

## Format for the Country Programme Performance Summary

This format is mandatory to be submitted to the Executive Board (EB) alongside the Country Programme Documents (CPDs). The summary format should factor in all evaluative evidence, such as the latest country programme evaluation, and will be posted together with other mandatory documents for access by the Executive Board.

<b>A. Country Information</b>		
<b>Country name: SYRIAN ARAB REPUBLIC</b>		
<b>Category per decision 2016/01:Orange</b>	<b>Current programme period: 2016-2017 (extended to 2020)</b>	<b>Cycle of assistance: 8th</b>

<b>B. Country Programme Outputs Achievement</b> <i>(please complete for all your CP outputs)</i>			
<b>Output 1.1: Increased capacity of the health system to deliver quality integrated reproductive health services, particularly for the people affected by the crisis, including host communities and displaced population, with a special focus on young people</b>			
<b>Indicators</b>	<b>Baseline 2015</b>	<b>Target 2018</b>	<b>End-line data 2020</b>
<ul style="list-style-type: none"> <li>Number of maternal health centers supported to provide basic emergency obstetric and newborn care services in accordance with established protocols</li> </ul>	12	18	17
<ul style="list-style-type: none"> <li>Number of health facilities supported with reproductive health equipment, medicines and commodities</li> </ul>	200	300	1038 <sup>1</sup>
<ul style="list-style-type: none"> <li>Number of health workers trained to deliver RH services including emergency obstetric and newborn care</li> </ul>	80	160	8104
<ul style="list-style-type: none"> <li>Number of women receiving reproductive health services (including antenatal and postnatal care, emergency obstetric and newborn care and family planning services)</li> </ul>	650,000	1,000,000	5,101,354 <sup>2</sup>
<b>Key Achievements</b> <i>(input also from the last CP evaluation)</i>			

<sup>1</sup> 84 facilities for NGOs fully supported by UNFPA. the other 954 are partially supported through MOH and MOHE

<sup>2</sup>UNFPA Syria Country office Annual reports 2016-2017-2018-2019.

UNFPA continuously worked to increase capacity of the health system to deliver quality integrated reproductive health (RH) services<sup>3</sup>, particularly for the people affected by the crisis including host communities and displaced populations with a special focus on women and adolescent girls and also including men and boys.

The Country office through its implementing partners provided life-saving SRH equipment and supplies to primary health facilities and hospitals, conducted awareness raising sessions and campaigns, and built capacity of SRH professionals in relevant topics such as using the Health Management Information System, antenatal care, pap smear, colposcopy, breast screening and mammography image reading. In addition, through outreach and static clinics UNFPA ensured the provision of several services, focusing on the most vulnerable women, adolescent girls, IDPs and returnees.

During the 8<sup>th</sup> cycle of its program, UNFPA Syria country office reached 5,101,354 women with SRH services including antenatal and postnatal care, emergency obstetric and newborn care, and family planning.

- 84 NGO health facilities supported with reproductive health equipment, medicines and commodities.
- 27 maternal health centers were supported to provide basic emergency obstetric and newborn care services in accordance with established protocols.
- To ensure high quality of the services provision, 8,104 health workers were trained to deliver RH services including emergency obstetric and newborn care.
- The results of the Country program evaluation confirmed that the RH services and support provided by UNFPA is very relevant to the beneficiaries<sup>4</sup>.

**Output 3.1: Strengthened capacity of implementing partners to prevent and respond to gender-based violence, with a special focus on vulnerable women in humanitarian settings.**

Indicators	Baseline 2015	Target 2018	End-line data 2020
● Number of facilities (safe spaces, clinics, facilities providing psychosocial services) supported to provide comprehensive gender-based violence prevention and response services.	7	14	54
● Number of professionals trained on clinical management of rape.	8	20	41

<sup>3</sup> Those services included Family planning (FP); Prevention, treatment and care for STIs; Basic Emergency Obstetric Care (BEmOC); Comprehensive Obstetric Care (CEmOC); Ante Natal Care (ANC), Post Natal Care (PNC); Health education and counselling and early cancer detection.

<sup>4</sup> UNFPA Syria Country program evaluation report page 35.

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**Key Achievements** *(input also from the last CP evaluation)*

During 2016-2020, UNFPA Syria Country Office expanded the provision of the GBV services in the 13 governorates by supporting 54 facilities including: 48 WGSSs, 3 Community Wellbeing Centers (CWC), the Family Protection Unit (FPU) and 2 EWGSSs in the camps (Areesha and Al Hole) to provide comprehensive gender-based violence prevention and response services.

Through UNFPA implementing partners, The CP reached around 1,253,400 women, girls and 81,800 men and boys with the essential high quality GBV services, awareness raising on SRH and GBV topics including SRH, Protection from Sexual Exploitation and Abuse (PSEA) and early marriage.

Annually, UNFPA GBV implementing partners conduct at least three awareness campaigns including; International Women Day, early marriage and 16 days of Activism against GBV. The IPs use different communication methods to send GBV messages including: direct awareness sessions, interviews about the community perceptions, brochures, interactive theatres, marathons, bazaars from products made by women and in girls in Women and Girls' Safe Spaces WGSS', among other activities. The awareness sessions/ campaigns have significantly contributed to increased knowledge of GBV and how to prevent and respond to it.

- 606,118 dignity kits have been procured and distributed including female dignity kits, winterized and non-winterized protection kits, male dignity kits, pregnant and lactating women kits, and adolescent girls' kits, in addition to 789,891 Sanitary, the dignity kits were distributed through the GBV IPs targeting mainly the IDPs in the camps and shelters in NES mainly Hassakeh, Raqqa, Deir-ez-zour and Idlib through Hama governorates.
- 9,590 service providers were trained on GBV basics, PSS and Clinical Management of Rape (CMR) to enhance their capacity and to ensure high quality of services provided to people in need. Evidence from secondary data from a wide range of reports and project documents as well as feedback from the interviews conducted with government representatives and other UN agencies showed that the UNFPA CO in its endeavors to provide quality of GBV services took the lead in training different GBV actors inside Syria<sup>5</sup>.
- In 2018 UNFPA convened 18 dedicated GBV sub-sector technical working group meetings in Damascus, Homs and Aleppo and 10 joint Protection sector meetings.
- In cooperation with Syrian Commission for Family and Population Affairs (SCFAP), capacity building for government and NGOs professionals in all in CEDAW reporting. (trained 84) in addition to awareness raising regarding CEDAW for media personnel (60 persons in all).
- A number of activities were conducted under the population and development thematic area, including: building the capacity of the Central Bureau of Statistics as well conducting surveys, together with other UN agencies. The capacity building of the CBS included capacity development for its management and staff in census management, sample design, statistical analysis and in ICPD@2014 based SDG indicators.
- UNFPA conducted training events to develop the capacity of 50 CBS staff from the population statistical unit and Economic statistical unit on sample design and on Missing data.

Three Population Policy documents for three governorates have been finalized and approved along with targeted programmes in line with ICPDb2014 and the humanitarian context.

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**Output 3.2: Strengthened capacity of community leaders and young people to advocate against gender-based violence, including child, early and forced marriage**

Indicators	Baseline 2015	Target 2018	End-line data 2020
● Number of community awareness raising campaigns that promote gender equality and addressing gender-based violence	5	10	16
● Number of specialized non-governmental organizations and associations that are active in community mobilization to combat child marriage and gender-based violence	4	8	36
● Number of youth-targeted awareness campaigns addressing the issue of child, early and forced marriage	0	2	22

**Key Achievements** (input also from the last CP evaluation)

In the current programme period; 2016-2020, UNFPA Syria country office worked with 10 implementing partners to develop the capacity of approximately 10,122 young people to address, early / child marriage at community level. Campaigns, educational sessions, games, festivals, theatre shows aiming to empower Young people and to promote social cohesion and peace building were undertaken during the period. The activities were carried out in 9 governorates in the country outreaching more than 534,727 young people.

- More than 96 youth-led initiatives were supported by UNFPA implementing partners to address RH and GBV issues at community level. A total of 232 financial grants were provided to young people, including adolescent girls to improve their livelihood and resilience.
- 11 youth friendly spaces were rehabilitated and supported to create a space for young people to meet, plan their activities and create awareness to their peers on RH and GBV.
- 543,727 young people were reached through awareness raising on GBV and RH, life skills training and grants. The results of the country program evaluation reveal that respondents who participated in youth trainings reported very high levels of satisfaction with the training programme<sup>6</sup>.
- As part of the youth program interventions, training of university professors in Aleppo on RH/GBV on communicating relevant messages to young people in universities took place during this period.
- In addition, 94 DOSA staff were trained on GBV topics such as: GBV basics, case management, risk mitigation and mainstreaming in Aleppo governorate. UNFPA is planning to extend these trainings to reach and improve access of young people to the needed information through different and reliable channels.
- UNFPA has also strengthened the Y-PEER network membership after reactivating it 2016, the YPEERs members reached 517 Y-PEERs covering 8 governorates: Damascus, Rural Damascus, Homs, Hama, Aleppo, Lattakia, Tartous and Hasakeh. The Y-PEERs supported interventions and conducted awareness raising, life skills education and civic engagement activities.

<sup>6</sup> UNFPA Syria Country program evaluation report page.52

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- In order to increase peer to peer support and knowledge sharing, UNFPA launched two new interventions; one related to the mother to mother initiative focusing on promoting dialogue between mothers and adolescent girls as well as peer mothers to talk about puberty, adolescent reproductive health, family planning and early marriage.
  - The youth programme also introduced psychosocial support (PSS) for young people including: individual and group counseling and recreational activities which helped them to mitigate challenges faced by young people in the Syrian context.
  - UNFPA currently co-chairs the UN Youth Task Force with UNICEF, the aim of the youth task force is to ensure that youth priorities are identified and addressed. In addition, the youth programme is also representing UNFPA in the early recovery and livelihood sector.

C. National Progress on Strategic Plan Outcomes <sup>7</sup>	Start value	Year	End value	Year	Comments
<b>Outcome 1: Every woman, adolescent and youth everywhere, especially those furthest behind, has utilized integrated sexual and reproductive health services and exercised reproductive rights, free of coercion, discrimination and violence</b>					
<ul style="list-style-type: none"> <li>• Proportion of births attended by skilled health personnel</li> </ul>	0.50	2016	0.98 <sup>8</sup>	2020	
<ul style="list-style-type: none"> <li>• Contraceptive Prevalence Rate (for all methods)</li> </ul>	0.36	2016	0.60 <sup>9</sup>	2020	In 2020, UNFPA in cooperation with MOH will review data for the last 4 years aiming to report to this indicator
<p><b><u>Summary of National Progress</u></b></p> <p>During the 8th CPD, UNFPA Syria country office (CO) in cooperation with implementing partners focused on capacity development, service delivery, and knowledge management. While the CO was focusing on the realization of the three transformative results, namely: <i>zero preventable maternal mortality, zero unmet needs for family planning, and zero Gender based violence including child marriage</i>, great focus was also on the delivery of lifesaving sexual and reproductive health services and comprehensive GBV prevention and response. As such, UNFPA Syria country office supported national partners to provide reproductive health services, including outreach services with a focus on the most vulnerable locations and the national health priorities.</p> <p>UNFPA reached the most vulnerable provinces in all Syrian governorates and increased the capacity of the national health system through rehabilitation of health facilities and provision of essential equipment, medicines and supplies. Moreover, UNFPA CO assisted in the capacity building for health workers and community workers, supporting the national reproductive health working group, coordination with key ministries such as the Ministry of Health, Ministry of Higher Education, Ministry of Education, Ministry of Awqaf<sup>10</sup>, Ministry of Information and Ministry of Social and Labor Affairs and Investment in NGOs, in order to fill the gap in needs including; health, gender, youth activities.</p>					

<sup>7</sup>The format is aligned to the UNFPA Strategic Plan outcomes, 2018-2021.

<sup>8</sup> MOH data based on the Social demographic survey 2018

<sup>9</sup> MOH data based on the Social demographic survey 2018

<sup>10</sup> Religious endowments

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**UNFPA's Contributions** *Please provide contributions to those outcomes only to which the CP contributed. Not all outcome areas are expected to be covered under UNFPA contributions.*

- During this period, UNFPA Syria CO procured contraceptive methods including condoms to ensure access to family planning in RH supported facilities to be distributed to women and men visiting the facilities for RH consultations.
- UNFPA country office supported the reactivation of the national reproductive health working group (NRHWG) led by MoH Deputy Minister and participation by the Ministry of Health Education, NGOs, national maternal hospital managers, UNICEF, UNFPA and WHO representatives. The members of the working group have reviewed RH services and prepared the mapping of services. Four regular meetings were conducted during Q3&Q4 2019 where coordination activities at the national level and breast cancer awareness month response in addition to drafting NRHWG activities of 2020 coordination were on the agenda.
- 10 functioning midwifery schools were supported during 2019 in 10 Syrian governorates to deliver high quality midwifery and nursing education which enhance positively on maternal health practices based on standard protocols.
- In 2016, the National system for maternal death surveillance and response was established and piloted in 7 hospitals in joint effort with UNFPA, UNICEF and WHO. Pilot results revealed the need to apply the system in all governorates in order to use results of the system as reference for response and due to security situation and conflict during 2016-2018 all activities were frozen.
- No data has been received from MoH regarding the maternal death ratio. UNFPA in coordination with WHO supported MOH in 2019 to update and adopt death and birth certificates and improve maternal death notification. It has officially launched the process of establishing the maternal death surveillance and response system. In 2020-2021, UNFPA plans to reactivate and introduce comprehensive Maternal Death Surveillance and Response (MDSR) in the Syrian governorates with support from UNFPA in coordination with MoH.
- UNFPA CO has developed a prototype logistics management information system that is being piloted and will be endorsed during 2020. The results of the pilot and identified good practices will be incorporated in the MoH supply chain management strategy.

**Outcome 3: Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings**

<ul style="list-style-type: none"> <li>Does the country have the gender equality national action plans that integrate reproductive rights with specific targets and national public budget allocations?</li> </ul>	NO	2015	YES	2020	The national action plan for gender equality was finalized with SCFAP and it will be implemented starting 2020-2025.
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**Summary of National Progress**

- A new law amending article no. 548 of the Penal Code which grants mitigating excuse for “honor crimes” was passed. In April 2020 a new Law No. 2 was issued replacing the laws that are related to granting mitigating excuses for “honor crimes”. “Honor crimes” as such have become criminalized. The recent amendment, however, is considered a break-through achievement. Among others, the amendments have introduced some positive steps to raise the legal age of marriage. The amendment realizes equality in terms of legal age of marriage by raising it for women from 17 years old to 18 years old. The amendment is expected to help reduce cases of early marriage of girls. The new amendment uses the term; “completing 18 years of age” while the old one used “reaching 18 years of age.”
- In addition, articles 469-471 of the Penal Code were amended by Law 24 of 2018 by imposing fines for knowingly engaging in out of court marriages. The Penal Code now stipulates that a cleric who concludes an out-of-court marriage, without verifying (wittingly or not) the relevant legal requirements of the personal status law (PSL), is liable to legal punishment. In addition, the spouses, their representatives, and the witnesses are also liable to legal sanction.
- During the current program, efforts were made for progress towards the realization of young people’s rights to participate in the economic and social life of their communities and country, and to make informed choices regarding their bodies and reproductive health.
- In partnership with Syrian Commission for Family and Population Affairs (SCFAP) , UNICEF and responsible line ministries, the Adolescent and Youth National Framework was developed aiming at identifying youth needs and bringing together all relevant stakeholders to create an enabling environment where young people can grow to their full potential and take part in decision-making processes affecting their lives and their community, ensure access to quality services and opportunities as well as to ensure mainstreaming of young people’s concerns at all levels and into national plans. The framework covered five priority areas: health, education, employment and entrepreneurship, community participation and social protection. UNFPA contributed to the coordination for the development of the framework and in providing technical support for all the stages of developing the framework.
- The Syria Government made commitments during the Nairobi Summit on the ICPD25, to reduce the rate of early marriage from 13% to 5%, achieve women’s comprehensive access to and reception of family planning methods, reduce children under-five mortality rates from 23 per thousand to below 13 per thousand, reduce maternal mortality rate from 58 per 100 thousand births to below 34 per 100,000 thousand births, and follow up on updating legislations and laws.



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- UNFPA CO Syria provided technical support to the population data taskforce with OCHA and also coordinates the Technical Working Group (TWG) on data at the developmental level that is making significant contributions to improving the availability of data in Syria. In addition to that, UNFPA conducted further discussions with the Central Bureau of Statistics in securing Common operational data in support of 2019 Humanitarian Needs Overview (HNO).

#### **UNFPA's Contributions:**

- UNFPA focused on the capacity development of implementing partners including local NGOs to deliver quality gender based violence prevention and response including counselling, medical examination, PSS and referral of the GBV survivors to specialized health services. Advocacy was systematically carried out to enhance the awareness raising on CEDAW and SC resolutions on women peace and security. A new law, amending the legislative decree No. 148 for the year 1949 and its amendments which are related to granting mitigating excuse for “honor crimes”. The new law criminalizes honor crimes.
  - In the current program, UNFPA is leading the GBV coordination mechanism as a GBV Sub -Sector under the Protection and Community Services Sector (PCSS) since 2014, to assist in facilitating multi-sectoral GBV prevention and response related activities by drawing together partners, developing and overseeing a coordinated action plan and providing expert technical guidance to other sectors, accountability for addressing GBV is shared across all key sectors engaged in humanitarian response.
  - The GBV sub-sector members, which includes all related UN agencies: UNFPA, UNHCR, UNICEF, UNRWA, WHO, UNDP, WFP and ILO, international NGOs and national NGOs in addition to implementing partners; Syrian Arab Red Crescent SARC and Syrian Commission for Family and Population Affairs (SCFAP) and The International Committee of the Red Cross ICRC has a clear ToR, strategy and work plan that enables all partners to work in a coordinated and collaborative manner, building on the comparative advantage of each organization.
  - To strengthen the operational coordination at field level, UNFPA established a sub-national coordination mechanism which started in 2017, working through the protection working group. The GBV sub-national coordination mechanism is functioning in Homs, Tartous, Aleppo, Qamishli and Deir-ez-zour by having a standing GBV agenda and rotational chairing for the protection working group meetings in addition to the specific technical coordination meetings for the GBV humanitarian actors in the field, the sub-national mechanism working in close cooperation and communication with the National GBV sub- sector in Damascus.
  - The GBV sub sector and health sector, based in Damascus have been recognized by the global GBV Area of Responsibility (AOR) for being the best practice on coordination among sectors. On 28 November 2018 both coordinators facilitated the webinar with huge participation from all around the world.
  - Improving youth integration, skills, social cohesion and accessibility to health, education, and employment was also carried out in coordination with different stakeholders. UNFPA also supported data collection and utilization which informed evidence based policy making and programming.
  - UNFPA contributed to the empowerment of young people by giving them tools to become influential, productive actors in their societies, while promoting access to health information. UNFPA supported young people to be innovative in science and technology and to turn their ideas into transformative solutions.
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- UNFPA contributed to the enhancement of youth capacities to advocate against gender based violence, including child, early and forced marriage.
  - Young people were provided with reliable information related to their development, reproductive health, consequences of early marriage on young girls and gender based violence. This was done through awareness raising sessions by specialist, edutainment activities and interactive theatre.
  - Young people, YPEERs and many other youth initiatives were supported to lead, design and implement their own community based initiatives advocating against early marriage and different types of gender based violence and using awareness raising sessions, discussions and social media platforms.
  - UNFPA supported young people participation in regional youth forums and global conferences to enhance their leadership skills.
  - UNFPA supported young people's economic empowerment and skills development as part of building their capacity to contribute to the development of their communities.
  - On GBV SOPs, significant progress has been made by the authorities that are willing to endorse the document and rolled out by MOSAL in coordination with the GBV sub-sector throughout the country.
  - In 2018, the GBV sub-sector through its 9 facilitators, trained 586 sector partners across the Country on 2015 IASC GBV guidelines. The main sectors included: Health, NFI, shelter, WASH, Food, Nutrition, Protection. Most sectors developed a checklist and a sector focal point has been appointed for follow up.
  - In addition to its efforts to mainstream gender issues, UNFPA Syria Country office had established the gender unit to work in close coordination with the GBV team and government entities to support achieving Gender equality and women's empowerment. First, by strengthening institutional capacity at national, subnational and community level to prevent and respond to gender-based violence. Including through: improving the coordination mechanism to respond to gender-based violence, building the capacity of respective institutions and actors on prevention and response to gender-based violence supporting advocacy for comprehensive gender-based violence response at policy and service-delivery levels, promoting gender-transformative and culturally sensitive approaches to gender-based violence response and mainstreaming as well as establishing mechanisms for longer-term support to survivors of gender-based violence.
  - UNFPA has also actively worked towards improving the capacity of key institutions and partners to address discriminatory social norms and ensure gender equality and women's empowerment. Including through: supporting the adoption of the national gender equality plan, sensitizing and building the capacity of community leaders and policy-makers on gender-equality principles, in accordance with the Convention on the Elimination of All Forms of Discrimination against Women, Security Council resolution 1325 (2000) on women peace and security, and the overall guidance of 2030 Agenda, engaging community leaders, as well as men and adolescent boys, in efforts to prevent child, early and forced marriages and promote gender equality; building the capacity of non-governmental organizations, the media and local authorities to enhance gender equality.
  - During the period 2016-2020, the gender unit conducted capacity building for SCFAP staff in the Family Protection Unit (which serves as a shelter for the most vulnerable people) in GBV Principles and case management, a total of 30 people were trained.
  - As a follow-up of the national program for the empowerment of women and gender equality issued and designed an operational plan in 2018. The process was conducted by the Syrian Commission for Family and Population Affairs (SCFAP) as a coordinating body, in cooperation with UNFPA and all government partners. UNFPA in cooperation with SCFAP developed, with the support of a national consultant, an
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operational plan for gender equality (a detailed matrix) for the years 2020-2025. This operational plan was drafted with a national taskforce representing all partners, and coordinated by the Syrian Commission for Family and Population. The draft matrix was finalized based on the background papers and review of literature as well as the national plan for women's empowerment. A number of meetings were held to discuss the matrix with members of the national task force. In addition, bilateral meetings were held with representatives from different national institutions where all members showed high participation and interest.

- In cooperation with MOSAL, a network of qualified and trained mental health and psychosocial support/ Mental Health and Psycho-Social Support (MHPSS) service providers from across Syria was established. The network includes approximately 80 psychologists that are trained and equipped with systematic referral mechanisms in most of Syrian governorates. During the same period, the Syria country office was working on establishing a mechanism to engage men and boys in its programmes to advance gender equality and reproductive rights in close coordination with the key actors on the ground such as the Ministry of social affairs and SCFAP.
- During this period, a road-map for the preparation of the 1325 National Action plan was also developed.
- 12 workshops on gender equality, particularly the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW), were held to advocate and build the capacity of all stakeholders including the parliament for gender equality and the implementation of convention, to support evidence-based policy making. UNFPA supported the completion of several studies including Gender socio-economic barriers that affects accessibility of women and youth to the labor market.
- In 2019, a national observatory for GBV survivors (women, girls, boys and men) was established in Damascus, in coordination with SCFAP. The observatory consists of 20 reporting points, including: NGOs, hospitals, and police stations in Damascus and Rural Damascus. The observatory aims to collect data about GBV cases (rates, prevalence, geographical distribution, types, etc.) which would serve as a database for advocacy efforts against GBV as well as to inform intervention and response programmes. All reporting points (doctors, police officers, NGO focal points) were trained in 2019 on using the system of the observatory, as well as on GBV principles in order to build their understanding of GBV and sensitize them to how to deal with GBV survivors. The project is currently in its pilot phase.
- With the support of UNFPA, Syrian Commission for Family Affairs and Population (SCFAP) exerted efforts in mobilizing national counterparts in support of ICPD25 implementation. SCFAP targeted a wide spectrum of national partners, where more than 300 people; representing parliamentarians, relevant ministries, national population committees and sub-committees in governorates, NGOs, youth, universities' management, academia, and media personnel participated in the policy dialogue on ICPD25.
- UNFPA continued its support in enhancing the capacity of national partners in meeting its national priorities within the context of the ICPD and 2030 Agenda. Furthermore, UNFPA provided technical support for identifying result-based national commitments for accelerating the implementation of ICPD25. Several advocacy meetings were organized with various partners including parliamentarians, academia, youth, executive authorities in addition to NGOs and the private sector.
- UNFPA supported extensive participation of the Syrian delegation in the Nairobi Summit on ICPD25, where the head of the Syrian delegation chaired a session on People living with Disability (PLWD), in addition to the active participation of the delegation's members in other activities. The head of the Syrian delegation pronounced national commitments to accelerating the ICPD25 implementation as follows: to reduce the rate of early marriage from 13% to 5%, achieve women's comprehensive access to and reception

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of family planning methods, reduce children under-five mortality rates from 23 per thousand to below 13 per thousand, reduce maternal mortality rate from 58 per 100 thousand births to below 34 per 100,000 thousand births, and follow up on updating legislations and laws.

- UNFPA supported along with UNDP, UNICEF, WHO, WFP, and UNHCR, the Central Bureau of Statistics continued the implementation of relevant surveys. During 2017-2018 a multi dimension socio-demographic survey was conducted aiming at providing needed data in support of developing national development plans and programmes on the one hand and to support the efforts of the organizations working in Syria in the area of Humanitarian and development aid, on the other hand.
- UNFPA supported SCFAP in conducting two research studies in support of identifying targeted programmes with needed interventions that meet the national priorities related to elderly people as well as youth and women. In coordination with UNHCR and UNDP, UNFPA supported SCFAP in conducting a protection needs assessment of elderly People within the humanitarian context. In cooperation UNICEF, ILO, UNDP, WFP, and UNHCR, UNFPA supported SCFAP in conducting research on socio-economic and cultural barriers for women and youth labor in Syria.

<b>D. Country Programme Resources<sup>11</sup></b>						
<b>SP Outcome Choose only those relevant to your CP</b>	<b>Regular Resource (Planned and Final Expenditure, in USD millions)</b>		<b>Others (Planned and Final Expenditure, in USD millions)</b>		<b>Total (Planned and Final Expenditure, in USD millions)</b>	
Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access.	1.8	0.98	2.4	32.62	4.2	33.60
Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized	1.0	2.66	4.6	41.60	5.6	44.26
Programme coordination and assistance	0.5	3.56	1.0	18.38	1.5	21.94
<b>Total</b>	<b>3.3</b>	<b>7.20</b>	<b>8.0</b>	<b>92.60</b>	<b>11.3</b>	<b>99.80</b>

<sup>11</sup> The significant difference between the planned resources and the expenditure is due to two reasons:

a) The planned resources were estimated while preparing the current country program document for two years (2016-2017). While the expenditure included the period of extension till 2019.

b) The utilization of the funding for humanitarian responses the country office received included.