

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 reproductive health, gender-based violence, youth, and others.

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For me, the safe space became more than a lifeline. It became my life, my one outlet from the madness, hatred, discrimination and cruelty I was encountering on a daily basis. Sometimes, life feels like one of those strange nightmares in which you are trying to call for help but your voice is caught in your throat. Coming to this centre felt like I finally got my voice back.

Rama, a survivor of gender-based violence from Qamishli, 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 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

IDLIB AND AL HOL CAMP EMERGE AS URGENT PRIORITIES AS TENSIONS IN NORTHERN SYRIA CONTINUE TO ESCALATE.

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. 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.

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. Reports by humanitarian actors region-wide have continued to show that all forms of gender-based violence experienced by Syrian women and girls show no signs of abating.

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.

Recently, mounting tensions in Northern Syria culminated in a military campaign targeting Northern Hama and Southern Idlib. These events continue to exact a heavy toll on civilians and civilian infrastructure in North-Western Syria. In May, around 270,000 displacements

were recorded in Northwest Syria. Recent estimates show that up to 700,000 people could be displaced from Northern Syria, including 200,000 temporary displacements if military escalations take place in the de-escalation zone. Access to healthcare continues to be an essential need for the newly-displaced individuals and for host communities, including an estimated 10,800 pregnant women.

In Eastern Syria, in March 2019, the Syrian Democratic Forces (SDF) resumed the offensive on the last ISIL-held enclave of Baghouz village (located in Deir ez-Zur governorate), resulting in additional displacements to Al Hol camp. While the offensive has since ceased, 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. The collective required funding to ensure service delivery to newly displaced populations in Syria is 14.6 million dollars.

UNFPA has issued a flash appeal covering the situation in both Idlib and Al Hol camp, which can be accessed [here](#).

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

INDICATOR	SINCE JANUARY
People reached with sexual and reproductive health services	967,617
Family planning consultations	402,058
Normal / assisted vaginal deliveries	20,152
C-Sections	11,898
Ante-natal care consultations	385,656
Post-natal care consultations	7,256
People trained on RH-related topics	1,329

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
People reached with GBV programming / services	499,542
People reached with Dignity Kits	106,488
People provided with GBV case management	7,080
People reached with GBV awareness messages	354,573
People trained on GBV-related topics	1,029

YOUTH SERVICES

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	122,053
Beneficiaries trained on youth-related topics	226



* Above figures reflect fully-supported service-delivery points. Inside Syria additional 838 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.

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 Ezzour.

UNFPA Syria also continues to provide lifesaving services to the women and girls in the AL-Hol camp through five mobile teams covering new arrivals and a static clinic. This includes supporting GBV mobile teams targeted the reception area and provided awareness sessions and group and individual counselling and conducting. The Psycho-Social Support (PSS) team also provided sessions about prevention of sexual abuse and harassment. UNFPA Syria distributed 5,000 Dignity kits, 1,500 Adolescent kits and 20,000 sanitary napkins.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
People reached with sexual and reproductive health services	737,091
Family planning consultations	340,710
Normal / assisted vaginal deliveries	11,535
C-Sections	9,480
Ante-natal care consultations	315,437
Post-natal care consultations	37,174
People trained on RH-related topics	667

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
People reached with GBV programming / services	272,525
People reached with Dignity Kits	53,021
People provided with GBV case management	4,119
People reached with GBV awareness messages	219,584
People trained on GBV-related topics	300

YOUTH SERVICES

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	75,465



* 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.





MAY HIGHLIGHT

LIFELINES IN WAR

HELPING DISPLACED WOMEN AND GIRLS
SAFEGUARD THEIR LIVES, HEALTH AND DIGNITY.

At 22, Fatima has seen more than her fair share of traumas. A survivor of child marriage, she was wed at age 13, shortly before the crisis in Syria erupted and the eventual mayhem that ensnared her hometown of Deir-ez-Zor. Today, she is a widow, a mother of three children, and an internally displaced person living in Al Areesha Camp, one of the largest camps in Syria situated in Al-Hasakah.

Fatima's husband had died of an undiagnosed illness while she was pregnant with her youngest daughter, shortly before she lost her parents and several other members of her family to the conflict. When ISIS militants eventually took control of her village, she managed to flee with her brothers and take refuge in Al Areesha, where she had remained for the past two years.

"Fleeing Deir ez-Zor was one of the most terrifying experiences of my life," recalls Fatima. "I not only feared for my children's safety, but also for my brothers and the many other families that we were fleeing with. All of us had to pay someone to smuggle us out of the town. There were many of us huddled together in one van, not knowing what will happen next. The smuggler only dropped us at the government military checkpoint nearest to Al Areesha and we had to walk the rest of the way to the camp. The entire trip took us two days, and by the end I had withstood a number of serious injuries."

When she arrived at the camp, Fatima was in a dire emotional state, falling into isolation and finding herself unable to socialize with other residents. The death of her loved ones and the stress of displacement took a toll on her ability to process her feelings, pushing her further into a depression that manifested in physical and emotional abuse toward her children. "Looking back, that is perhaps what I regret the most. But at times like these, we stop being ourselves and become lifeless. I did not have a job and couldn't afford treatment to heal my injuries. The pain made it all much worse."

One of the women in the IDP camp noticed Fatima's state and told her about the UNFPA-supported women and girls' safe space at the camp, which has provided services to countless women who have arrived at the camp over the years. During her first visit, she was evaluated by the attending gender-based violence case manager, who immediately took note of her trauma and distress.

"At first, I had difficulty trusting anyone, including the case manager," recalls Fatima. "With time, I was able to share my trauma with her and the other women in the safe space. I started coming to the centre every day, and for six months I never missed a single day."

At the safe space, she not only received intensive counselling but also felt the empathy and encouragement of other women, which paved the way for new friendships and ever-growing support network.

She also participated in a series of training and awareness sessions, including vocational and life skills, gender-based violence awareness, conflict management, peacebuilding skills, and others. At some point, she started taking sewing classes and discovered a hidden talent for design, which she hopes to grow into an income-generating venture. As she was being interviewed by UNFPA's personnel, she pointed to the magnificent black and gold dress she was wearing, smiled and said, "I made this myself! There is such pride in being able to make things yourself. I've even sown clothes for my children that they've loved."

Fatima is currently in the process of creating a small tailoring business inside the camp. Even now, many of her friends and neighbours in the camp continue flocking to her workshop to commission apparel for everyday use and for special occasions, including wedding dresses, children's apparel, and others. The high demand has allowed her to take her business to the heart of Al Hasakah, which has significantly improved her economic situation. She was even approached by one of the local NGOs and invited to conduct sewing workshops for other women through one of their programmes at the camp.

"In many ways, the women and girls' safe space was a lifeline," explains Fatima. "Not only have I gained new skills that will forever impact my life, but I also learned much more about subjects that impact the lives of women and girls in my country, such as gender-based violence, women's rights, and others. Before attending these awareness sessions, I always believed it was normal for a girl to be engaged by the time she is 15 years old, but the awareness sessions helped me understand the disastrous effects of early marriage. I can now pass this knowledge on to other women who join my classes."

Due to funding shortfalls, activities at the UNFPA-supported women and girls' safe space in Al Areesha Camp have been suspended since February 2019. "We need the WGSS back!" says Fatima, her voice echoed by the other women present during the interview. "The centre is vital to women and girls as it allows them to rebuild the lives and social networks they lost in displacement and war, and to gain new skills and awareness on different topics. Many of the women in the camp resort to desperate measures to survive, but the safe space helped them build better coping mechanisms and to rise up from the trenches they had been forced into."

UNFPA and its implementing partners continue to reach women and girls displaced by conflict in reproductive health and GBV services including psycho-social support (PSS), literacy courses, vocational training, recreational activities, livelihood support services and the provision of dignity kits to preserve their dignity and health. The UNFPA Syria Country Office currently supports 46 safe spaces that have provided GBV services to more than 272,000 individuals since January 2019.

CROSS-BORDER TURKEY

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

The month of May saw a severe intensification in conflict activities, with continued shelling and airstrikes that, particularly due to the use of indiscriminate weapons in civilian-populated areas, puts the lives of women, men, girls and boys at risk every day.

In May, 269,627 displacements were recorded in northwest Syria, of which approximately 150,000 are movements to communities near the Turkish border in areas that are already densely populated with high numbers of existing IDPs, such as Dana sub-district in Idlib Governorate. A total of 22 health facilities have been reportedly affected, including 3 facilities in Idlib supported by UNFPA that are no longer functional.

Meanwhile, 15 static women and girls' safe spaces in Northern Hama and Southern Idlib are currently non-operation. Approximately 67,500 women and girls of reproductive age are in need of dignity kits (DKs), of which the existing stock can only serve an estimated 17,000, leaving an approximate 50,500 displaced women and girls with no access to dignity kits.

UNFPA partners were directly involved in the provision of GBV, protection, and other services as per the emergency protection integrated model, including psychological first aid, psychosocial support, dignity kits distribution, explosive hazard risk education, family tracing and reunification and referral of individuals to specialized services.

REPRODUCTIVE HEALTH

INDICATOR

SINCE JANUARY

Primary health facilities	13
Health facilities that provide Emergency Obstetric Care (EmOC)	13
Functional mobile clinics	9
People reached with sexual and reproductive health services	98,142
Family planning consultations	27,797
Normal / assisted vaginal deliveries	6,639
C-Sections	2,076
Ante-natal care consultations	41,880
Post-natal care consultations	5,740
People trained on SRH-related topics	168

GENDER-BASED VIOLENCE

INDICATOR

SINCE JANUARY

Number of women and girls' safe spaces (WGSS)	14
People reached with GBV programming / services	60,050
People reached with Dignity Kits	38,360
People provided with GBV case management	500
People reached with GBV awareness messages	40,167
People trained on GBV-related topics	236





MAY HIGHLIGHT

In the bloom of my youth, when I was eighteen years old, I was planning for my academic future and dreamt of completing my studies and going to a university like all the other girls. Suddenly, I received the biggest shock in my life when my parents forced me to leave school and get married before I was able to complete my secondary education.

I got married and I lived with a large family, taking on the demands of my husband and his extended family, not to mention the responsibilities of the six children I eventually had. For years, I tried to make pace with the situation, and there were long stretches of time when I found something resembling contentment.

Then came the time when I lost my older son to an unfortunate accident and spiralled into grief. My loss coincided with mounting tensions in our hometown, and we were forced into displacement several times, which ultimately had a serious impact on our economic situation. I felt disempowered and helpless, as if I had been locked into a state of perpetual despair.

One day, as I was talking to one of my new neighbours and sharing with her my story, she told me about a UNFPA-supported centre and encouraged me to visit and register, knowing my passion to pursue my education. The first step was to convince my husband to allow me to join the centre. Of course, he was hesitant at the beginning uncertain how this would impact the time I spend caring for my children. I explained to him how pursuing my education would benefit the family allow us to provide a better living for our children in the future. I was elated when he was convinced, particularly as many women and girls are denied such opportunity. I went to the centre, registered and began attending English lessons.

My then English teacher was a remarkable woman. To me, she had it all; she was very professional, highly educated, and extremely kind, which allowed her to become a role model to all the women in the class. If she made it, so can we.

I did very well in the first course and received an "A" on my first evaluation. I hope to start the second term soon and work harder to achieve my dream of attending and finishing my university studies.

Achieving my dreams to be a university graduate seems to be distant but, with the support of the women and girls' safe space, nothing is really impossible. I would like to voice my gratitude to the staff at the safe space who continually offer us the opportunity to break free, to my great English teacher for inspiring me, and finally to my loving family for supporting me throughout my endeavours.

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

SINCE JANUARY

People reached with sexual and reproductive health services	900
Family planning consultations	183
Ante-natal care consultations	52
Functional mobile clinics	3

GENDER-BASED VIOLENCE

INDICATOR

SINCE JANUARY

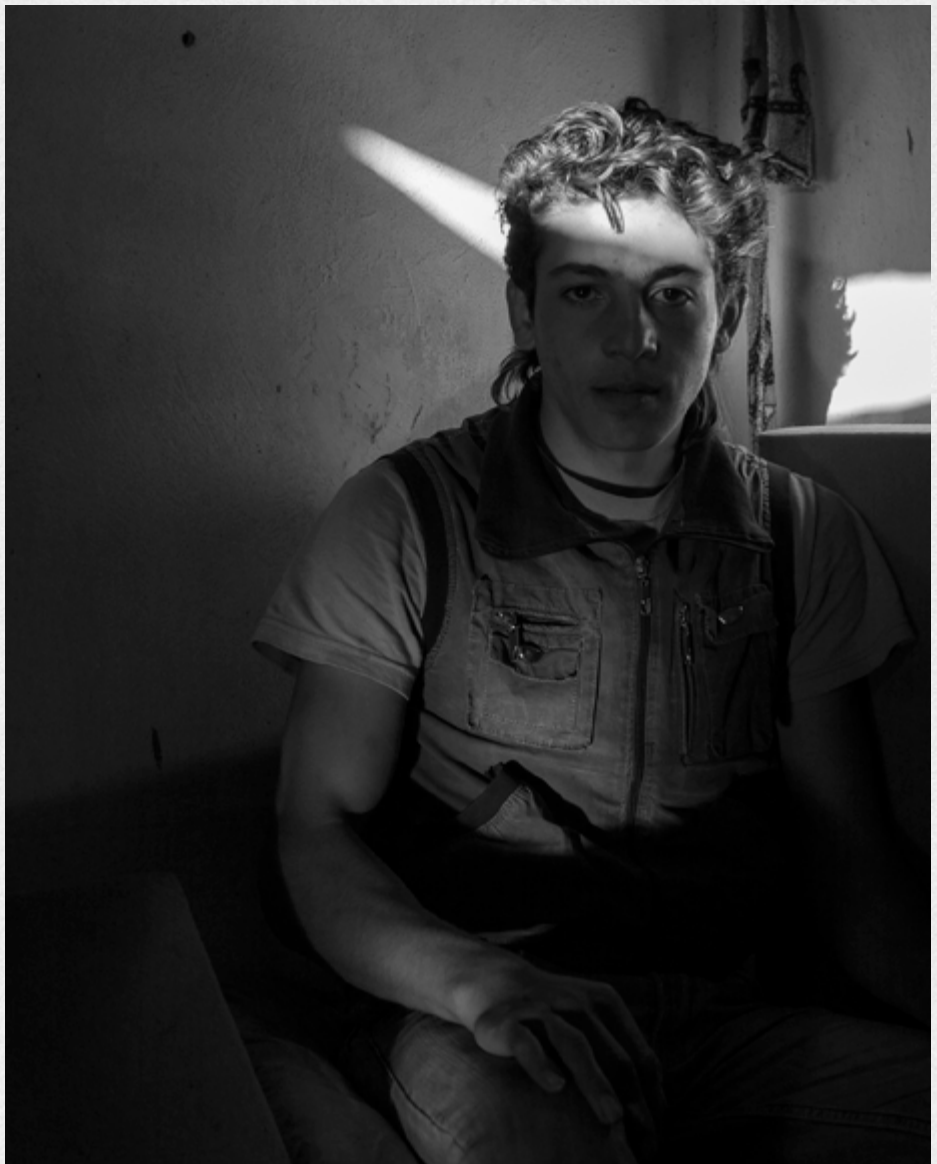
Number of women and girls' safe spaces (WGSS)	11
People reached with GBV programming / services	4,319
People provided with GBV case management	885
People reached with GBV awareness messages	2,456
People trained on GBV-related topics	47

YOUTH SERVICES

INDICATOR

SINCE JANUARY

People reached with youth programming	234
People trained on youth-related topics	23



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 12 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

	SINCE JANUARY
People reached with sexual/reproductive health services	23,008
Family planning consultations	6,081
Normal / assisted vaginal deliveries	932
C-Sections	268
Ante-natal care consultations	4,272
Post-natal care consultations	1,000
Health facilities that provide Emergency Obstetric Care (EmOC)	1

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	7
People reached with GBV programming / services	10,334
People reached with dignity kits	5
People provided with GBV case management	50
People reached with GBV awareness messages	15,280
People trained on GBV-related topics	18

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
People reached with youth programming	38,280
Number of functional youth centres	2





"I'm close to my daughter and fear for her safety every day. I want her and her children to go places in this world and to live a life unencumbered by war and displacement. When I see what girls like her are going through in the camp, how many are forced into marriage and abuse to survive, it breaks my heart. They deserve better. We all do."

— Abu Waseem, a Syrian refugee and father of three living in Iraq.



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

	SINCE JANUARY
Number of primary health facilities	17
People reached with sexual/reproductive health services	47,582
Family planning consultations	10,908
Normal / assisted vaginal deliveries	926
Ante-natal care consultations	17,183
Post-natal care consultations	2,568
Health facilities that provide Emergency Obstetric Care (EmOC)	2

GENDER-BASED VIOLENCE

INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	17
People reached with GBV programming / services	16,395
People provided with GBV case management	1,175
People reached with GBV awareness messages	6,231

YOUTH SERVICES

INDICATOR

	SINCE JANUARY
Number of functional youth centres	1
People reached with youth programming	4,725
People trained on youth-related topics	173



MAY HIGHLIGHT

Four years had passed since Samaher, 35, arrived to Al Azraq camp in Jordan with her three children. While displacement had taken its toll on the family, they were able to make it work, as her husband had found a decent job in Algeria that enabled them to provide a fairly stable life for their children.

Six months after arriving to Jordan, Samaher was surprised to discover that her husband had married another woman in Algeria, and the financial support he provided began to slowly dwindle. "It was one of the most devastating shocks of my life. I pleaded with him to come back to us, but he refused, which pushed me deeper into depression. I felt completely helpless as I had no means of supporting my children and no one to turn to. Even worse, I was dealing with a serious health condition that further complicated my situation."

Last October, the counsellor visited Samaher when she was referred to the UNFPA-supported Women Protection and Empowerment programme (WPE) — a programme launched by IRC to provide counselling to women seeking emotional and livelihood support. A close friend of hers had reported that she was in the throes of depression, having repeatedly heard her crying in her caravan and noticed that she was increasingly becoming isolated.

During the first evaluation, the counsellor concluded that Samaher was in serious need for support as her state of mind was affecting her quality of life, particularly as her children began to take note of her depression. She was enrolled in both group and individual counselling, with a focus on women's empowerment, stress management, and self-confidence. Samaher was also encouraged to attend the recreational activities at the WPE centres with the objective of forming new friendships and growing her social network, in addition to filling her time with activities that interested her.

Moreover, in an attempt to help her achieve true independence, Samaher was given the opportunity to work as a volunteer in the Women Protection and Empowerment Centre, located in one of the villages of Al Azraq camp. This experience left a noticeable change on her physiological well-being as she became stronger, developed her communication skills, and became a financially independent.

"Perhaps the greatest thing about this job is that it allows me to help other women who are in similar or worse situations," explains Samaher. "War and displacement have taken their toll on countless women, and it gives me great pride and comfort to be part of the solution instead of drowning in my own sorrows."



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 and reproductive health services	3,754
Family planning consultations	754
Normal / assisted vaginal deliveries	120
C-Sections	74
Ante-natal care consultations	1,059
Post-natal care consultations	154
Functional mobile clinics	5
People trained on RH-related topics	40

GENDER-BASED VIOLENCE

INDICATOR

SINCE JANUARY

Number of women and girls' safe spaces (WGSS)	15
People reached with GBV programming / services	13,459
People provided with GBV case management	2
People reached with GBV awareness messages	34,783
People trained on GBV-related topics	151

YOUTH SERVICES

INDICATOR

SINCE JANUARY

Number of functional youth centres	15
People reached with youth programming	840
People trained on youth-related topics	30



COUNTRY OVERVIEW

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

SINCE JANUARY

Number of primary health facilities	30
People reached with sexual and reproductive health services	57,140
Family planning consultations	15,625
Ante-natal care consultations	5,773
Post-natal care consultations	1,294
People trained on RH-related topics	454

GENDER-BASED VIOLENCE

INDICATOR

SINCE JANUARY

Number of women and girls' safe spaces (WGSS)	30
People reached with GBV programming / services	122,460
People reached with dignity kits	15,102
People provided with GBV case management	349
People reached with GBV awareness messages	36,072
People trained on GBV-related topics	277

YOUTH SERVICES

INDICATOR

SINCE JANUARY

Number of functional youth centres	4
People reached with youth programming	2,509

OTHER SERVICES

INDICATOR

SINCE JANUARY

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





MAY HIGHLIGHT

It was nearly three years ago that Dina had arrived in Turkey after escaping what became an impossible living situation in her hometown of Deir ez-Zor. While she had left in search of safety from war-wrought violence and instability, her own life had been torn to pieces at the young age of 14 after being forced to marry her immediate cousin. Today, at 19, she is the mother of two children and several weeks into her fourth pregnancy.

"While I managed to give birth to three children, my first child had died at the age of four due to complications from serious deformities he was born with," explains Dina. "It was by far the most difficult experience I had gone through and it haunts me to this day. He came to this world too soon, to a mother married too soon."

For Dina, birth control was never an option that her husband entertained, driven by prevailing customs in his community that favoured larger families. She had tried reasoning with him multiple times, explaining that pregnancies were slowly destroying her body and that their situation does not allow for additional mouths to feed, but he had sternly refused.

Toward the end of her first trimester, she had sought help from a UNFPA-supported health clinic, where her neighbours had previously received care. She had been experiencing distressing physical symptoms, including debilitating abdominal and genital pain. Upon examination, she was diagnosed with a severe genital infection and the doctors concluded that carrying her child to term posed a serious risk to her life.

"While terminating a pregnancy is legal in Turkey, especially when the mother's life is in danger, it has never been acceptable in my community," explains Dina. "My family and relatives consider it murder, and it was difficult to even discuss the idea with anyone I knew. I felt like all eyes were on me and that I had nowhere to turn. Fortunately, the staff at the centre were completely understanding and sympathetic to my situation. They made me feel as if my health mattered first and foremost, which was something I had never truly felt before."

Dina was put on intensive therapy for her infection to alleviate some of her symptoms and prepare her body for the termination of her pregnancy. Her husband had been invited to join her for the following session during which the medical team gave the couple a detailed diagnosis of her condition, explaining the risks associated with recurring pregnancies. Her body responded to the treatment fairly quickly and her pregnancy was terminated safely at the hospital. Following the termination, both she and her husband were enrolled in a training course explaining the best practices of post-termination care.

"I married at an early age and never felt that I had ownership over my body," explains Dina. "I am immensely grateful for the care I was given, which in this case has essentially saved my life."

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 May, the GBV sub sector coordinator in Damascus participated in the annual Global Protection Cluster meeting that took place in Bangkok. Throughout the meeting, different best practices and lessons learned from Syria were discussed and shared with protection colleagues and donors, including GBV mainstreaming, integration of GBV into SRH services.

A joint protection, child protection and GBV sub sector meeting also took place in Damascus with the objective of discussing the outcome of the protection sector evaluation and way forward. Overall, the partners evaluated the sector with an average of 70% satisfaction rating in all seven functions. A detailed action plan has been discussed and endorsed.

Meanwhile, representatives from the GBV sub sectors in Damascus and Turkey participated in the International Conference on Ending Sexual and Gender Based Violence that took place in Oslo. The conference was a collaboration between the Governments of Norway, Iraq, Somalia, and the United Arab Emirates, together with UNFPA, OCHA and the International Committee of the Red Cross. High-level delegations from 100 countries, top UN officials, Nobel Peace Prize Laureate Dr. Denis Mukwege and many civil society representatives gathered in Oslo to strengthen political commitment and increase funding to end sexual and gender-based violence in humanitarian crises.

In Turkey, a training on the Standard Operational Procedures on Women and Girls Safe Spaces (WGSS) took place in Ankara for those newly recruited at UNFPA-supported women and girls' safe spaces to ensure a harmonized delivery of services. This was followed by an orientation session in Istanbul on the prevention of and response to GBV, attended by representatives from the Provincial Directorate of Ministry of Family, Labor and Social Services. UNFPA's global mission, UNFPA's humanitarian programme and prevention of and response to GBV activities were discussed in detail.

In Jordan, the SGBV working group met regularly in May, with discussion focusing on youth and GBV. This included the presentation of COMPACT — interagency guidelines for working with and for young people in humanitarian settings. The working group also provided technical reviews of 12 proposals submitted to the OCHA managed humanitarian funding with the objective of identifying lessons learned on inclusion of people with disabilities in GBV programming. The working group also collaborated with sub-national coordination in Mafraq to support the establishment of CMR services in the area. Lastly, a multisectoral initiative brought together youth, protection and GBV actors and community volunteers to discuss solutions for street sexual harassment in the Zaatari Camp.



DONORS AND PARTNERS

THE WORK WE DO WOULD NOT HAVE BEEN POSSIBLE WITHOUT THE GENEROUS SUPPORT OF OUR DONORS AND PARTNERS, MANY OF WHOM HAVE BEEN SUPPORTING OUR OPERATIONS SINCE THE BEGINNING OF THE SYRIA CRISIS.

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

IMPLEMENTING PARTNERS

In Syria: Ministry of Health (MoH), Ministry of Higher Education (MOHE), Syrian Arab Red Crescent (SARC), Syrian Family Planning Association (SFPA), Agha Khan Foundation, Masyaf Charitable Association, Al Bir and Social Welfare Hama, Al Bir Charitable and Sociable Qamishly, Pan Armenian Charity Association, Al-Ihsan Charity Association, Al Bir and Al-Ihsan Charitable Association in Ras Alain, Albatoul Charity for Humanitarian Services, Islamic Charity Association – Aoun for Relief and Developments (AOUN), Monastery of Saint James the Mutilated (MSJM), Nour Foundation for Relief and Development, Syrian 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 (LFPADE), 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), NCF (National Council for Family Affairs), Questscope.

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

www.ocha.org

www.unhcr.org

<http://syria.humanitarianresponse.info>



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.