

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 73,654 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	1,874,083
Family planning consultations	781,962
Normal / assisted vaginal deliveries	68,391
C-Sections	47,726
Ante-natal care consultations	766,516
Post-natal care consultations	14,731
People trained on SRH-related topics	3,640

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
People reached with GBV programming / services	992,925
People reached with Dignity Kits	165,122
People provided with GBV case management	18,592
People reached with GBV awareness messages	884,083
People trained on GBV-related topics	2,695

YOUTH SERVICES

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	109,952
Beneficiaries trained on youth-related topics	365



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



WHOLE OF SYRIA RESPONSE
SYRIA COUNTRY OFFICE
 DELIVERING EMERGENCY AND LONG-TERM ASSISTANCE TO SYRIAN COMMUNITIES NATIONWIDE.

REPRODUCTIVE HEALTH

INDICATOR

People reached with sexual/reproductive health services	1,440,366
Family planning consultations	680,348
Normal / assisted vaginal deliveries	51,463
C-Sections	42,223
Ante-natal care consultations	617,985
Post-natal care consultations	74,584
People trained on SRH-related topics	1,391

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

People reached with GBV programming / services	575,527
People reached with Dignity Kits	70,969
People provided with GBV case management	11,593
People reached with GBV awareness messages	634,829
People trained on GBV-related topics	821

SINCE JANUARY

YOUTH SERVICES

INDICATOR

Beneficiaries reached with youth programming	59,981
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SINCE JANUARY



* 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

BRINGING HOPE TO THE WOMEN OF NORTHEASTERN SYRIA

"I have carried her for eight months inside of me," Sarab, 24, told the doctor as the contractions came and went. "It is time to hold her in my hands."

Although she is 8 months pregnant, Sarab had never visited a clinic before. "I've given birth to two children but had never visited a hospital. I was happy to hear of the new clinic and the services it offers," she explains. While she hadn't experienced any unpleasant symptoms, the timing of her arrival to the hospital was impeccable; she was about to have her baby. The attending doctor recommended an immediate C-section to avoid any risks that may have emerged on the road to the hospital.

The United Nations Population Fund (UNFPA) established a network of health services operated with the support of several NGOs located in Al-Hassakah, Qamishli, Kahtanieh, Shadadeh, Areesha, Ain Issa, Al-Hol, Al-Shadada and the surrounding rural towns, delivering comprehensive reproductive health services to people in need in these areas.

According to UNFPA's Coordinator in Al-Hassakah, Sarab came to their attention as part of a regular checkup. Soon after the delivery, Sarab's family celebrated the birth of a healthy baby girl.

"It is such an emotional experience," explains Dr. Adnan, UNFPA's Health coordinator on site. "Seeing life triumphing over death always brings plenty of hope to people who have suffered loss."

"After years of conflict, the crisis has caused more poverty and hunger than ever, and yet Syrians still succeed to show their resilience every day," explains Yasir, Sarab's husband, referring to his newborn girl as "a gift from God."

UNFPA has expanded the network of services to rural Al-Hassakah to cover hundreds of hard-to-reach villages. The number of mobile teams visiting the surrounding rural towns and providing comprehensive health services has significantly increased as a result.

"I will call her Amal," commented Sarab as she held newborn baby. "Amal," which is the Arabic word for "hope," felt like a fitting choice as mother and daughter received some much-needed postnatal care, which counts among the most basic services that are most at risk of disruption during periods of mass displacement.

UNFPA is providing health centers and mobile teams with the necessary medical and pharmaceutical equipment to reach remote areas in Al Hassakah and its neighboring rural areas, where many communities remain displaced and in need.

CROSS-BORDER TURKEY

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

The humanitarian situation in northwest Syria continued to deteriorate in October due to escalation in hostilities. Hundreds of civilians have been killed or injured due to airstrikes and shelling since late April 2019, while more than 670,000 people including 50% women and 25% children are estimated to have fled their homes to escape from violence.

In Maaret Al Numan, where 40,000 IDPs are estimated to have returned, lack of humanitarian assistance continues to be a key concern. Meanwhile, overcrowding in Idlib and rising fuel prices as winter months approach are also a cause for concern. A total of 57,000 women are suspected pregnant in NW Syria, 22 percent of whom are reportedly high risk pregnancies.

UNFPA and partners continued to respond to the evolving needs of people through outreach teams and mobile clinics, which provided essential services such as sexual and reproductive health, psychosocial first aid, safe spaces for women and youth, SRH and dignity kits distribution, referrals and other services as needed. UNFPA also continued to address the needs of women and adolescent girls by providing GBV response services such as case management, psycho-social support, and referrals.

REPRODUCTIVE HEALTH

INDICATOR

	SINCE JANUARY
Primary health facilities	14
Health facilities that provide Emergency Obstetric Care (EmOC)	12
Functional mobile clinics	7
People reached with sexual/reproductive health services	192,597
Family planning consultations	46,442
Normal / assisted vaginal deliveries	13,367
C-Sections	4,278
Ante-natal care consultations	92,483
Post-natal care consultations	13,289
People trained on SRH-related topics	316

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	14
People reached with GBV programming / services	120,810
People reached with Dignity Kits	47,827
People provided with GBV case management	1,040
People reached with GBV awareness messages	80,262
People trained on GBV-related topics	544



**HIGHLIGHT**

TOWARDS A BETTER LIFE

At the age of 24, Yasmin has seen more than her fair share of conflict, having witnessed the aftermath of the six-year siege of Damascus and, in the years since, having been forcibly displaced from her village in Rural Damascus. Today, she shares an unfurnished flat with her five-year-old daughter and aunt in Marret Masrin, Idlib — hundreds of miles away from home.

“When I first arrived to this place, I felt hopeless,” recalls Yasmin. “We had been besieged for a long time. I have since lost my husband and now I’ve become a displaced person with no income. I feel I have never acquired anything in this life; I haven’t even completed my education.”

The sense of isolation and loneliness had taken their toll on Yasmin. She became accustomed to social withdrawal and was attempting to shoulder her many responsibilities in isolation. Fortunately, a neighbour mentioned to her the activities taking place at a nearby Women and Girls Safe Space, which was fortunately within walking distance from her place of residence. Determined to seek help, Yasmin decided to visit the next morning.

“It was the right thing to do,” recalls Yasmin, who immediately registered to attend one of the psychosocial support sessions offered at the space. She also signed up for hairdressing training in the hopes of earning additional income to support her family.

As in many cases, the social circle within the safe space did wonders to Yasmin’s quality of life. The centre became a regular refuge for her, where she founded professional support, new friendships and a variety of training opportunities that allowed her to experience the stability she longed for since the crisis began.

“I definitely feel empowered, both socially and economically,” explains Yasmin. “These training programmes are helping me envision my future better. I now feel that opening my own business and supporting my family is a more attainable goal.”

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	8,115
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	16,445
People provided with GBV case management	2,728
People reached with GBV awareness messages	7,401
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	34,965
Family planning consultations	5,900
Normal / assisted vaginal deliveries	1,626
C-Sections	668
Ante-natal care consultations	7,617
Post-natal care consultations	2,277
People trained on SRH-related topics	1,076

GENDER-BASED VIOLENCE

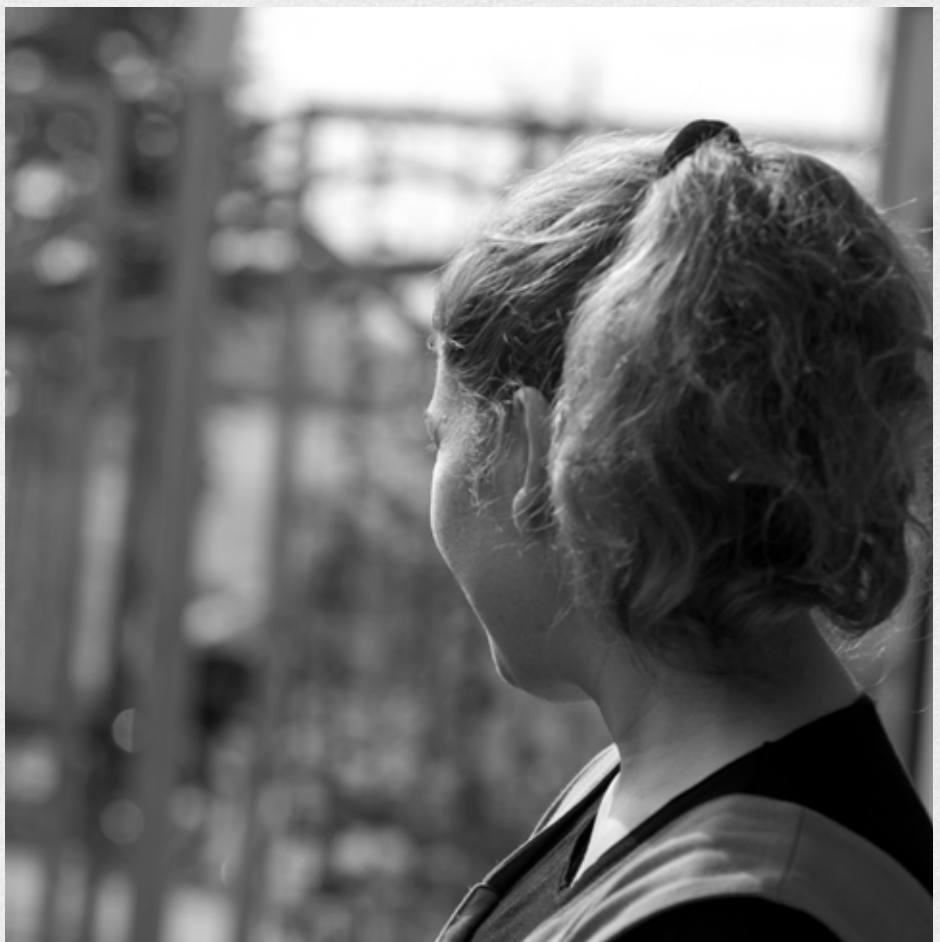
INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	7
People reached with GBV programming / services	18,267
People reached with dignity kits	1,081
People provided with GBV case management	725
People reached with GBV awareness messages	25,807
People trained on GBV-related topics	131

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
People reached with youth programming	37,803
Number of functional youth centres	4



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	17
People reached with sexual/reproductive health services	102,476
Family planning consultations	22,430
Normal / assisted vaginal deliveries	2,060
Number of C-sections	431
Ante-natal care consultations	36,011
Post-natal care consultations	5,010
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	23,463
People provided with GBV case management	1,916
People reached with GBV awareness messages	11,667

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	5,797
Family planning consultations	1,187
Normal / assisted vaginal deliveries	161
C-Sections	126
Ante-natal care consultations	1,900
Post-natal care consultations	228
Functional mobile clinics	1
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	89,044
Family planning consultations	24,795
Ante-natal care consultations	10,317
Post-natal care consultations	2,472
People trained on SRH-related topics	745

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	6
People reached with GBV programming / services	217,054
People reached with dignity kits	43,975
People provided with GBV case management	588
People reached with GBV awareness messages	58,644
People trained on GBV-related topics	885

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Number of functional youth centres	4
People reached with youth programming	3,848
People trained on youth-related topics	19

OTHER SERVICES

INDICATOR

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





HIGHLIGHT

THE SCORCHING CHAINS OF FORCED MARRIAGE

AFTER BEING FORCED TO MARRY HER COUSIN AT AGE 13, RAYA ENDURES A DIFFICULT JOURNEY TO RECLAIM HER FREEDOM AND MAKE UP FOR THE YEARS SHE'S LOST.

It was seven years ago that Raya's father passed away - an incident she recalls distinctly because that's when her life began to unravel. She was 13 at the time, living in a household where income came sparingly, and then came the incident that changed her life forever.

"I was forced at 13 to wed my cousin, who is ten years my senior ... A year later, I gave birth."

"I was forced at 13 to wed my cousin, who is ten years my senior," recalls Raya. "We had struggled to put food on the table ever since my father died, and I believed this would help my family. A year later, I gave birth."

As the crisis in Syria escalated, Raya and her family had to relocate to Turkey, where she stayed at the camp in Sanliurfa before moving to Izmir. It was there she began discovering her husband's violent tendencies.

"He beat me regularly," recalls Raya. "There were times when he beat me so violently that I thought I'd died in his hands." According to Raya, the abuse extended far beyond the physical; not only did her husband refuse to provide for the household, leaving the family to scrape by on what little she herself could manage, but she had also survived frequent and regular acts of spousal rape and sexual violence. Even after attempting to escape by relocating to her mother's house for three months, she was eventually forcibly returned to live with him.

"Families never believe girls when they tell them they are being abused," explains Raya. "It often feels like you have nowhere to turn to."

Eventually, Raya came to know of a Women and Girls Safe Space in the area, where she decided to seek help. During her initial interview, she was referred to individual counselling, where she was able to tell her story and explain the nature of the abuse she is experiencing. She requested to be relocated with her one-year-old child to a safe place away from her family, in addition to support to resume education. Her request came with one condition: that the entire process be kept from her family, whom she feared would track her down and kill her if they knew.

"There were times when he beat me so violently that I thought I'd died in his hands. Families never believe girls when they tell them they are being abused."

Given the gravity of the violence she was experiencing, she was referred to an intensive psychosocial support programme to gauge the best course of action. A total of five interviews were conducted over the course of two months, during which time she was also enrolled into the youth resilience programme at the centre, which helps young people realise their full potential and weather future challenges. At the conclusion of her course, she was referred to another implementing partner for safe housing, at which point she was also enrolled at a school to resume her education.

"I feel grateful for the support I've received," explains Raya. "I'm now able to resume my education and undo the damage that forced marriage has done to me. I'm excited to keep moving forward."

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.

In Turkey, the protection working group meeting was held in Ankara with a focus on 3RP planning. The current 3RP, the mid-year protection consultations report and the IA social cohesion framework were reviewed. Meanwhile, the National GBV Expert co-chaired the SGBV SWG meeting in Gaziantep. The theme of the meeting was the outcomes and steps forward of the SGBV referral pathway workshop and the 16 Days of Activism. A guidance note on SGBV case safe referrals will be drafted as an expected outcome of the workshop. Additionally, referral pathways for certain vulnerable groups will be conducted later this year, including child survivors of GBV. Lastly, the child protection sub-working group meeting was held in Gaziantep under the heading of "Child, early and forced marriage". The national GBV Expert provided a presentation on the UN Joint Program on CEFM. One action point set during the meeting was to establish a task force on child, early and forced marriage in southeast Turkey.

In Jordan, the SGBV WG met regularly in October and conducted a mid year revision of the annual work plan. During the revision, UNFPA also shared their experience working with media on reporting on GBV, one of the products of which was To Do No Harm — an awareness video developed by the UNFPA Regional Syria Response hub. Meanwhile, the SGBV WG rolled out the updated global Handbook for Coordinating GBV in Emergencies (GBViE) through extensive consultations of key stakeholders. The revised handbook represents a unique opportunity for capacity building efforts for GBV coordinators, local co-leads and sub-cluster members.



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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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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.