

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 through cross-border Turkey.

In addition to providing aggregated quantitative updates 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 reproductive health, gender-based violence, youth, and others.

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You hear stories, all the time. Stories of girls being attacked and killed and kidnapped, and stories of their families forcing them to get married at such a young age. I heard these stories all the time growing up, but I never thought they would become my life.

Reem, an adolescent girl from Quneitra, Syria



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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 13.1 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

WHILE PARTS OF SYRIA STABILIZE, 11.7 MILLION PEOPLE REMAIN IN NEED, IN ADDITION TO 5.7 MILLION REFUGEES REGIONWIDE.

With the Syria crisis approaching its ninth year, the country faces a new reality in which gender dynamics have been significantly altered. Even as parts of Syria appear to be stabilizing, the situation has long since passed a tipping point in terms of accumulated effects, with women and girls shouldering the larger portion of the consequences of the crisis. The lingering ramifications of conflict and displacement are now so fundamentally ingrained that they require long-term and strategic solutions.

In terms of reproductive health, disruptions in service networks over the past years have meant that a significant number of people have limited to no access to basic health services, which has placed the lives and wellbeing of Syrian mothers and their infants at risk. Moreover, civilians continue to suffer the effects of over eight years of conflict, including disruption of community networks, safety nets and rule of law. Moreover, the loss of civil documentation poses immediate and long-term risks, restricting the movement of civilians and preventing access to basic health services.

Pregnancies do not stop during crises. Women and girls always require access to life-saving reproductive health services, especially in emergencies. UNFPA is working toward securing the essential elements of lifesaving care, including functional health facilities, decentralized care, trained health workers as well as provision of essential equipment, medicines and supplies.

Unless the humanitarian community works collaboratively to ensure the provision of medicines, equipment, midwives and doctors, mothers and their infants are at risk of a wide array of health complications that can permanently impact their quality of life and, in many cases, lead to additional fatalities.

Meanwhile, gender-based violence (GBV) continues to be one of the most egregious manifestations of violence in the scope of this conflict, disproportionately afflicting women and girls. Recent reports by humanitarian actors region-wide reveal that all forms of gender-based violence affecting Syrian women and girls show no signs of abating.

Of the 11.7 million in need of assistance, 5.9 are women and girls — undoubtedly the most vulnerable to GBV in any humanitarian crisis. Since the crisis, women and girls seldom feel safe due to the increased

risk of harassment, sexual exploitation, domestic and family violence, rape, and early and forced marriage. It has also been documented that rape has been used as a weapon of war in Syria.

Given the length of the crisis in Syria, the different forms of violence against women have become interlinked. A girl forced into a child marriage five years ago may now be a widow or divorcee (sometimes more than once), with children to protect and feed, putting her and her family at greater risk of exploitation, sexual violence, temporary or forced marriage, and other forms of violence. This stark reality will have serious and far-reaching ramifications on Syrian society, leaving an entire generation to grapple with deep-rooted emotional scars that inhibit social progress, and further ingraining patriarchal attitudes that are conducive to social disharmony and even extremist ideologies.

While some parts of Syria stabilize, the accumulative effect of the conflict necessitates the continuation of reproductive health and gender-based violence services to the 11.7 million people in need inside Syria and the 5.7 million who remain refugees in Turkey, Lebanon, Jordan, Iraq and Egypt.

There is a need for reinforcing the collective responsibility at the highest levels to address and mitigate the risks of gender-based violence. Donors could consider adding indicators relating to GBV risk mitigation in proposal development or reporting; requiring partners to demonstrate how they will mitigate GBV as criteria for funding; and ensure sufficient funding for GBV risk mitigation in other sectors.

There is also a need for maintaining multi-year funding for GBV specialized prevention and response services, with a particular focus on vulnerable groups such as adolescent girls, widows, divorced women and those living with disabilities. Multi-year funding ensures the sustainability of programmes but also provides an opportunity to tackle the root causes of GBV — which lie in gender inequality. Funding should be directed at all levels of the response, including local NGOs.

Moreover, additional funding and investment is needed to address the needs of men and boys who have experienced sexual violence, coupled with additional engagement from other sectors such as health with a focus on mental health and psychosocial support, general protection, and legal services to ensure that their needs are met in a holistic way.

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 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

	SINCE JANUARY
People reached with reproductive health services	399,010
Family planning consultations	153,054
Normal / assisted vaginal deliveries	15,917
C-Sections	21,202
Ante-natal care consultations	96,529
Post-natal care consultations	3,952
People trained on RH-related topics	620

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
People reached with GBV programming / services	230,692
People reached with Dignity Kits	15,599
People provided with GBV case management	3,489
People reached with GBV awareness messages	161,790
People trained on GBV-related topics	301

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Beneficiaries reached with youth programming	7,562
Beneficiaries trained on youth-related topics	206



* Above figures reflect fully-supported service-delivery points. Inside Syria additional 917 primary healthcare facilities are being partially supported through the Ministry of Health.



SYRIA COUNTRY OFFICE

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

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REPRODUCTIVE HEALTH

INDICATOR

People reached with reproductive health services	302,944
Family planning consultations	124,788
Normal / assisted vaginal deliveries	18,172
C-Sections	15,219
Ante-natal care consultations	72,890
Post-natal care consultations	10,382
People trained on RH-related topics	333

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

People reached with GBV programming / services	145,926
People reached with Dignity Kits	9,203
People provided with GBV case management	2,359
People reached with GBV awareness messages	117,345
People trained on GBV-related topics	78

SINCE JANUARY



* Above figures reflect fully-supported service-delivery points. Inside Syria, an additional 838 primary healthcare facilities are being partially supported through the Ministry of Health.



FEBRUARY HIGHLIGHT

BRINGING HOPE TO WOMEN DURING CONFLICT

WOMEN AND GIRLS SAFE SPACES CONTINUE TO PROVIDE WOMEN AND GIRLS WITH LIFE-SAVING SUPPORT IN THE FACE OF CONFLICT AND WAR.

Khulod, a widow and mother of three children from Deir-ez-Zor, fled the conflict in her hometown and sought shelter with her husband's family, who had settled at Areesha Camp, one of the largest camps inside Syria located about 25 kilometres south of Al-Hasakah city.

Khulod's story is quite similar to those of countless women who have fled violence and instability in their hometowns, only to find themselves trapped in a cycle of abuse at the hands of family or community members. In Khulod's case, she was subjected to frequent physical and sexual violence by one of the members of her husband's family, feeling utterly powerless to stop him given her circumstances. As she puts it, "how could I say no to him? Where would I go if they decided to kick me and children out?"

Upon witnessing Khulod's suffering, her neighbour informed her about the UNFPA Women and Girls Safe Space (WGSS) located within Areesha Camp, where she immediately sought help. Upon her arrival, she requested a private session with a case manager, and finally found a confidential and safe outlet for her story.

The case manager worked with Khulod on developing her self-esteem and sense of empowerment, allowing her to openly express the feelings that had ensued as a result of abuse and formulating a step-by-step plan to allow her to protect herself against violence. In her case, securing a private living situation for her and her children was of paramount importance, as was cultivating a social network outside of her existing one so as to help her feel empowered.

"I am more confident now," explains Khulod. "What I need is to find a decent job to support my family, which is why I have signed up for the sewing training offered at the camp."

The training programs like the one for which Khulod signed up are offered at the WGSS in the camp in an effort to support women's livelihoods in the face of the crisis.

"If I stay all day at the tent he would abuse me, and I would stay silent because I am so terrified of him and of losing the shelter that his family provides for my children and me. But now, I can ask for an individual tent since the case manager informed me I will have protection services and referred me to the people who can help," she added.

Not only has Khulod moved into her private tent, but she has managed to complete her sewing training and is continuing to invest in her self-development in the hope of broadening her prospects for viable livelihood.

"I will start all over, a new beginning and no more abuse," added Khulod. "I will work inside my tent by sewing clothes. I don't know yet if someone will come to me to mend their dresses and ask for my services, but I have hope. I believe in having a positive outlook on life because I have gotten this far and I am committed to raising my children well."

CROSS-BORDER TURKEY

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

Through its hub in Gaziantep, Turkey, UNFPA continues to provide emergency and long-term assistance to affected populations in northern Syria, a region that continues to experience frequent instabilities and fluctuations in areas of control.

As of January 2019, Haya Tahrir Al-Sham (HTS) has gained greater control over the city of Idlib, which has resulted in significant cuts in funding to stabilization actors in northern Syria, namely for health, governance and protection. This has led to increased pressure on humanitarian programs. Moreover, the withdrawal of US forces from the region is expected to pose a challenge for the presence of INGOs in northeastern Syria, which might further increase the burden on operations managed from cross-border Turkey.

Additionally, more than 81,000 people were affected by the recent floods in the area, and UNFPA has been supporting the emergency response to the situation through its various implementing partners.

REPRODUCTIVE HEALTH

INDICATOR

People reached with reproductive health services	38,134
Family planning consultations	12,840
Normal / assisted vaginal deliveries	2,048
C-Sections	580
Ante-natal care consultations	12,255
Post-natal care consultations	1,551
Health facilities that provide Emergency Obstetric Care (EmOC)	13
Functional mobile clinics	8

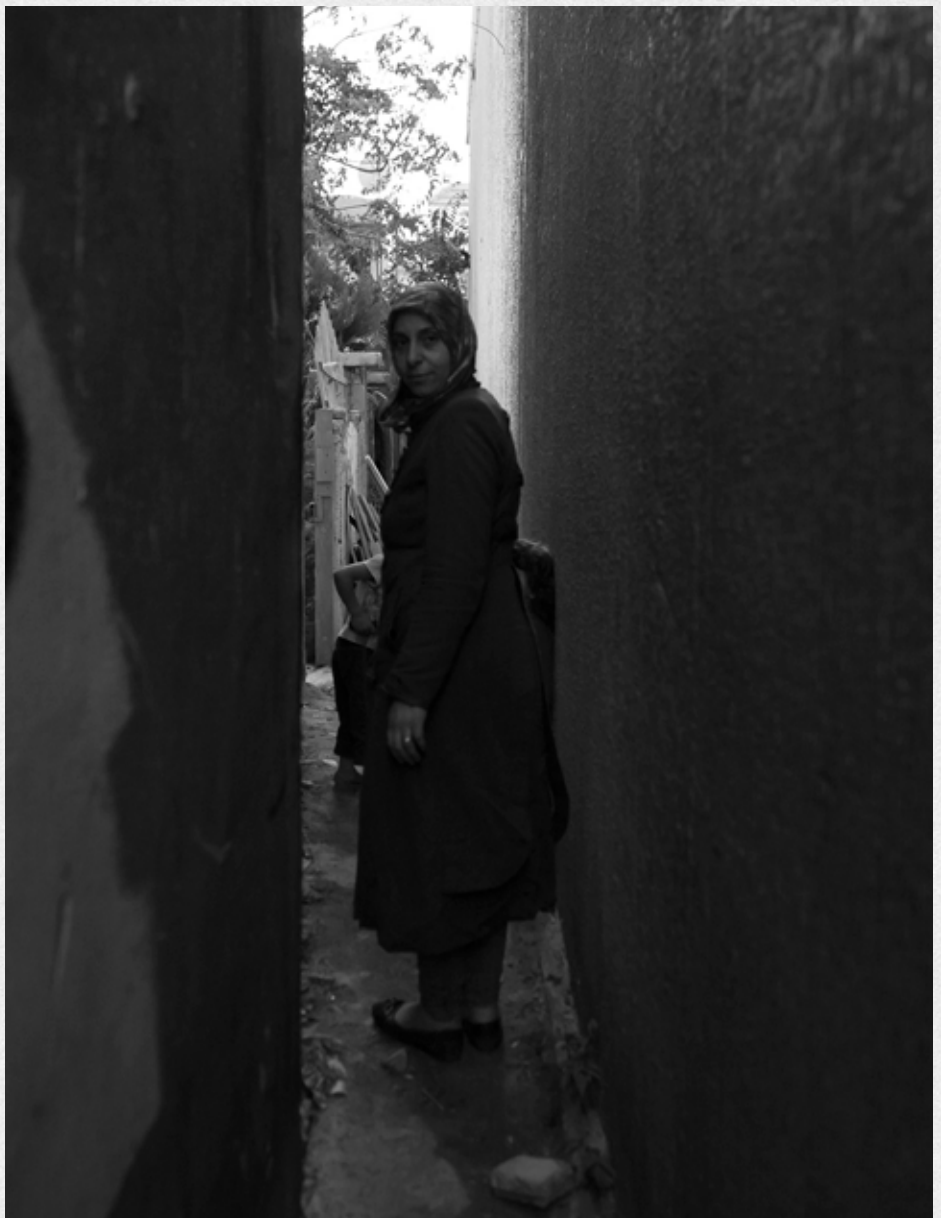
SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

Number of women and girls' safe spaces (WGSS)	14
People reached with GBV programming / services	22,009
People reached with Dignity Kits	1,100
People provided with GBV case management	283
People reached with GBV awareness messages	15,436
People trained on GBV-related topics	141

SINCE JANUARY



A black and white photograph of a woman wearing a headscarf, sitting on a patterned rug in a room with patterned curtains. The woman is seen from the side, looking down. The room has a rustic feel with a textured wall and patterned fabrics.

PERSPECTIVE

"During our work, we often receive gender-based violence survivors in a clear state of distress. They enter sad, depressed and afraid. Sometimes they have bruises, some of which are visible on the face and hands. I begin by talking to them about the importance of protecting information and how we always ensure confidentiality and safety. They will then usually open up and tell me their story. I take them to the medical department where they can receive proper medical treatment without revealing to the medical staff any specifics related to their identities or their personal situation.

"There are also cases of constant and severe beatings that leave the survivors physically weak. Moreover, there is the violence that surrounds them in their daily lives and many of them struggle to meet their basic needs. All of these things lead to a constantly deteriorating psychological state. I always try to calm them, to assure them that it was not their fault and tell them that they are safe now. I tell them that I am here to listen and support them. I then prepare a safety plan for the survivor. After an initial psychological evaluation, I also provide them with a strategy for self-reliance. Usually, after several sessions and continuous follow-up, they change for the better. They begin to find their own positive coping mechanisms. At this point, there is usually a visible difference in their appearance, their spirit."

UNFPA Case Manager

Cross-Border Turkey

COUNTRY OVERVIEW

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

People reached with reproductive health services

SINCE JANUARY

206

GENDER-BASED VIOLENCE

INDICATOR

Number of women and girls' safe spaces (WGSS)

SINCE JANUARY

11

People reached with GBV programming / services

781

People provided with GBV case management

254

People reached with GBV awareness messages

269

YOUTH SERVICES

INDICATOR

Beneficiaries reached with youth programming

SINCE JANUARY

23

Beneficiaries trained on youth-related topics

206



FEBRUARY HIGHLIGHT

BREAKING THE CYCLE OF EXPLOITATION

When Mariam first moved to Egypt with her husband and her only son, she had high hopes to start a new life away from the instabilities that plagued her hometown in Quneitra. Her family had survived a series of violent attacks that had forced them to flee their country, seeking refuge in Cairo where many Syrians had managed to find a semblance of peace. Unfortunately for Mariam, her struggles were far from over.

"I remember feeling a sense of relief when I arrived in Egypt," explains Mariam. "Even after months of torment in Syria and the many indignities we faced to finally find our way to Egypt, I was somewhat eager to start a life again."

Shortly after their arrival, her husband — who had sought a job opportunity in Libya — was arrested and detained, leaving them behind in Egypt with neither protection nor viable income. News of his case slowly trickled down into complete silence, and Mariam slowly began giving up on the prospect of his return. Due to her dire economic state, she was evicted from her home, left to scrape by on next-to-nothing in an environment that was completely new to her.

Eventually, Mariam came to know Asim, a man who seemed to be heavily invested in her welfare and who offered to secure her a temporary house in which she and her son could stay. Given her state of her despair, she was forced to trust him, enough that she did not request a formal rental agreement with the landlord, who was apparently Asim's friend.

"I did not realize I was walking into a trap," recalls Mariam. "As I entered the house, he began to come uncomfortably close to me, trying to touch me inappropriately. Soon enough, he became violent and tried to force himself on me, aided by the landlord. By some miracle, I managed to push him away, and my screaming eventually scared them enough to let me go."

Being completely helpless and hopeless, Mariam and her son spent that night in the streets until she was able to approach the UNHCR office the next morning. She was referred to a UNFPA-supported facility for emergency assistance, where she was interviewed by a case manager who made an effort to understand her situation, concluding that she was at a high risk for exploitation and violence. Following the preliminary risk assessment, she was hosted at the house of one of the center's previous clients for almost a week until she received a sustainable and safe housing service.

"I feel somewhat calmer now," explains Mariam, who notes that she feels safe enough at her new house that she is willing to assist other vulnerable women with temporary shelter. She is also actively engaged in follow-up sessions with her case manager, who has created an action plan for her to address the various challenges she is facing as she attempts to build her life as a refugee.

In humanitarian settings, sexual exploitation of women and girls is among one of many protection risks to which countless survivors have been exposed. Disruptions in community networks and extended economic hardships increasingly propel women and girls into despair, at which point they become more vulnerable to sexual exploitation through sexual violence, child marriage, survival sex, and other forms of violence.



IRAQ COUNTRY OFFICE

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

Currently, around 250,000 Syrian refugees are seeking safety in camps and host communities in Iraq. UNFPA supports nine women community centres, eight health facilities, one delivery room, and five 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. UNFPA in Iraq continues to coordinate with other gender-based violence (GBV) prevention and response service providers targeting refugees. Staff from the RH Units have been trained on the GBV Standard Operating Procedures for the Kurdistan Region, reporting an increased ability to identify GBV cases, provide information, and make referrals to service providers using a survivor centred approach.

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 programs that span vocational training, awareness sessions, lectures on topics related to 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

People reached with reproductive health services	11,049
Family planning consultations	3,673
Normal / assisted vaginal deliveries	398
C-Sections	93
Ante-natal care consultations	1,714
Post-natal care consultations	289
Health facilities that provide Emergency Obstetric Care (EmOC)	17

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

Number of women and girls' safe spaces (WGSS)	11
People reached with GBV programming / services	4,752
People reached with dignity kits	5
People provided with GBV case management	65
People reached with GBV awareness messages	4,584
People trained on GBV-related topics	34

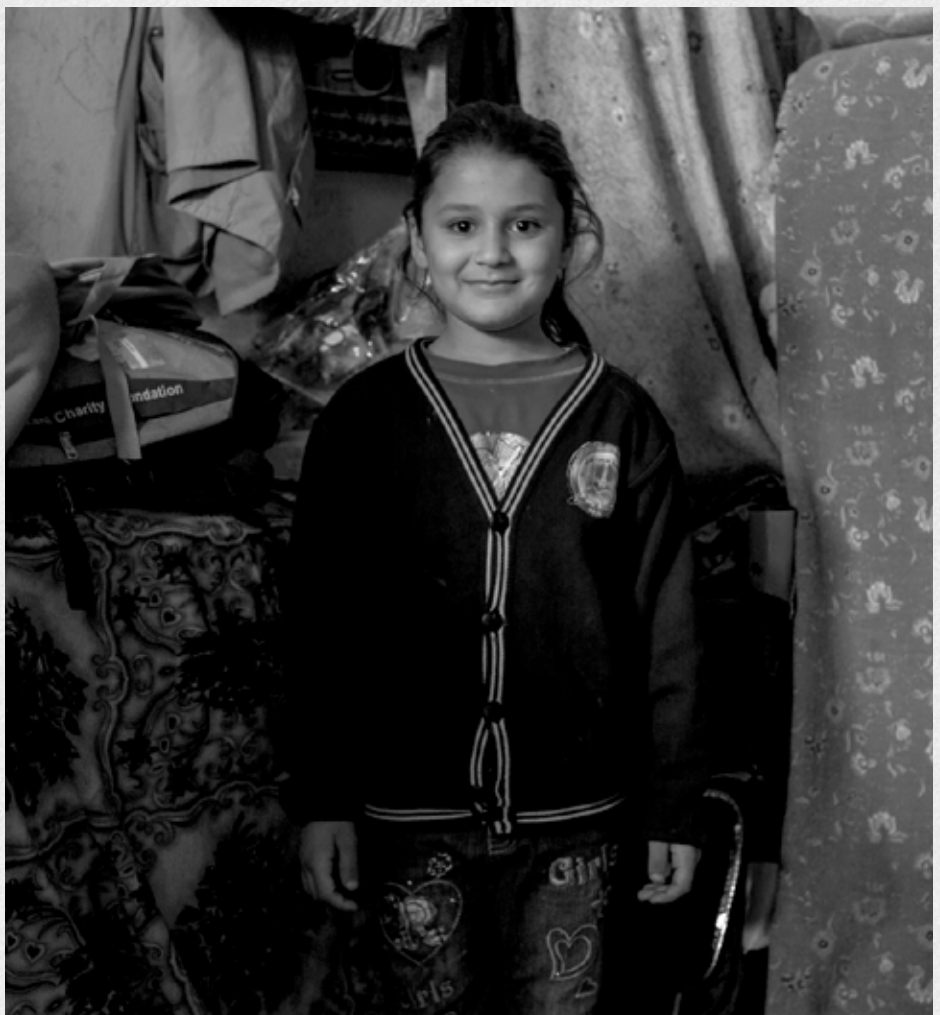
SINCE JANUARY

YOUTH SERVICES

INDICATOR

Number of functional youth centres	2
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SINCE JANUARY





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 reproductive rights for all and supports access to a wide range of sexual and reproductive health services - including voluntary family planning, maternal health care and comprehensive sexuality education.

UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive healthcare and be effectively protected from gender-based violence. UNFPA and 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.

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 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 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

People reached with reproductive health services	18,208
Family planning consultations	4,241
Normal / assisted vaginal deliveries	497
C-Sections	450
Ante-natal care consultations	6,649
Post-natal care consultations	1,036
Health facilities that provide Emergency Obstetric Care (EmOC)	13
Functional mobile clinics	8

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

Number of women and girls' safe spaces (WGSS)	14
People reached with GBV programming / services	4,871
People provided with GBV case management	353
People reached with GBV awareness messages	2,344

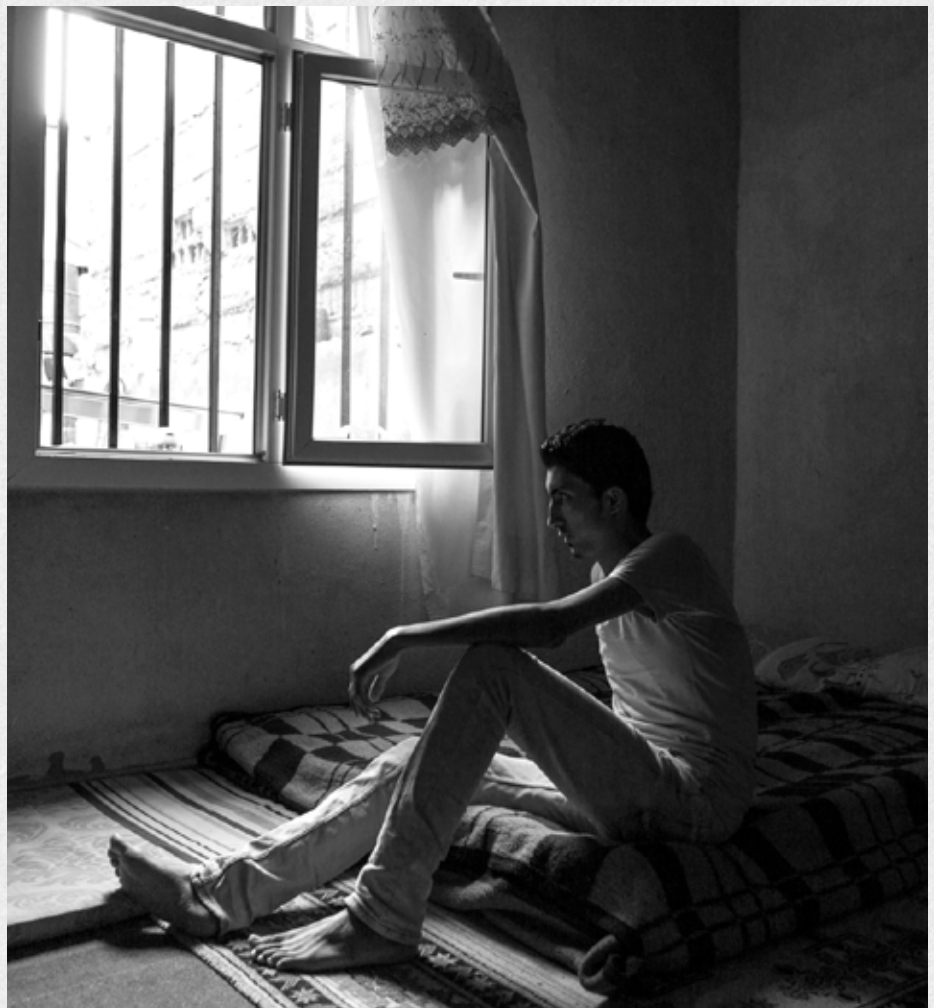
SINCE JANUARY

YOUTH SERVICES

INDICATOR

Number of functional youth centres	14
People reached with youth programming	1,176
People trained on youth-related topics	173

SINCE JANUARY



COUNTRY OVERVIEW

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

People reached with reproductive health services	2,107
Family planning consultations	375
Normal / assisted vaginal deliveries	87
C-Sections	25
Ante-natal care consultations	336
Post-natal care consultations	58
Functional mobile clinics	2

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

Number of women and girls' safe spaces (WGSS)	3
People reached with GBV programming / services	4,195
People provided with GBV case management	2
People reached with GBV awareness messages	8,600

SINCE JANUARY



FEBRUARY HIGHLIGHT

TO BE WED IN TEARS AT AGE FOURTEEN

During the implementation of an awareness session for Syrian refugees about early marriage, one of the participants shared her story of being married at the age of 14 to a man four years her senior.

"During the ceremony, I washed, dressed and got ready," recalls Noura. "Usually, a woman would celebrate and dance at her own wedding, but I just stood there feeling incredibly unnerved, eventually breaking down in tears. Everyone was busy preparing the food for the big party, and afterwards while others ate, my husband and I were brought into the house for the official part of the wedding. We sat next to each other on the bed and we were fed grilled meat and rice. This was the first time I saw him; I looked over at him and started crying. We said nothing to each other, but eventually he spoke to me, and the first words he said were to encourage me to calm down."

Three months later, Noura's period was several days late, so she approached her mother who sat her down and told her about pregnancy and what she can expect over the coming months.

"I felt sick at that time," explains Noura, "always dizzy, unable to eat and constantly vomiting. I felt completely helpless. I was just a child. I knew nothing of the duties of a mother and kept thinking to myself: How can I do this?"

Noura had a difficult pregnancy and was constantly ailing. Towards her final trimester, she was told she should not deliver at home as her child's chances of survival — as well as her own — were discouragingly low. She was scared, so she told her husband about the risks and he decided to take her to the hospital where she underwent a Caesarian section. That day, her daughter, Jana, was born.

"I have become accustomed to my new life," explains Noura. "Many new obligations emerged, like being a mother and a wife, which always worried me. But as a mother, I hope that I can influence my daughter's life so that she doesn't repeat my experience. I aim to spread the message that child marriage must be stopped and to tell people about the consequences. I might have died on the day I gave birth; no one deserves to go through what I did. I dream that one day we don't have to be poor anymore and that we can have a good life."



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 reproductive health and gender-based violence services to Syrian communities in need in Ankara, Gaziantep, and Istanbul, addressing assistance gaps and organizing far-reaching programs that serve to protect vulnerable members of the community.

REPRODUCTIVE HEALTH

INDICATOR

Number of primary health facilities	30
People reached with reproductive health services	26,362
Family planning consultations	7,137
Ante-natal care consultations	2,685
Post-natal care consultations	601
People trained on RH-related topics	287

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

Number of women and girls' safe spaces (WGSS)	30
People reached with GBV programming / services	48,158
People reached with dignity kits	5,291
People provided with GBV case management	173
People reached with GBV awareness messages	13,212
People trained on GBV-related topics	48

SINCE JANUARY

YOUTH SERVICES

INDICATOR

Number of functional youth centres	4
People reached with youth programming	1,291

SINCE JANUARY

OTHER SERVICES

INDICATOR

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

SINCE JANUARY



JANUARY HIGHLIGHT

ESCAPING THE TRENCHES OF DOMESTIC ABUSE

AFTER BEING SHUNNED BY HER HUSBAND, RANEEM AND HER FIVE CHILDREN WERE LEFT PENNILESS AND HOMELESS IN A STRANGE COUNTRY.

Raneem is a 40-year-old mother of five. While she entered matrimony voluntarily at age 20, her marriage has endured a series of challenges that hit a breaking point with the onset of the crisis in Syria, which brought with it financial instability and a barrage of security risks.

In an effort to find some measure of stability, Raneem and her family decided to sell all their belongings and seek refuge in Turkey — a move that had proven to be more challenging than originally anticipated, particularly during the first year. Her husband launched a real estate agency in an attempt to make a decent and stable living, which gradually grew into a viable venture that significantly improved their financial prospects.

Once their situation became stable enough, Raneem decided to visit her family in Syria, taking advantage of the extended Bayram holiday to spend time with her loved ones. This is when, to her surprise, her life was unexpectedly turned upside down.

Upon her return from Syria, Raneem was shocked to discover her husband living with another woman, and he had shunned her and their children, leaving them homeless and broke hundreds of miles away from any friends or relatives. Luckily, with the help of her neighbors, she settled in a nearby mosque, where she made a basic living cleaning the facilities.

While her marriage was technically over, her husband continued to exercise control over her and the children.

"He frequently came to the mosque where we lived, subjecting us to physical and emotional abuse and threatening to withdraw what little financial support he continued to provide," explains Raneem.

Raneem's journey toward reclaiming her life and independence was long and arduous, fraught with the challenges associated with her refugee status and the fact that she was living in an environment that was still largely unfamiliar to her.

Eventually, she participated in an awareness session organized at one of the UNFPA- supported centers in the area, where she began piecing together the fragments of a brighter future.

"In the center, they told us about a UNFPA-supported programme that has provided support to numerous women in similar situations," explains Raneem. "I took the opportunity and sought help from them. I wanted to know my rights as a resident of Turkey and to understand the procedures for filing for a divorce."

The case workers at the programme obliged, offering her a detailed overview of her rights and guiding her on the ins and outs of divorce. She was accompanied by an interpreter to a police station where she gave a statement about the neglect and abuse she endured at the hands of her husband, which resulted in the revocation of all privileges afforded to him by the Turkish government.

In order to help Raneem gain self-reliance, she was taken to the Turkish Red Crescent, where she was granted a financial aid package in order to provide for herself and her children. With her basic needs in place, she was also accompanied by a case worker to receive extended support in the hope of beginning her journey toward healing.

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 in all of its GBV response interventions. 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 February, the GBV sub-sector in Damascus and the Technical Working Group (TWG) at field level, Homs and Aleppo, convened two meetings with sector members for better supporting the Gender Technical Working group during International Women day celebration with activities taking place throughout the Country. Some of the activities led by the GBV sub-sector included awareness sessions about women's role in society and several topics around CEDAW and women's legal rights. In Qamishli, the UNFPA sector focal point is coordinating with UNHCR and UNICEF and putting together the GBV coordination mechanism in response to the crisis in Al-Hol camp. Moreover, the GBV sub-sector coordinator had several advocacy meetings with The Ministry of Social Affairs and Labour (MOSAL) on the Human Response Plan (HRP) protection chapter. While there are still different protection issues that need to be flagged at a higher level, the areas around GBV have been approved and agreed upon by authorities.

Meanwhile, the protection sector is currently awaiting the feedback of the authorities on the HNO and a report will be shared upon receipt of feedback. The projects submission and vetting process for the HRP has been finalized, with 20 out of the 24 projects received for the Syria sector accepted.

In Turkey, a National Protection Working Group (NPWG) meeting took place in Ankara with a focus on LGBTI issues. The Key Refugee Group Project was presented, sharing experience from its longstanding work with LGBTI individuals, sex workers and people living with HIV, and the challenges faced in the field. Meanwhile, a National GBV Working Group meeting took place, co-chaired by UNFPA with the participation of Ministry of Family, Labor and Social Services, Directorate General of Migration Management, UNHCR, UNFPA, UNICEF and UNWomen. The action points from the previous meeting were reviewed and objectives, outcomes and activities for 2019 were discussed. Moreover, an Inter-Agency Working Group meeting took place in Izmir with a focus on protection. UNFPA provided updates on its programming, recommending that the next meeting focus on protection and children, including early and forced marriages.



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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 Catholic Archbishopric – Relief and Development Center (RDC), Syrian Commission for Family Affairs and Population, SCS, SEBC.

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: Ministry of Health (MOH), Institute for Family Health (IFH), International Medical Corps (IMC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Jordanian Women’s Union (JWU), Youth Peer Education Network (YPE), NCFA (National Council for Family Affairs), Qestscope.

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), CARE International, Shafak.

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RELEVANT RESOURCES

www.unfpa.org

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