I have a support network, and it has impacted the way my family perceives me. Since going to the center, they are now on my side and can see that I am capable of making my own choices. Even my uncles have stepped back now that the authorities have gotten involved. I still have a long road to travel to recover from all that has happened, but I am much more hopeful.”

COORDINATION UPDATES

UNFPA CONTINUES TO LEAD THE GBV AREA OF RESPONSIBILITY (GBV AOR), ENSURING THAT MINIMUM STANDARDS ARE IN PLACE TO PREVENT AND RESPOND TO GENDER-BASED VIOLENCE IN EMERGENCIES.

To ensure good coordination when emergencies occur, the Inter-Agency Standing Committee (IASC) has introduced the Cluster Approach. Clusters are groups of humanitarian organizations, both UN and non-UN, in each of the main sectors of humanitarian action such as water, health and logistics. In contexts where the IASC Cluster Approach has been activated, UNFPA is mandated to co-lead the GBV Area of Responsibility (GBV AoR), a body part of the Global Protection Cluster, which is led by UNHCR.

As lead, UNFPA is accountable for working closely with national authorities, partners and communities, to ensure that minimum standards are in place to prevent and respond to gender-based violence in emergencies. In non-clustered and refugee contexts, UNFPA is co-leading with UNHCR.

UNFPA leads the GBV coordination mechanisms. Through its Damascus-based operation, UNFPA is the main lead, while in its Turkey Cross Border operation UNFPA co-leads with Global Communities. In its refugee response in Turkey and Iraq, UNFPA co-leads with the Government of Turkey and International Medical Corps (IMC) respectively. In Jordan and Lebanon, UNFPA co-leads the refugee GBV response with UNHCR.

Coordination for the WOS GBV AOR focused on the development of the protection/GBV chapter of the Syria Humanitarian Needs Overview and on preliminary discussions for the Humanitarian Response Plan. The GBV AOR also engaged in the preparation for the 16 Days of Activism campaign, including the development of one common activity under the heading of "The Tree of Life" to be implemented throughout Syria with girls, women, boys and men. The objective is to give an opportunity to adolescent girls to think about their own stories as collected in UNFPA's *When Caged Birds Sing* and *Unbroken*, two publications released by UNFPA Regional Syria Response Hub in 2018 and 2019. In the case of men and boys, the objective is to offer them the opportunity to better understand the violence experienced by women and girls and to reflect on their various roles as fathers, husbands, brothers, and others in contributing to or combating this violence.

The UNFPA Regional Syria Response Hub organised the regular call on the Adolescent Girls' Strategy, with participation from Iraq CO, Syria CO and the Arab States Regional office. The call tackled plans to engage adolescent girls in the 16 Days of Activism campaign and collect ideas for priorities in 2020. Additionally, the hub constructively engaged with the No Lost Generation's Gender Task Force, participating in a workshop to develop a work-plan for 2020.

In Turkey, the protection working group meeting was held in Ankara in November with a focus on youth and adolescents. UNFPA provided a presentation on its youth programme. Meanwhile, the technical meeting on GBV against refugee men and boys was also held in Ankara with the participation of specialized service providers from the region. Experiences, good practices and challenges were discussed, followed by a workshop on establishing SOP for the GBV against men and boys programme. Lastly, the Key Refugee Group Coordination meeting was held in Istanbul to tackle the latest developments in relation to the relocation process. This was followed by the GBV-CP Sub-Working Groups Joint Meeting on 12 November, the objective of which was to evaluate overall achievements in 2019 and discuss 2020 priorities in line with the 3RP.

In Jordan, the GBV sub working group focused on finalization of the planning for the 16 Days of Activism campaign. As a result, a joint calendar of activities was produced collecting activities in the field across all 12 governorates in Jordan — more than 200 in total. Moreover, joint messages were developed under the slogan *Break the Silence on Economic Violence*, with four main topics and seven messages covering different forms of economic violence and claiming women control over resources. The GBV IMS taskforce met regularly and conducted quarterly analyses as well.



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In Syria: Ministry of Health (MoH), Ministry of Higher Education (MOHE), Syrian Arab Red Crescent (SARC), Syrian Family Planning Association (SFPA), Agha Khan Foundation, Masyaf Charitable Association, Al Bir and Social Welfare Hama, Al Bir Charitable and Sociable Qamishly, Pan Armenian Charity Association, Al-Ihsan Charity Association, Al Bir and Al-Ihsan Charitable Association in Ras Alain, Albatoul Charity for Humanitarian Services, Islamic Charity Association – Aoun for Relief and Developments (AOUN), Monastery of Saint James the Mutilated (MSJM), Nour Foundation for Relief and Development, Syrian Commission for Family Affairs and Population, SCS, SEBC, OCHA / SHF. UNICEF, WFP, UNHCR, ILO, UNDP, UNHCR.

In Lebanon: Ministry of Public Health, Ministry of Social Affairs, Lebanon Family Planning Association for Development & Family Empowerment (LFPAD), Amel Association, KAFA (“Enough Violence and Exploitation”), INTERSOS, Makkased Philanthropic Association of Beirut, Development Action without Borders-Naba’a, RET Liban, Lebanese Order of Midwives, Lebanese Society of Obstetrics and Gynecology.

In Jordan: IFH (Institute for family health), MOH (Ministry of health), JHAS (Society Aid Health Jordanian), JWU (Jordanian Women’s Union), the National Council for Family Affairs (NCFA), YPEER (Youth Peer Education Network), Questscope, IRC, RHAS.

In Iraq: AL Massela, Harika, Zhian and Civil Development Organisation.

In Egypt: Ministry of Health and Population (MOHP), Ministry of Youth and Sport (MoYS), Arab Medical Union (AMU), Care International.

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), ASAM (Association for Solidarity with Asylum Seekers and Migrants), HÜKSAM (Hacettepe University Women’s Research and Implementation Center), KAMER (Women’s Center Foundation), CVF (Community Volunteers Foundation), Osmangazi University, PYD (Positive Life Association), Bilgi University, Red Umbrella, MUDEM, Harran University.

Turkey Cross-Border: Ihsan RD, Syrian Expatriate Medical Association (SEMA), Syrian American Medical Society (SAMS), Shafak.

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RELEVANT RESOURCES

www.unfpa.org

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