

// When you truly believe you are worthless, it becomes easier for them to hurt you and take advantage of you. I refuse to believe I am worthless. I have seen more of life than any of them.

— ROUAIDA, an adolescent girl from Qamishli, Syria



ISSUE# 100
DECEMBER 1-31, 2020

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. As of February 2020, the report also covers UNFPA's efforts to ensure continuity of operations throughout the Syria crisis region during the COVID-19 pandemic.



THE MISSION OF UNFPA

The United Nations sexual and reproductive health and rights 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.

Since the crisis in Syria erupted in 2011, UNFPA has worked consistently to ensure that every Syrian woman and girl has the right to access to affordable sexual and reproductive healthcare (SRH) and be effectively protected from gender-based violence (GBV). UNFPA and its partners are scaling up efforts to empower and improve the lives of Syrian women, youth, and impacted communities inside Syria and in host countries, including by advocating for human rights and gender equality to better equip individuals and communities to cope with the far-reaching ramifications of this protracted crisis. These efforts continue in 2020 as communities withstand the impact of the COVID-19 pandemic, which has presented an array of unprecedented challenges, including consistently changing priorities and severe restrictions on movement. UNFPA continues to mobilize its resources and expertise to maintain the availability of quality SRH and GBV services to people in need throughout the region.



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The crisis in Syria has been globally recognized as one of the worst humanitarian crises of our time. More than 11.2 million people inside Syria are in need, while close to 5.6 million have taken refuge in neighbouring countries throughout the region. They continue to suffer the effects of nearly a decade of conflict, including disruption of community networks, safety nets, and rule of law. 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. Moreover, as the COVID-19 pandemic continues to impact communities throughout the region, women and girls face ever-growing risks in terms of access to quality sexual and reproductive health services and protection from various forms of gender-based violence.

All photos shown in this issue, unless otherwise stated, are courtesy of the UNFPA Regional Syria Response Hub. Moreover, unless otherwise stated, photos do not directly correlate to the stories next to which they appear. Real names of survivors have been changed for confidentiality.

In 2021, UNFPA is appealing for \$131.6 million to fund its regional Syria crisis response.

UNFPA is appealing for a total of US\$ 333.5 million to support its humanitarian programmes throughout the Arab States in 2021, with \$131.6 million needed to fund its regional Syria crisis response.

A decade into the crisis, the situation in Syria remains critical as the country continues to endure the cumulative effects of years of instability, now further exacerbated by the burgeoning impacts of the COVID-19 pandemic. The combination of years of geopolitical unrest, severe economic collapse, and the disintegration of social and protection networks underscores that conventional, short-term responses are no longer effective.

The data obtained in Syria in 2020 further demonstrates the significant threat the pandemic poses in terms of further aggravating the challenges facing women and girls and the progress that has been made after a decade of global collaboration. Of particular concern is the fact that gender-based violence has become increasingly normalized in the wake of the crisis and the pandemic. As one Syrian woman notes, “women and girls experience the violence not knowing that this is not normal.” Not only does this paint a fairly concerning picture of the current reality within many Syrian communities, but it also underscores the importance of continuing to address gender-based violence through tailored, far-reaching programmes.

Since 2011, UNFPA has been responding to the needs of women and girls across the region. In 2020 alone, and despite the numerous restrictions that accompanied COVID-19, UNFPA provided life-saving, sexual and reproductive health (SRH) services to 1.9 million people, which have been delivered through 264 health facilities, mobile clinics, and outreach teams. Meanwhile, 800,000 women and girls have been reached with gender-based violence (GBV) programmes, while close to 98,000 deliveries were safe. UNFPA also continued to support the empowerment of women, girls, and youth through its 116 specialized women and girls safe spaces and 22 youth centres. Moreover, a recent [impact assessment](#) of UNFPA's response to the Syria crisis across Syria, Jordan, Iraq, and Turkey showed that the vast majority of women and girls accessing UNFPA-supported health facilities and women and girls' safe spaces regard them as the only available lifelines within their communities with a unique set of services that are not available elsewhere.

More information on UNFPA's regional Syria response for 2021 can be found [here](#).

“ I do believe that we will come out of this stronger and more hopeful. I did not think so before, but I have learned to stay positive and take comfort from the people who are actively trying their best to help.

— AMIRA, a survivor of forced marriage from Aleppo, Syria



THE SYRIA CRISIS IN 2020

SITUATION OVERVIEW

By the end of 2020, the Syria crisis region, which spans the Whole of Syria, Turkey, Lebanon, Jordan, Iraq, and Egypt, continued to face a multitude of challenges, particularly in light of the recurrent waves of COVID-19 infections that surged worldwide during the winter season. A decade into this protracted crisis, the situation remains critical as the people in need continue to endure the cumulative effects of years of instability, now further exacerbated by the burgeoning impacts of an unrelenting pandemic and a far-reaching economic crisis.

Women and girls continue to shoulder the worst impacts of the crisis. Data from the field shows that gender-based violence in its various forms remains a daily reality in the lives of the women and girls, be it inside Syria or in host communities throughout the region. These forms of violence include restriction of movement, forced and early marriage, and family and domestic violence, which continue to be among the most common violations observed. Since the onset of COVID-19, these challenges have only worsened, placing the health, lives, and dignity of women and girls at further risk. Meanwhile, new and alarming trends observed in recent years, such as forced puberty and increases in sexual exploitation, continue to emerge, further demonstrating the extent to which the crisis has reshaped the social dynamics of countless Syrian and host communities.

COVID-19: A YEAR IN PERSPECTIVE

Across the region, there have been a total of 3,429,436 confirmed cases of COVID-19 as of December 31, 2020. The highest number of confirmed cases came from Turkey (2,208,652), followed by Iraq (595,291), Jordan (294,494), Lebanon (181,503), Egypt (138,062), and Syria (11,434).

Despite the relatively low number of confirmed cases in Syria, it is worth noting that the capacity for testing throughout the country remains extremely limited. Moreover, the steadily rising number of infections clearly shows that the epidemiological situation in the country has rapidly evolved and remains extremely volatile. According to the Syrian Ministry of Health (MoH), infections among healthcare workers in Syria continue to rise, which highlights the potential for the nation's already fragile and overstretched healthcare capacity to be further compromised. Humanitarian actors continue to receive reports that healthcare workers in some areas do not have sufficient personal protective equipment (PPE).

Meanwhile, the pandemic continues to exacerbate an ongoing economic crisis that has substantially increased humanitarian needs. An inter-agency socio-economic impact assessment of COVID-19 noted a major economic downturn and significant social impacts, amplified by the ongoing financial crisis in Lebanon. An estimated that 200,000 - 300,000 jobs were permanently lost, while the informal sector and businesses have been heavily impacted, with 15 percent of small and medium sized businesses reporting permanent closure. This is particularly relevant given that recent estimates suggest that 22.4 percent of households in Syria are headed by women, up from 4.4 percent in 2009. This means that over 4.5 million people are currently living in female-headed households (FHH), representing a highly vulnerable portion of the population.

UNFPA continues to work with key line ministries and implementing partners (IPs) to ensure continuity of SRH and GBV services, while ensuring that both health and social workers and beneficiaries are protected from COVID-19 and its ramifications.

Throughout the region, curfews, lockdowns, and movement restrictions continue to present challenges to response operations. Turkey, for example, has been under fluctuating social distancing and movement restriction requirements since the onset of the pandemic, with some regions faring better than others. The government is also considering wider-scale restrictions to stem the second wave of infections during the fall and winter seasons. In Lebanon, a spiralling economic crisis and a host of compounding crises – including the massive explosion that rocked the Beirut Port in August 2020 – has further destabilized the country, resulting in a surge of infections as well as other health and protection risks. The ripple effects of this also extended to reach Syria, as the devaluation of the Lebanese Lira has also contributed to the economic woes facing Syrians.

Jordan also saw a marked increase in the number of daily reported cases well into December, but numbers have since dropped and the country has adopted a careful re-opening strategy that will consistently take the epidemiological status into account to make rapid decisions. UNFPA Jordan continues to tailor its programmes accordingly, the priority being ensuring continuity of essential operations and expanding the availability of gender-based violence services while adhering to safety protocols.

Meanwhile, despite a continuing rise in infections across Iraq and the Kurdistan region, both governments have maintained a relaxed approach towards the restrictions previously imposed. UNFPA is working with the Government of Iraq and the Kurdistan Regional Government to ensure that essential services are still being provided, with particular focus being given to the reported rise in gender-based violence as movements are being restricted. The pandemic also continues to have an impact on operations in Egypt, despite the general slowdown in reported caseloads in recent months. The country has faced disruptions similar to those in neighbouring countries; however, UNFPA-supported facilities continue to offer services remotely and has maintained its partnership with the Ministry of Health and Population to support the national pandemic response.

Even in these circumstances, UNFPA remains committed to providing essential services in sexual and reproductive health and gender-based violence, and to reaching the Three Zeros of zero preventable maternal deaths, zero unmet need for contraception, and zero GBV and harmful practices. The UNFPA Regional Syria Response Hub has been closely coordinating with country offices in the region to ensure that response plans and priorities are clearly established. Continuity plans are being regularly updated as the situation evolves, and regular situation reports are being disseminated to all stakeholders.



TOTAL CONFIRMED CASES

As at December 31, 2020

SYRIA	TURKEY	LEBANON
11,434	2.21 MILLION	181,503
JORDAN	IRAQ	EGYPT
294,494	595,291	138,062

RESPONSE FROM ALL OPERATIONS

Delivering life-saving sexual and reproductive health and gender-based violence services to communities in need inside Syria and throughout the region.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
People reached with sexual / reproductive health services	1,995,824
Family planning consultations	828,351
Normal / assisted vaginal deliveries	35,744
C-Sections	17,443
Ante-natal care consultations	742,322
Post-natal care consultations	124,160
People trained on SRH-related topics	3,212

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
People reached with GBV programming / services	1,100,792
People reached with Dignity Kits	484,757
People provided with GBV case management	25,761
People reached with GBV awareness messages	936,236
People trained on GBV-related topics	5,027

YOUTH SERVICES

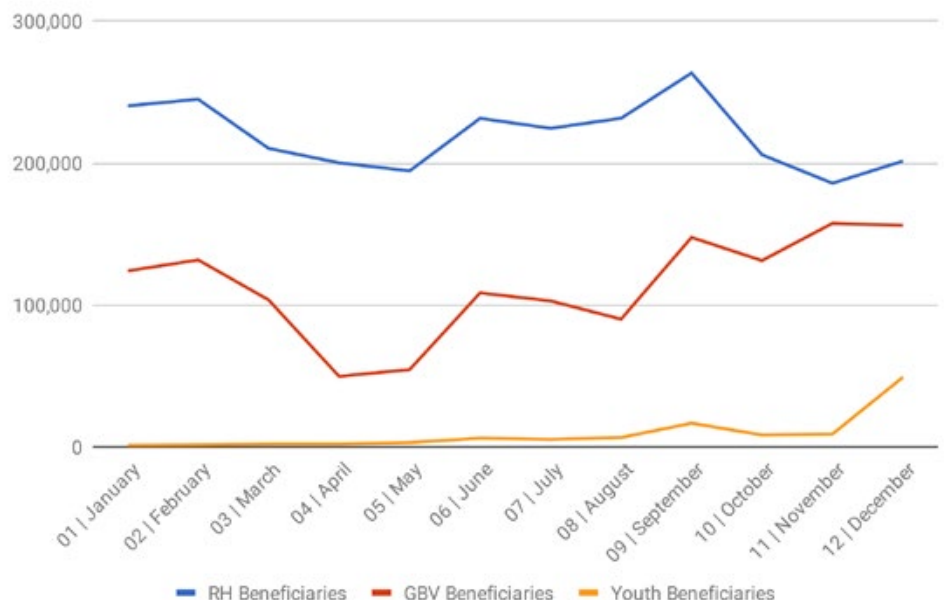
INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	109,268
People trained on youth-related topics	1,545



* 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.

THE YEAR AT A GLANCE



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. While the COVID-19 pandemic has significantly impacted UNFPA's operations in the field, efforts are ongoing to ensure that critical services are being delivered to people in need throughout the region.

Helping journalists fight gender-based violence, even during COVID-19

“This was definitely an engaging and informative discussion,” explains Wafa Zenati, a seasoned journalist from Jordan and one of the more than sixty from the Arab region to attend a series of virtual training webinars on the ethics of reporting on gender-based violence.

Organized by the UNFPA Regional Syria Response Hub (the hub) in partnership with UNFPA country offices in Iraq, Syria, Yemen, and Lebanon, the series of four webinars offered participating journalists an in-depth look into the fundamentals of gender-based violence, the challenges facing women and girls in humanitarian settings, the role of journalism in combating gender-based violence, and the principles of reporting on the issue without causing harm to survivors. The series builds on previous training programmes implemented by the hub since 2014, which have reached more than 700 journalists in direct training workshops and delivered a wide array of awareness products on the topic.

In 2020, efforts were made to transition these training programmes online in light of the COVID-19 pandemic, which — in addition to restricting the possibilities of in-person capacity building — also resulted in a considerable rise in the incidences of gender-based violence worldwide, particularly in communities where restrictions on movement for women and girls were already a serious protection threat.

“It is always more rewarding when you have the opportunity to talk to the experts on gender-based violence,” commented Mohammed Al-Hassani, one of the participating journalists from Yemen. “It was highly beneficial to understand some of the potential challenges a journalist can face when reporting in the field and to fully grasp the devastating consequences of unprofessional reporting.”

“ You can definitely feel the level of interest and engagement. I find that most journalists are eager to leverage their skills to combat gender inequality and amplify the voices of women and girls, particularly in conflict or humanitarian settings.

— SUZANNE AFANAH, a veteran journalist and media expert, who moderated several of UNFPA’s training programmes



WHOLE OF SYRIA RESPONSE

SYRIA COUNTRY OFFICE

Delivering emergency and long-term assistance to Syrian communities in need throughout the country.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
People reached with sexual / reproductive health services	1,478,385
Family planning consultations	734,896
Normal / assisted vaginal deliveries	10,423
C-Sections	10,274
Ante-natal care consultations	559,052
Post-natal care consultations	69,405
People trained on SRH-related topics	1,299

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
People reached with GBV programming / services	685,963
People reached with Dignity Kits	152,444
People provided with GBV case management	15,529
People reached with GBV awareness messages	744,373
People trained on GBV-related topics	878

YOUTH SERVICES

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	65,526



* 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 is ensuring that implementing partners' (IPs) staff members adhere to precautionary and preventive measures against COVID-19, by using personal protection equipment, including hand gloves and masks, and that the environments where services are delivered are properly sanitized. UNFPA continues coordination with the Ministry of Health (MoH), other key line ministries, and actively advocates for efforts to provide SRH services during COVID-19 pandemic. UNFPA Syria's response includes provision of maternal and reproductive health services for pregnant and lactating women, operation of women and girls safe spaces, distribution of SRH and dignity kits (both male and female), and community awareness raising and referrals to both RH and GBV services. UNFPA also continues to engage young people as partners and key agents of change and has been working hand in hand with IPs to support young people aiming to empower them to play vital roles in their communities during COVID-19 pandemic.

Two key areas of concern are rising rates of COVID-19 infections among healthcare workers, which threatens to further compromise the already strained healthcare system in the country, as well as the economic ramifications of the crisis. With a poverty rate at over 90 percent and a rise in the costs of staple goods, the economic crisis is further compounding health and protection risks among people in need.



Syrian women continue to defy impossible odds in the wake of economic collapse

Hundreds and hundreds of small businesses, which constitute the livelihood for thousands of families throughout Syria, vanishing within the span of a few years is rather difficult to imagine. But such is the reality that has befallen Syria after a decade of crisis, particularly in hard-hit areas like Aleppo, once considered the nation's unbridled economic hub. As 2020 comes to a close, the city suffers under the weight of years of instability, now culminating in the form of an unprecedented pandemic that is testing even its most resilient foundations.

Before the crisis, one of the most treasured crafts among the people of Aleppo was the making of natural perfumes; a profession typically reserved for men. For Rima, however, it has become more than a source of dignified living but a true calling that has reshaped the way she experiences her hometown as well as her outlook for the future.

We met Rima during a visit to the UNFPA-supported women and girls' safe space in Aleppo and had the privilege of discussing her profession with her. "I see the light despite the darkness that surrounds us," explains Rima, her words imbued with the resilience of a woman who has firsthand experienced the cruelty of conflict. "As women, we have a unique perspective on life and work, and we can bring that perspective into numerous skills and professions that have historically been dominated by men."

Over many years, Rima learned her craft by assisting her husband in his business. Before the crisis took hold in the country, his business was thriving, known throughout the city as one of the prime spots for quality perfumes that deftly combine traditional scents without shying away from experimentalism. She enjoyed her limited role but was quickly developing a passion for the craft. The worsening conditions around her meant there was little time and even fewer resources to pursue it further, particularly given the strenuous caretaking responsibilities she shouldered.

During one of the empowerment sessions at the safe space, Rima learned of the services provided by the Women's Support and Empowerment Center, one of UNFPA's implementing partners in the area. Once particular message made by the instructor had stuck with her. "She had spoken about how we all have the capacity to dream and work towards those dreams in spite of all odds. That stayed with me and deeply influenced how I thought about my future. Today, I am a proud shop owner. I rely on myself to support my family."

By the end of that training, Rima was already an entrepreneur at heart. Naturally, her success did not materialize overnight but was the result of arduous, unrelenting effort. She had the unique ability to approach the craft of perfume making as a seasoned mixologist who is deftly familiar with the individual scents and components available in her environment but who is capable of creating unique infusions that brought new life, new scents, and eventually new customers.

"For once, I felt like I was in control of my own destiny. I had a lot of information to work with and my passion was growing by the minute," she recalls. "They were also generous enough to help me register for a small business grant via another UN-supported programme, for which I was eventually accepted. From there, it was simply a matter of commitment and hard work, which I was more than happy to give."

Rima's journey is one that has been shared by countless women and girls throughout Syria, many of whom find themselves single heads of household with few resources in terms of viable income. As of late 2020, UNFPA has begun piloting cash and voucher assistance (CVA) programmes throughout the Syria crisis region in order to help women and girls in need secure viable income-generating opportunities, which in turn can help cultivate greater independence, empowerment, and resilience.

"For once, I felt like I was in control of my own destiny. Today, I am a proud shop owner. I rely on myself to support my family."

— KHADIJA, who attended vocational training courses at a UNFPA-supported facility

CROSS-BORDER TURKEY

Ensuring that all communities inside Syria have access to quality sexual and reproductive health and gender-based violence services.

Armed activity has continued to impact communities across northwest Syria, especially in areas near the M4 and M5 highways in Idlib governorate. With some 400,000 people living along the M4 and M5 highways, any escalation would have devastating humanitarian consequences. The security situation is further undermined by the prevalence of explosive hazards and in-fighting between non-state armed groups, which has continued to take its toll on civilian life. Targeted attacks against non-combatants have also been reported, including of a journalist reportedly shot dead in Al Bab in northern Aleppo governorate on 12 December. In another IED incident in Jandairs (northern Aleppo), a humanitarian worker was also injured – the seventh humanitarian to be injured in northwest Syria in the last three months, a period that also saw the deaths of six other aid workers (OCHA sitrep no. 23 – December, 2020).

The distribution of dignity kits to 3,735 women and girls in December has continued to provide an effective entry point to the provision of other life-saving GBV services. The content of the dignity kit has been updated and tailored to the current needs on the ground in light of COVID-19 and now includes hand sanitizers and bleach. With a focus on mental health, the SRH Working Group has devised a perinatal depression programme, which will be rolled out to 460 midwives in northwest Syria through a 'training of trainers' approach in which 20 persons were targeted in December.

REPRODUCTIVE HEALTH

INDICATOR

	SINCE JANUARY
Primary health facilities	17
Health facilities that provide Emergency Obstetric Care (EmOC)	16
Functional mobile clinics	10
People reached with sexual/reproductive health services	230,979
Family planning consultations	48,548
Normal / assisted vaginal deliveries	22,667
C-Sections	6,683
Ante-natal care consultations	135,067
Post-natal care consultations	45,772
People trained on SRH-related topics	538

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	18
People reached with GBV programming / services	203,512
People reached with Dignity Kits	288,327
People provided with GBV case management	1,096
People reached with GBV awareness messages	109,585
People trained on GBV-related topics	2,040

Reported COVID-19 cases continue to steadily rise in northwest Syria, with a total number of 20,204 reported cases and 308 registered deaths at the end of December 2020. Enhanced measures including telemedicine have contributed substantially to limiting unnecessary crowding at SRH service delivery points. Life-saving and life-sustaining GBV services have continued to be provided to women and girls with strict adherence to COVID-19 infection prevention and control measures. Awareness raising on COVID-19-related risks and safeguards have widely persisted through both online and offline media in tandem with GBV prevention and response services. UNFPA implementing partners have continued to use social media platforms, such as WhatsApp, to continue to engage a high number of persons and groups through interactive GBV awareness raising sessions.



Case Study: Cash and Voucher Assistance in Northwest Syria.

As part of its humanitarian programming in northwest Syria through cross-border operations managed from Turkey, UNFPA provided one-off, unconditional, individual cash disbursements to 10,074 vulnerable Internally Displaced Persons (IDPs) to cover the costs of their most urgent and vital needs. The project comes as part of a larger cash and voucher assistance (CVA) programme being piloted in several countries within the Syria crisis response.


In early 2020, UNFPA decided to scale up its assistance to provide programming for the most vulnerable with the aim to reduce overall protection risks. Assistance was delivered through four of UNFPA implementing partners between April and September 2020. Overall, the project was considered relevant and effective as transactional costs were minimal and the women and men who received the assistance were given full agency to determine what their immediate needs were.

Cash vouchers, which were immediately converted to cash, were distributed via local implementing partners (IPs). Recipients of cash assistance were identified by IPs and local councils according to specific vulnerability criteria set by UNFPA. In some cases, eligibility was cross-checked via door-to-door visits to avoid fraud. Post-distribution monitoring results confirmed that funds were mostly used by recipients for health, shelter, food, and legal services.

The one-off cash assistance also served as an effective entry point to provide recipients with relevant information on available services in the respective areas, including protection and GBV specialized services. Female staff and protection staff were integrated into distribution teams, which served by design to also offer recipients psychological first aid and referrals. Given the broad protection objective of the intervention, including but not limited to GBV prevention, specific indicators will be explored to measure the various protection outcomes of ongoing cash interventions of this nature.

Given the persistent and dire humanitarian needs in northwest Syria, UNFPA and its partners agreed to implement a second round of cash assistance in 2021. The second cash project is anchored in lessons learned and best practices, such as including vulnerable members of the host populations as recipients in an effort to contribute to social cohesion.

UNFPA Turkey Cross Border Programme Team and the UNFPA Humanitarian Office in Geneva have partnered to launch a case study highlighting the rationale and impact of this initiative, which can be found [here](#).



” In early 2020, UNFPA decided to scale up its assistance to provide programming for the most vulnerable with the objective of reducing overall protection risks.

Leaving no one behind.

"One day, the bombing in Idleb was very intense and my home was hit with incoming shelling. As a result, I lost my hearing. The security situation only got worse and I had to flee with my four children to a camp where we now live in a tent. I tried to look for work, but it was very difficult due to my hearing disability. When I finally found something, my employer took advantage of my disability and paid me less than the other workers. Through a neighbour, I learned of a 'Women and Girls Safe Space' where they offered help.

"I visited one day and was introduced to a case manager who gave me psychosocial support. I was also referred to their medical services where I was given a hearing device. All of this help improved my physical and mental health. At the centre, I also received vocational training and learnt how to sew. I was given sewing materials to start my own project, which helped me gain financial independence. I was no longer forced to be exploited by my former employer.

"The centre helped me regain my self-confidence and I became stronger and better able to protect myself and my children. I am very proud of myself – and I am now free through my work."

— Yara, a 40-year-old displaced woman from Idleb, northwestern Syria

“ I tried to look for work, but it was very difficult due to my hearing disability.

— YARA, an internally displaced woman from Idleb, Syria

EGYPT COUNTRY OFFICE

UNFPA Egypt continues to provide assistance to Syrian refugees in the country, focusing on issues related to gender-based violence.

Egypt remains one of the countries most impacted by COVID-19 in the region, with close to 138,062 cases reported by end of December. The restrictions on movement placed during the early months of the pandemic have since eased, however the epidemiological status of the country remains unpredictable. These measures had forced extended though temporary disruptions in various facilities supported by UNFPA, including women and girls' safe spaces.

However, these facilities continue to offer the life-saving package of care and case management services remotely and by meeting survivors in emergencies. A total of 13 UNFPA-supported WGSS are still open at a limited capacity that offer only the essential GBV case management service. SRH services are still operational as part of the key partnership with the Ministry of Health and Population.

The Government of Egypt has launched an adaptation plan that includes re-opening of youth centres and facilities to the communities, taking into consideration COVID-19 preventive measures of social distancing, using face coverings, and practicing hand hygiene. UNFPA Egypt developed a plan to progress towards partial phase-based re-opening of the youth centres that are hosting UNFPA safe spaces in 5 governorates, offering integrated GBV and SRH services to women and girls from the Syrian community.

REPRODUCTIVE HEALTH

INDICATOR

	SINCE JANUARY
Functional mobile clinics	2
People reached with sexual / reproductive health services	4,836
Family planning consultations	168
People trained on SRH-related topics	5

GENDER-BASED VIOLENCE

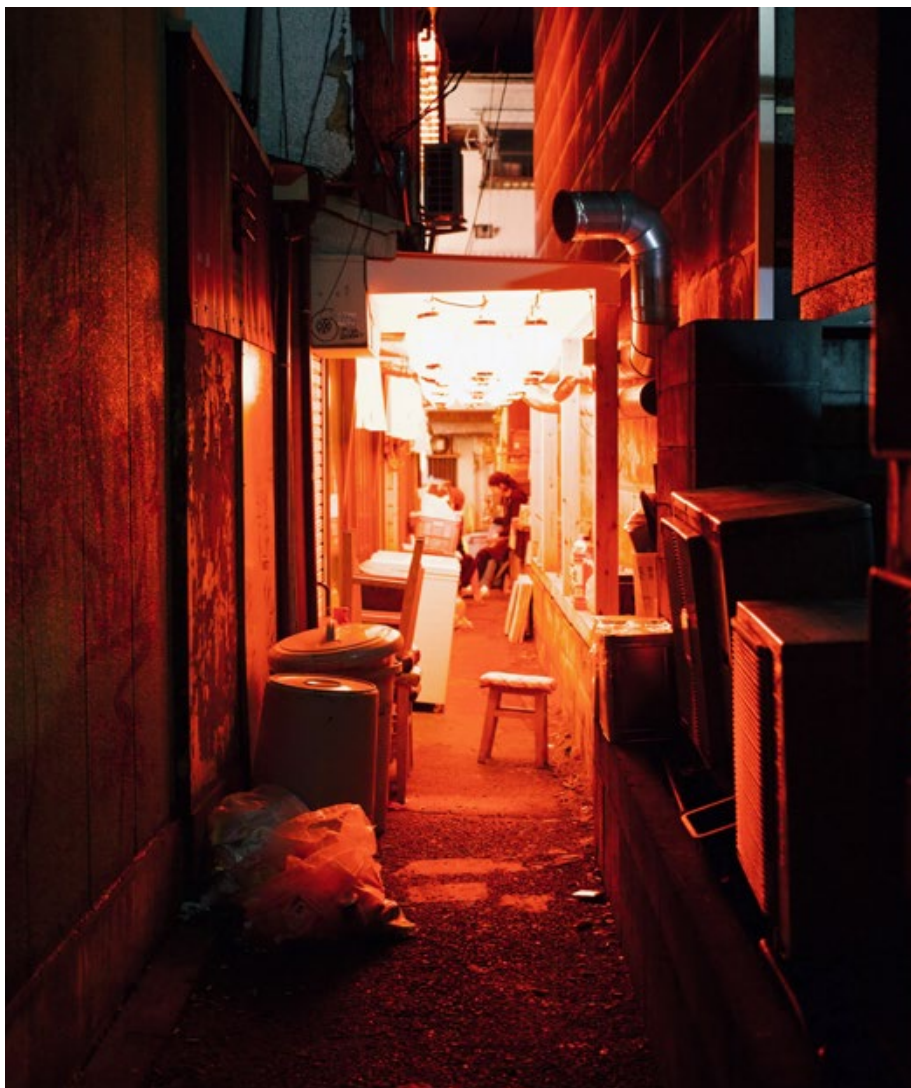
INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	13
People reached with Dignity Kits	18,268
People reached with GBV programming / services	5,875
People provided with GBV case management	3,982
People reached with GBV awareness messages	4,530
People trained on GBV-related topics	57

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Beneficiaries reached with youth programming	498



COUNTRY OVERVIEW

IRAQ COUNTRY OFFICE

UNFPA Iraq continues to provide essential support to more than 245,000 Syrians currently taking refuge in the country.

Iraq reported its first case of COVID-19 on 24 February 2020. As of late December 2020, the country is among those worst hit by the pandemic, with a total of 595,291 cases. According to the Ministry of Health and the WHO, nearly half of cases reported are women, the largest age bracket testing positive for COVID-19 is 30-39 years, and the largest number of deaths reported is for patients between 60-69 years old.

Despite a continuing rise in infections across Iraq and the Kurdistan region, both governments have relaxed the restrictions previously imposed. While UNFPA-supported sexual and reproductive health and gender-based violence facilities continue to offer services in most areas, gender-based violence is nonetheless believed to be increasing due to higher tensions in households as a result of confinement, posing new risks and potentially fuelling pre-existing forms of gender-based violence, particularly violence in the home perpetrated by intimate partners or other family members. UNFPA is working with the Government of Iraq and the Kurdistan Regional Government to ensure that essential services are still being provided.

UNFPA, in collaboration with WHO, continues to support the Ministry of Health in the development of national guidelines for the management COVID-19 during pregnancy and childbirth. UNFPA also continues to support the Ministry of Health with the online training of health service providers, midwives, nurses, and doctors on the mitigation measures in the delivery rooms and reproductive health clinics in response to COVID-19 pandemic.

REPRODUCTIVE HEALTH

INDICATOR

SINCE JANUARY

Primary health facilities	4
Health facilities that provide Emergency Obstetric Care (EmOC)	1
People reached with sexual / reproductive health services	73,499
Family planning consultations	6,549
Normal / assisted vaginal deliveries	1,289
C-Sections	486
Ante-natal care consultations	11,796
Post-natal care consultations	3,536
People trained on SRH-related topics	485

GENDER-BASED VIOLENCE

INDICATOR

SINCE JANUARY

Number of women and girls' safe spaces (WGSS)	4
People reached with GBV programming / services	16,415
People reached with Dignity Kits	9,368
People provided with GBV case management	363
People reached with GBV awareness messages	15,511

YOUTH SERVICES

INDICATOR

SINCE JANUARY

Number of functional youth centres	1
Beneficiaries reached with youth programming	26,470



JORDAN COUNTRY OFFICE

With 1.3 million Syrians nationwide, UNFPA Jordan continues to provide essential services to refugees and host communities nationwide.

Jordan also saw a marked increase in the number of daily reported cases well into December, but numbers have since dropped and the country has adopted a careful re-opening strategy that will consistently take the epidemiological status into account to make rapid decisions. UNFPA Jordan continues to tailor its programmes accordingly, the priority being ensuring continuity of essential operations and expanding the availability of gender-based violence services while adhering to safety protocols.

In December, UNFPA Jordan country office has embarked on a cash and voucher assistance (CVA) approach as part of its GBV response programming, which will strengthen the continuity of service delivery in a flexible and more dignified manner, aimed at building the resilience of the targeted vulnerable population across different governorates of Jordan. In September 2020, UNFPA recruited a consultant to support in designing programme for cash and voucher assistance within the gender based violence programme and SRH. The consultant worked on a concrete plan for the country office outlining key programmatic steps and proposed operational decisions.

REPRODUCTIVE HEALTH

INDICATOR

	SINCE JANUARY
Number of primary health facilities	16
Health facilities that provide Emergency Obstetric Care (EmOC)	1
Functional mobile clinics	4
People reached with sexual / reproductive health services	116,333
Family planning consultations	33,773
Normal / assisted vaginal deliveries	1,365
Ante-natal care consultations	33,162
Post-natal care consultations	4,457
People trained on SRH-related topics	61

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	19
People reached with GBV programming / services	49,601
People reached with Dignity Kits	2,754
People provided with GBV case management	4,444
People reached with GBV awareness messages	29,261
People trained on GBV-related topics	99

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Beneficiaries reached with youth programming	10,624
Number of functional youth centres	1
People trained on youth-related topics	233



The courage to break free.

"I feel like a bird who broke free from its cage," explains Laila, 30, a mother of seven. "Every time we used to reach a certain point, we'd adapt, and then something else would happen to mess up our lives."

Originally from Al Ghouta, a suburban area in southwestern Syria that has been devastated by almost ten years conflict, Laila spent years moving between villages as war raged around them. Eventually, she decided it was simply too dangerous to stay. In 2014, she left her home country and made it to Za'atari refugee camp in Jordan with her husband, two sons, and five daughters. But danger was to follow her into the camp.

"My husband used to abuse me," recalls Laila, who was just 13 years old when she was forced to marry. After moving to Za'atari, the abuse continued, eventually forcing her to decide to pursue a divorce.

In 2019, while the divorce was in process, Laila's husband was transferred to a different refugee camp, Azraq, which is closer to the Syrian border. Laila and her family were taken to an area within the camp known as Village Five. This area has rows of soulless metal shelters behind barbed wire. People in this part of the refugee camp are not allowed to leave, not even to meet family members outside. Living in such confinement, a deep depression hit Laila as she thought about all she'd been through. She sealed herself off from the outside world and wouldn't leave the caravan or talk to anyone. During this challenging time, she started to work as a cleaner at a UNFPA-supported women and girls' safe space. It was there that she met Arouba, an IRC counsellor, who was full of energy and positivity.

"I met Arouba and I immediately started to take psychosocial support individual sessions with her," Laila says. "I was excited to go to sessions more than anything. The team were very helpful. Before the sessions, I was unable to provide anything to my children, but now I could raise 20 children!" says Laila. "I came out stronger than ever. I feel like a bird who broke free from its cage."

Laila never got the opportunity to study herself and places great value on it for her children. "I want my children to complete their studies. They should never leave school to get married. It would feel like heaven to see them successful."

Today, Laila is working on becoming a tailor and has been taking sewing lessons at the centre. Laila's children also received psychosocial support at the women's centre to help them get through this difficult time in their life.

"I want to gain a profession to be able to take care of my family," says Laila, her eyes beaming with pride. "My children are more open to life now. They've started thinking of their future. Asma, my 16-year-old, wants to become a chef and to open her own restaurant. Salam, my 10-year-old, wants to become a hairdresser. I am ready to help them achieve their dreams."

“ Every time we used to reach a certain point, we'd adapt, and then something else would happen to mess up our lives.

— LAILA, who received training and support a UNFPA-supported safe space

LEBANON COUNTRY OFFICE

Despite the escalating political and economic instabilities in Lebanon, UNFPA will continue to provide life-saving services to people in need.

Lebanon continues to grapple with a wide array of issues, including the aftermath of the Beirut Port explosion and an economy on the verge of collapse. These have created yet another large-scale crisis in a country that is in the midst of a serious surge in COVID-19 cases. In recent months, economic contraction, increasing poverty, and rising prices of staples have compounded needs among both Lebanese and non-Lebanese communities, including the approximately 1.5 million refugees being hosted in the country — the highest refugee population per capita in any country.

UNFPA has activated its own emergency response plan to the crisis, working to ensure that the SRH and GBV needs of those impacted are met. Plans are ongoing to integrate cash and voucher assistance into the response to facilitate access to SRH services and to contribute to GBV prevention and response.

UNFPA is urgently [appealing for US\\$ 19.65 million](#) to provide life-saving assistance and meet the emerging needs of those impacted by this crisis.

REPRODUCTIVE HEALTH

INDICATOR

	SINCE JANUARY
Number of primary health facilities	3
Health facilities that provide Emergency Obstetric Care (EmOC)	1
People reached with sexual / reproductive health services	24,870
Family planning consultations	4,076
Normal / assisted vaginal deliveries	5
Ante-natal care consultations	1,141
Post-natal care consultations	324
People trained on SRH-related topics	261

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	6
People reached with GBV programming / services	1,884
People reached with Dignity Kits	10,467
People provided with GBV case management	144
People reached with GBV awareness messages	22,590
People trained on GBV-related topics	188

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Number of functional youth centres	2
Beneficiaries reached with youth programming	1,278



TURKEY COUNTRY OFFICE

With the largest number of refugees worldwide, UNFPA Turkey continues to provide much needed assistance to displaced Syrians throughout the country.

The COVID-19 outbreak in Turkey began with the first reported case on 11 March 2020, and has increased to more than 2.2 million cases as of 31 December. The country has been under social distancing and movement restriction requirements from March 2020, which have resulted in business closures and challenges in accessing essential services.

UNFPA Turkey has been supporting a total of six WGSSs in 2020 specifically targeting Syrian refugees. Due to the COVID-19 outbreak, some adjustments have been made in the modality of service provision in all six centres. While service provision has continued, three WGSSs (two in Hatay and one in Sanliurfa), which are integrated to the Migrant Health Centres of the MoH, continued providing services physically from the centres; while the other three in Istanbul, Eskisehir, and Diyarbakir have been telecommuting for two months.

Since the outbreak started in Turkey, UNFPA Turkey's service providers prioritized awareness raising activities on COVID-19 among beneficiaries through regular information sharing, primarily via phone. UNFPA has also started conducting bi-weekly online supervision and coordination meetings for personnel of the six WGSSs as well as IP managers to enable experience and information sharing between all partners and strengthen their capacities for better service provision during the outbreak.

REPRODUCTIVE HEALTH

INDICATOR

	SINCE JANUARY
Number of primary health facilities	6
People reached with sexual/reproductive health services	75,423
Family planning consultations	1,527
Ante-natal care consultations	1,678
Post-natal care consultations	446
People trained on SRH-related topics	781

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	6
People reached with GBV programming / services	122,711
People reached with dignity kits	32,166
People provided with GBV case management	295
People reached with GBV awareness messages	24,922
People trained on GBV-related topics	1,936

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Number of functional youth centres	4
People reached with youth programming	10,040
People trained on youth-related topics	119

OTHER SERVICES

INDICATOR

	SINCE JANUARY
Number of social service centers (SSC)	27
Number of Key Refugee Service Units (KRG)	9
Number of functional mobile clinics	12



COORDINATION UPDATES

UNFPA continues to lead the GBV Area of Responsibility, 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.

Through its Damascus-based operation, UNFPA is the main lead, while in its Turkey Cross Border operation UNFPA co-leads with Global Communities. In the 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.

In December, the WoS GBV AoR published the 2020 WoS GBV dashboard, covering the period between January and September 2020, which will be updated on a monthly basis. This is based on 4Ws reporting of GBV actors at WoS level. In the framework of the 16 Days of Activism, the WoS GBV AoR worked towards the publication of the Joint Statement by Muhannad Hadi, Regional Humanitarian Coordinator for the Syria Crisis, and Luay Shabaneh, UNFPA Regional Director on 16 Days of Activism. Moreover, the GBV AoR organized events marking 16 Days of Activism against GBV in Syria, in Turkey cross-border (TXB) and northeast Syria. Activities served as an opportunity to engage with women, girls, boys and men across Syria, amplify their voices, and jointly promote actions against GBV. Moreover, the WoS GBV AoR also translated the draft of the 2021 *Voices from Syria* report into Arabic and initiated the final design. In the framework of the Humanitarian Programme Cycle, the WoS GBV AoR started developing the Humanitarian Needs Overview (HNO) chapter.

In Syria, the GBV AoR and its partners organized a campaign marking the 16 Days of Activism. Leveraging the power of social media, activities provided opportunities for engaging women, girls, boys, and men across Syria in the hope of amplifying their voices and joining the global call against GBV. With support from UNFPA, the GBV AoR also organized an online training programme for all sectors on IASC guidelines for Integrating GBV in Humanitarian actions. Key outcome of the training was the development of sector specific action plan to reduce GBV-related risks in responses. Lastly, the GBV AoR participated in a multi-sector needs assessment data analysis workshop in preparations for the HNO 2021, the COVID-19 Protection Sector survey, and the national Joint Protection meeting, and held a number of GBV Working Group meetings at sub-national levels.

In Jordan, UNFPA co-organized an online refresher training on collecting and managing GBV data using the GBV information management system (GBV IMS) in a sensitive manner, in line with safety and security guiding principles. The GBV IMS taskforce organizes a yearly round of trainings and refreshers to ensure that newly recruited staff have the skills to safely manage GBV data and to refresh the knowledge of previously trained staff.

In Turkey, the South-East Turkey (SET) GBV Sub-Working Group meeting was co-chaired by UNFPA on 9 December, with the agenda composed of GBV programming updates from the members, a report from KRG training, UNHCR's new GBV policy, and a revision of the 2020 workplan. Meanwhile, the UNFPA preventing sexual exploitation and abuse (PSEA) Country Focal Point facilitated the PSEA network meeting on UN personnel's Standards of Conduct and Behaviour, which included updates on other efforts by UN agencies. Lastly, the Syria Task Force meeting was attended on 3 December, with a focus on gender mainstreaming, the social cohesion framework, and Regional Refugee and Resilience Plan (3RP) planning.



DONORS AND PARTNERS

The essential services being delivered to Syrians region-wide would not have been possible without the generous support of our donors and partners.

CURRENT DONORS

Australia, Bulgaria, Canada, Denmark, The European Commission, Finland, France, Iceland, Italy, Japan, Republic of Korea, the Russian Federation, Norway, Spain, Sweden, Switzerland, and the United Kingdom.

United Nations: OCHA/CERF, UNDP, SCHF, and UNFPA Emergency Funds.

IMPLEMENTING PARTNERS

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, Amel Association, Al Mithaq, Akkarouna, ABAAD.

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: UNHCR, Ministry of Health and Population (MOHP), Ministry of Youth and Sports (MoYS), Etijah, Care International.

In Turkey: The Disaster and Emergency Management Presidency (AFAD) of the Prime Ministry of Turkey; Ministry of Foreign Affairs (MoFA); Ministry of Health (MoH); Ministry of Labour, Social Services and Family; ASAM (Association for Solidarity with Asylum Seekers and Migrants); KAMER (Women's Center Foundation); Osmangazi University; Harran University; YAHA (Youth Approaches to Health Association); PYD (Positive Life Association); Red Umbrella; Bilgi University.

Turkey Cross-Border: Syria Relief and Development (SRD), Syrian American Medical Society (SAMS), Syrian Expatriate Medical Association (SEMA), Ihsan for Relief and Development (IhsanRD), Shafak, and their sub-implementing partners Masratt (Ihsan), Maram (SAMS), Women's Support Association (SEMA) and Hope Revival Organization (HRO) (SEMA).

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RELEVANT RESOURCES

www.unfpa.org
www.ocha.org
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