



When Sherin, a nine-month pregnant Syrian woman from Qamishli, arrived with her family to the Kawergosk camp 20 months ago, her life was beset with many challenges. "It was very difficult to stay in Qamishli in Syria. We tried hard to cross the border, seeking a safe place for our children who were then just four months old. In the beginning, we faced a lot of problems finding proper medication and care, but later, with the support of the international community, we managed to settle down and re-start our lives." Aged 21 years, Sherin is receiving pre-natal care services at the UNFPA-supported clinic in Kawergosk camp. "Having a female doctor is always better. We are satisfied with the services and care. Since my husband does not work, we cannot afford to pay the health care fees. UNFPA is helping us a lot; the staff at the clinic is following up my pregnancy to ensure a safe delivery. I love my children and I want to secure for them, the best life I can," she said. Credit: Shayda Hesami | UNFPA, 2015.

UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive health care 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 in host countries, including by advocating for human rights and gender equality, to better cope with and recover from the crisis.

UNFPA: Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.



HIGHLIGHTS

SYRIAN ARAB REPUBLIC

UNFPA provides 57,000 reproductive health and gender-based violence services to women and girls of reproductive age in Damascus, Rural Damascus, Homs, Tartous, Lattakia, Aleppo and Hama. UNFPA and the Family Planning Association organize International Women Day events in seven supported health clinics in four governorates.

LEBANON

UNFPA conducts 70 awareness sessions on child marriages in the region of Akkar, North Lebanon. Women leaders benefitting from these sessions reach 1,050 women from both Syrian and Lebanese communities. UNFPA provides services to 41 gender-based violence survivors, and reaches 244 Syrian gender-based violence survivors and individuals at risk. It also organizes 50 basic life skills awareness sessions for 820 women, and 84 awareness sessions on gender-based violence for 1,623 beneficiaries.

JORDAN

UNFPA provides 6,187 reproductive health services, reaches 3,365 beneficiaries with reproductive health-related messages, and conducts a five-day training session on clinical management of rape, targeting 23 health service providers. A total of 62 women and adolescent girls complete a 6-week life and vocational skills training course in the UNFPA safe space in Azraq camp. A health campaign targeting 30 youth held in Salt Youth Centre.

IRAQ

UNFPA provides 2,000 reproductive health services, trains 60 doctors on family planning counseling and 32 doctors on advanced life support in obstetrics, and distributes 60 reproductive health kits to support 48 primary health care facilities and 12 referral health facilities in the Kurdistan region.

TURKEY

UNFPA conducts a Minimum Initial Service Package (MISP) for reproductive health training in Gaziantep for 24 participants from the Ministry of Health's public health directorate, Ministry of Family and Social Policies, Prime Ministry, Disaster and Emergency Management Presidency (AFAD), and university public health departments of Kilis, Kahramanmaras, and Gaziantep. UNFPA signs a grant agreement with Hacettepe Public Health Foundation in Ankara for the establishment of a women health counseling unit serving a population of 20,000 Syrians residing in Ulubey of Altindag District, Ankara.

EGYPT

UNFPA trains 52 physicians serving Syrians in Greater Cairo, Delta, and Alexandria on reproductive health care and clinical management of sexual violence, while 60 Syrian community health workers receive gender-based violence training in Alexandria. As many as 300 Syrian youth (both genders) participate in sport activities, along with reproductive health awareness sessions. In Giza, 30 Syrian women attend a health awareness session while 20 youth participate in volunteerism training. UNFPA supports an awareness session on early detection of cancer, and distributes reproductive health material to 400 households in Alexandria.

March 2015 marked four years of civil war in Syria. While many in the world have moved on, Syrians find themselves trapped in conflict, and forced to flee for their lives. The fighting has killed at least 220,000 people; and 840,000 have been injured in violence. Life expectancy has fallen by approximately 20 years. Within the country, 7.6 million Syrians have been displaced and more than 650,000 are living in besieged communities, their majority surviving in dire conditions exacerbated by poverty. Nearly 4 million Syrians have fled their country and become refugees in neighbouring countries. Life is not easy for them either. Host countries strain to provide assistance to their own citizens in need, while also supporting new arrivals from Syria. Many women refugees have no option but to become heads of households, leaving their homes to make ends meet.

Four million women and girls of reproductive age have been affected

by the crisis, including 3 million inside Syria and 1 million in countries where they have sought refuge. Nearly half a million Syrian women are currently pregnant and of those women an estimated 75,000 will require emergency obstetric care to manage a complication. Women and girls have become front row witnesses and survivors of violence, including gender-based violence and forced marriages. Syria has become home to an unprecedented tragedy

UNFPA is urging longer-term investments to meet the needs of women and girls of reproductive age, to equip them with the skills and motivation to build a more stable future for themselves and their families, and to provide them with the minimum health and protection services they may need to continue their lives, and enhance their resilience.

HUMANITARIAN SITUATION



Syrian volunteers working at the UNFPA youth centre in Domiz camp holding signs of '#WhatDoesItTake' campaign in Kawergosk, Iraq.

Credit: UNFPA, 2014.

"The effects of the conflict are devastating for the people of Syria," said Mohamed Abdel Ahad, UNFPA's regional director for the Arab states. "Women can die because of lack of access to emergency medical care during birth complications. Sixty per cent of preventable maternal deaths take place in contexts of conflicts and emergencies. These are all deaths that we, as humanitarian agencies, should be able to prevent," he added.

SYRIAN ARAB REPUBLIC

Violence continues in many parts of the country in Aleppo, Idlib and Busra al-Sham in Dar'a. The month of March was marked by indiscriminate mortar and rocket attacks in Damascus city. All major roads remain prone to security incidents and temporary disruptions.

Deteriorating security is affecting the ability of humanitarian actors, including United Nations agencies, to deliver humanitarian assistance (especially through the joint UN convoys) to affected areas in Rural Damascus, Aleppo, Idlib, Deir ez-Zor and Dar'a.

Decline in the value of the Syrian pound, coupled with limited job opportunities, particularly for youth and fresh graduates, is affecting the economic status of Syrian families. As such, women find it challenging to access or receive timely reproductive health services due to their limited ability to pay the cost of services.

LEBANON

The United Nations Security Council, during its session held in March, urged the international community to help Lebanon in its efforts to host more than 1 million refugees from neighbouring Syria. The Security Council also expressed concern over border violations including the presence of terrorists and violent extremist groups in Lebanese territory.

Since the beginning of March, the government of Lebanon, through the General Security Directorate, is enforcing entry regularization among refugees coming from Syria. This means it is now much harder for Syrians to enter the country, while those residing in Lebanon are also facing difficulties in renewing their residency. This situation will place an increased economic strain on the families, and in addition to the expected decrease in basic assistance due to low funding levels, an escalation in negative coping mechanisms (such as begging, child labour, child marriages, sexual services for food/accommodation, petty crime, etc.) might be witnessed. This will require an increased focus on UNFPA's main sectors in order to not just prevent, but also respond to a potential increase in the number of people requiring support.

JORDAN

Jordan is the only country that continues to receive Syrian refugees fleeing the conflict; the number of new refugees arriving at the Azraq camp is increasing. During the reporting period, the population of Azraq had reached 16,901 individuals (females: 48.3 per cent, males: 51.7 per cent). The Zaatari camp is hosting around 83,615 refugees (females: 48.6 per cent, males: 51.4 per cent).

IRAQ

Over 233,625 Syrian refugees are registered with the UNHCR in Iraq; of these, 64 per cent are women and children. The majority of the refugees are residing in the Kurdistan region of Iraq in Dohuk, Erbil and Sulaymaniyah. While 56 per cent of the refugees are residing in host communities, about 40 per cent are living in camps and the remaining 4 per cent in other governorates in Iraq, mainly in the Anbar Governorate.

The effects of the arrival of refugees from Kobane, coupled with escalating internal conflict in central Iraq, have immeasurably compounded the humanitarian and security situation in Iraq.

The ongoing conflict in Iraq has led to massive displacement and widespread violations of human rights and humanitarian law. More than 300,000 civilians have been displaced during the first three months of 2015, bringing the total estimated displaced population to 2.5 million. The latter includes people who have been displaced for the first time, as well as those facing multiple displacements, which have further weakened their coping mechanisms. Since the estimated figures for civilians living in the Islamic State-controlled areas are not available, they are not included in the projected needs.

Displacement is expected to further increase in 2015 due to widespread violations of human rights and international humanitarian law, as well as ongoing military operations, which are likely to expand. As a result, protection incidents for internally displaced persons and refugees are also anticipated to rise, particularly in some of the newly accessible areas where displacement and return could trigger new cycles of sectarian violence.

Major protection concerns include threats to life and safety, as well as lack of access to basic services. All displaced women, girls, boys, and men are in need of targeted responses and services such as legal assistance, including but not limited to registration and documentation, protection against gender-based violence, child protection, housing land and property, and access to justice.

Massive internal population displacement in Iraq has impacted the ability of services to respond to the overwhelming needs. The situation has severely strained the capacity of the Kurdistan region in Iraq, as well as the international community including UNFPA, in ensuring provision of quality maternal health care services.

TURKEY

Syrian nationals continue to enter Turkey during the month of March. According to UNHCR, the total number of Syrians registered in Turkey stands at 1,718,147. However, the generally actual number of the Syrian population in Turkey is nearly 2,000,000. The armed conflict in Syria continues to be intense near the Syrian border with Turkey. A religious sectarian internal armed conflict escalated in Iraq and Northern Syria, causing further instability and population displacement in the region.

QUICK FIGURES

SYRIAN ARAB REPUBLIC:

SYRIANS AFFECTED BY THE CRISIS	12.2 MILLION
WOMEN AND GIRLS OF REPRODUCTIVE AGE	3.1 MILLION
YOUTH	4 MILLION

LEBANON:

SYRIANS AFFECTED BY THE CRISIS	1,177,234
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	296,360
SYRIAN PREGNANT WOMEN	20,837
SYRIAN YOUTH	208,232

JORDAN:

SYRIANS AFFECTED BY THE CRISIS	626,905
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	152,711
SYRIAN PREGNANT WOMEN	11,096
SYRIAN YOUTH	130,889

IRAQ:

SYRIANS AFFECTED BY THE CRISIS	233,625
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	56,279
SYRIAN PREGNANT WOMEN	4,135
SYRIAN YOUTH	65,078

TURKEY:

SYRIANS AFFECTED BY THE CRISIS	1,718,147
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	429,536
SYRIAN PREGNANT WOMEN	29,116
SYRIAN YOUTH	257,7220

EGYPT:

SYRIANS AFFECTED BY THE CRISIS	133,619
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	34,091
SYRIAN PREGNANT WOMEN	2,363
SYRIAN YOUTH	28,365

SOURCES: Turkey's Disaster and Emergency Management Authority (AFAD), UNHCR, OCHA, and UNFPA - March 2015

Women NGOs and United Nations agencies celebrate International Women's Day all over Turkey. Women in almost all cities of the country participate in marches as an expression of festivity.

Speaking at the United Nations General Assembly, Turkish Prime Minister Ahmet Davutoglu emphasized that strategies must be developed to prevent gender-based violence.

EGYPT

The number of registered Syrians who have sought refuge in Egypt has reached 133,619. Syrian refugees are scattered in rented households

in the outskirts of large urban centres such as Greater Cairo, Alexandria, and Damietta. They have been granted access to public services, including primary health care and education, at same cost as for Egyptians. However, issues related to the quality and availability of these services remains a major challenge, given that the public sector is already struggling to meet the needs of Egyptian citizens. With prolongation of the crisis and decreased funding, vulnerabilities are escalating among Syrian refugees, particularly in terms of debts incurred due to healthcare costs and increased risk of gender-based violence.

HUMANITARIAN RESPONSE 1-28 FEBRUARY 2015

SEXUAL AND REPRODUCTIVE INCLUDING FAMILY PLANNING



Sarab's life changed forever in January, when her husband was killed in a mortar explosion at the schoolyard where he worked in the Syrian Arab Republic. She found herself alone and pregnant at age 23. In the last weeks of her pregnancy, Sarab was consumed with grief and fear. Displaced, and now alone, she did not know whether she could cover the costs of delivery.

"I was so worried about how I would manage giving birth on my own," Sarab said. But before she gave birth, she was approached by one of the 68 UNFPA-supported mobile reproductive health teams in Syria. The mobile team provides reproductive health services and psychosocial support to women and girls of reproductive age, particularly in areas where care is difficult to access.

The health workers gave Sarab a voucher, ensuring she would be able to receive the maternal care and other services needed to safely deliver her baby.

Read the full story on www.unfpa.org

Credit: UNFPA, 2015

SYRIAN ARAB REPUBLIC

REPRODUCTIVE HEALTH SERVICES: UNFPA continues to support its implementing partners to deliver lifesaving reproductive health services to affected people in Syria. As such, 40,000 reproductive health and family planning services were provided to 16,500 women during the reporting period. Safe delivery services were also extended to 340 women through the UNFPA reproductive health vouchers; of the 340 women who availed these services, 165 opted for Caesarean Section. Moreover, UNFPA provided essential services in 95 cases of gender-based violence.

REPRODUCTIVE HEALTH SUPPLIES: UNFPA delivers reproductive health equipment and pharmaceutical supplies to the Ministry of Health and the Ministry of Higher Education health facilities nationwide to respond to the reproductive health needs including emergency obstetric care and safe delivery of 562,000 people.

As part of the United Nations joint convoy from Jordan to Syria, UNFPA also distributed 13 reproductive health kits to Tafas hospital in Dar'a, targeting 2,525 beneficiaries. And a total 12,850 female dignity kits were sent to Syria from Turkey.

REPRODUCTIVE HEALTH AWARENESS ACTIVITIES: UNFPA-assisted Syrian Arab Red Crescent (SARC) and Syrian Family Planning Association (SFPA) mobile teams reach 10,800 women in Damascus, Rural Damascus, Homs, Aleppo, Tartous, and Hama with awareness-raising sessions on reproductive health, including family planning.

SUPPORTING HUMAN RESOURCES: UNFPA continues to support the 28 mobile clinics, 27 static clinics, 13 medical points, and mobile teams of SFPA and SARC through deployment of 207 obstetricians, gynaecologists, midwives, nurses, and social workers in 12 governorates.

Around 1,000 women participated in an International Women's Day (IWD) event organized by UNFPA and the Syrian Family Planning Association (SFPA) in the seven UNFPA-supported health clinics in Damascus, Sweida, Aleppo, and Lattakia, to advocate for women rights and to celebrate the achievements of Syrian women. The event included awareness-raising and open dialogue sessions, interactive theater, and presentation of stimulating documentaries and movies. Moreover, it offered an opportunity for internally displaced women to sell their hand-made materials to the participants; and provided an opportunity to generate income in a safe environment.

LEBANON

REPRODUCTIVE HEALTH SUPPLIES: UNFPA delivers post-rape treatment kits to health Haykal and Mazloum hospitals in Tripoli; Majid Irsan primary health care centre in Choueifat; Baabda governmental hospital in Baabda; Hariri governmental hospital and Makhzoumi Foundation primary health care centre in Beirut; and Jbeil primary health care centre in Byblos. Additionally, post rape treatment kits were delivered to the recently trained primary health care centre in Fnaydek, North Lebanon.

REPRODUCTIVE HEALTH OUTREACH ACTIVITIES: UNFPA, in collaboration with the International Rescue Committee, Akkar Network for Development, and Lebanon Family Planning Association for Development and Family Empowerment (LFPAGE), implements 70 awareness sessions treating the subject of child marriage. These sessions, which were held in the region of Akkar, North Lebanon, were conducted by trained women leaders, reaching 1,050 women from both Syrian and Lebanese communities.

REPRODUCTIVE HEALTH RELATED MATERIALS: LFPAGE produces and distributes 2,100 pamphlets and health informative leaflets on child marriages and reproductive health.

JORDAN

REPRODUCTIVE HEALTH SERVICE: A total of 6,187 reproductive health services were provided at the UNFPA-supported facilities during the reporting period. Around 83 per cent of women benefited from these services inside the camp; 70 per cent of which were aged between 18-24 years. (33 per cent of the women were aged above 24 years.)

A total of 2,172 women received antenatal care services; 14 per cent of these women were inside camps and 86 per cent in hosting communities. Women under 18 years of age formed 10 per cent, while those above 24 years formed 51 per cent of the total beneficiaries. Similarly, 893 women benefited from family planning services during the reporting period; of these, 41 per cent were women living inside the Zaatari camp. UNFPA also screened 786 women for anemia; of these, 13 per cent were diagnosed with the condition.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: UNFPA reaches 3,365 beneficiaries with reproductive health-related messages; of these, 19 per cent were living with host communities, and 49 per cent were women aged between 18-24 years.

In the Azraq camp, UNFPA, through the International Medical Corps, offered a six-week training course to 62 women and adolescent girls on vocational skills and psychosocial activities.

REPRODUCTIVE HEALTH OUTREACH ACTIVITIES: UNFPA conducts 28 awareness sessions for 237 women visiting the UNFPA-supported reproductive health clinics during the reporting period. The sessions covered topics such as birth control methods, importance of attending ante-natal and post-natal care services, and family planning.

Ever since the UNFPA established its delivery clinic in Zaatari camp in July 2013, a total of 3,000 deliveries of babies have been delivered by skilled health care professionals. The total number of deliveries per month has increased; this is attributable to the new policy declaration under which Syrian refugees cannot access free health services outside the camps.

REPRODUCTIVE HEALTH TRAINING: Midwives working for UNFPA's implementing partner attended a day-long training session on screening for malnutrition at the Zaatari camp. UNFPA also conducted a five-day training session on clinical management of rape. Attended

by 23 health service providers, the training was aimed at building the capacity of practitioners to ensure for designing a comprehensive approach that would enable them to analyze their prevention strategies and understand where a particular intervention might fit within the larger picture.

UNFPA also arranged a two-day training on GBV standard operation procedures targeting 23 health service providers working in different national and international NGOs.

IRAQ

REPRODUCTIVE HEALTH SERVICES: During the reporting period, around 2,000 women benefited from reproductive health services; these included reproductive health consultations for 1,102 women, ante-natal care for 1,014 women, post-natal care for 248 women, and family planning services for 304 persons. Moreover, 296 babies were safely delivered in hospitals and maternities supported by UNFPA; 39 pregnant women opted for Caesarean Section deliveries supported by UNFPA.

REPRODUCTIVE HEALTH SUPPLIES: UNFPA distributes 60 reproductive health kits to support 48 primary health care facilities and 12 referral health facilities, including maternities, in the three governorates of Kurdistan.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: UNFPA organizes an awareness session on family planning on March 8, with 20 women benefitting from the activity.

REPRODUCTIVE HEALTH TRAINING: A total of 60 doctors were trained on family planning counseling and 32 on advanced life support in obstetrics.

SUPPORTING HUMAN RESOURCE: UNFPA supports the salaries of 10 medical doctors and 18 midwives/nurses working in the camps, with 68 midwives at the referral level and four medical doctors to monitor the quality of the services delivered.



Syrian women in six countries affected by the Syria crisis celebrated International Women's Day 2015 by signing greeting cards for all women in Iraq during a festival held in Darashakran camp in Iraq.

Credit: Khazad Al Massala, 2015.

TURKEY

REPRODUCTIVE HEALTH SERVICES: UNFPA, through its partners namely, the Syrian Social Gathering (SSG) in Mersin, International Middle-East Peace Research Centre (IMPR), and Harran University Department of Public Health in Sanliurfa, provides reproductive health services to 1,139 Syrian women. Of these, two Syrian women received gender-based violence services and 14 women under the age of 18 years received reproductive health services.

In view of the rapidly increasing number of Syrian refugees in Turkey, particularly in cities located close to the border but also in big cities like Ankara, UNFPA signed a grant agreement with Hacettepe Public Health Foundation in Ankara for the establishment of a women's health unit to meet the needs of 20,000 Syrian refugees residing in Ulubey of Altında District, Ankara. The purpose of this health unit is to increase access to counseling, reproductive health, and gender-based violence-related services of Syrian women and girls of reproductive age. The unit will act as a primary level health care centre with a limited number of clinical services. Within the unit, Arabic and Turkish speaking midwives and psychologists/social workers will be available to ensure the provision of services, and referrals..

REPRODUCTIVE HEALTH SUPPLIES: A total of 2,844 hygiene kits were sent to the Disaster and Emergency Management Presidency, AFAD provincial directorate of Gaziantep.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: UNFPA, through its implementing partners namely, Harran University, SSG, and IMPR organizes seven reproductive health awareness sessions for 392 Syrian women; of these, 112 women were in Urfa, 250 in Mersin and 30 in Zinzip camp.

REPRODUCTIVE HEALTH OUTREACH ACTIVITIES: During the reporting period, 160 people benefited from Turkish language courses organized by Harran University Unit. UNFPA conducted a reproductive-health awareness session for 30 Syrian women in the camp.

REPRODUCTIVE HEALTH TRAINING: UNFPA conducts MISP training for 24 participants from the Ministry of Health's public health directorate, Ministry of Family and Social Policies, Disaster and Emergency Management Presidency (AFAD), and university public health departments of Kilis, Kahramanmaras, and Gaziantep from March 10-12 in Gaziantep. The participants articulated the need for more trainings on topics related to emergency reproductive health and gender-based violence.

SUPPORTING HUMAN RESOURCES: UNFPA continues to support staff (psychologists, two Arabic teachers, a data processor, and midwives) in the NGO women counseling centres and in Harran University.

EGYPT

REPRODUCTIVE HEALTH SUPPLIES: UNFPA distributes post rape treatment kits to Caritas, Resala, and the Arab Medical Union serving approximately 60 adults and 16 children in Alexandria and Delta.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: Around 30 women in Giza participated in a health awareness session aimed at familiarizing Syrians with available primary health care services as part of an initiative for mainstreaming Syrians into the public primary health sector in Greater Cairo. During the session, questions related to reproductive health, immunization, child health, and mental health were answered. In addition, women received health educational material on reproductive health issues, gender-based violence, and addresses of nearby primary health care facilities.

A total of 20 young women in the UNFPA-supported safe space attended an awareness session on gender-based violence forms and services in 6th October. The participants were encouraged to share needs in their community, and choose topics for upcoming health awareness sessions.

In Cairo, 40 women and girls attended a session on early detection of breast and cervical cancers. The session was part of a social media campaign carried out by UNFPA-supported Syrian Women Association (Soureiyat) community centre in Cairo.

REPRODUCTIVE HEALTH TRAINING: UNFPA supports the training of 15 female primary health care physicians on gynaecological ultrasound use in Alexandria districts, which are marked by a high concentration of Syrian refugees. The training was carried out by professors of gynaecology and obstetrics as part of UNFPA's continuing support to mainstreaming Syrian refugees into the public health care sector.

As many as 22 gynaecology and obstetrics physicians working in public hospitals in Cairo received an intensive 12-day training on comprehensive emergency obstetric and neonatal care at the national training institute.



UNFPA conducted a celebration for Syrian refugees on the occasion of International Women's Day and Mothers' Day in Zaatar camp, Jordan.

Credit: IFH, 2015.

GENDER EQUALITY AND WOMEN'S EMPOWERMENT



A Syrian refugee in her tent with a hair dresser trainer of the Yasmin women safe space. While she fixes her hair, a social worker provides her and her mother with information on gender-based violence and reproductive health, as well as available services in Domiz camp, Iraq.

Credit: Suzdar Suleiman | UNFPA, 2015.

SYRIAN ARAB REPUBLIC

GENDER-BASED VIOLENCE SERVICES: During the reporting period, UNFPA-assisted SARC and SFPA clinics and mobile teams provide around 19,000 gender-based violence-related services, including medical examination and psychosocial support to around 5,600 women residing in the affected areas of Damascus, Rural Damascus, Idleb, Homs and Tartous. In Damascus and Rural Damascus, gender-based violence screening services were provided to 680 women; of these, 95 women turned out to be gender-based violence survivors who consequently received medical examination, community services, and legal advice by UNFPA-assisted SFPA clinic.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: UNFPA and its partners in Damascus, Rural Damascus, Homs, Lattakia, Tartous, Idleb and Dar'a provide 4,650 gender-based violence services, including 2,100 psychosocial support services during the reporting period.

GENDER-BASED VIOLENCE TRAINING: UNFPA imparts training on gender-based violence and the information management system classification tool to 17 SFPA administrators and heads of branches in eight governorates.

WOMEN AND GIRLS SAFE SPACES: UNFPA supports nine comprehensive reproductive health women centres in Damascus and Rural Damascus through the deployment of gynaecologists, midwives, psychosocial counselors, and nurses.

LEBANON

GENDER-BASED VIOLENCE SERVICES: UNFPA, in partnership with Intersos, provides individual psychological counseling services to 41 gender-based violence survivors and persons at risk, both Syrian and Lebanese. The initiative also involved creation of emotional support groups, reaching 244 Syrian gender-based violence survivors and individuals at risk, aged 13 and 50 years. The support groups allows women to build networks and support mechanisms among each other

as peers, and to identify women willing to liaise between Intersos and the community to activate the referral mechanisms, when needed.

GENDER-BASED VIOLENCE OUTREACH ACTIVITIES: UNFPA, in partnership with Intersos, organizes 50 basic life skills awareness sessions for 820 women, and 84 awareness sessions on gender-based violence for 1,623 beneficiaries.

GENDER-BASED VIOLENCE TRAINING: UNFPA and its partners conclude a 3-month life skills training in make-up, hairdressing, and manicure. The programme, which was followed by an internship in a beauty parlour, benefitted 58 women (their majority from Syrian community; most of them either gender-based violence survivors or girls and women at risk). Many of these women have started working from their homes, and at least one was able to find a job in a beauty parlour. UNFPA also engaged Lebanese and Syrian adolescent boys in a peer-to-peer programme on gender-based violence. A total of 812 boys aged 11-15 years participated in the programme.

JORDAN

GENDER-BASED VIOLENCE SERVICES: A total of 131 gender-based violence survivors benefited from safe and confidential case management services during the reporting period. A total of 1,468 women, girls, men, and boys benefitted from self-reliance, vocational training, and life skills activities; 272 were directly sensitized on gender-based violence issues, available services, and referral pathways while 1,630 were reached through outreach visits.

GENDER-BASED VIOLENCE OUTREACH ACTIVITIES AND AWARENESS SESSIONS: In Zaatari, UNFPA and its partners celebrated International Women's Day and Mothers' Day by organizing various activities such as presentation of poems on women and mothers, and an interactive theatre. In addition, awareness sessions on reproductive health issues, breastfeeding, and gender-based violence were also arranged. Furthermore, techniques of self-examination for



Syrian women celebrating International Women's Day in Kawergosk camp in Iraq.

Credit: Khazad Al-Massela, 2015.



Syrian women attending an intensive Kurdish language training session at Rajan, UNFPA-supported women's centre in Erbil, Iraq.

Credit: Veronica Njikhó | UNFPA, 2015.

breast cancer were imparted to all women participants. The ceremony concluded with presentation of gifts to Syrian women. A special gift was presented to the oldest Syrian lady in the Zaatari refugee camp.

UNFPA and its partner organization IMC visited the oldest refugee woman in the Azraq camp to ensure her special needs were identified and responded to. The woman, aged 103 years, is living alone with her daughter.

UNFPA has been holding community awareness workshops on gender-based violence and reproductive health issues at the Cyber City refugee camp, King Abdullah Park refugee camp, and the Emirati Jordanian camp. As many as 28 sessions (16 on reproductive health and 18 on gender-based violence) were conducted with 529 Syrian refugees in attendance. The sessions emphasized the adoption of safe behaviours in camps and positive behaviours within the family. Other topics included family planning, safe motherhood, breastfeeding, early marriage/pregnancy, sexually transmitted illnesses, and HIV/AIDS. The awareness sessions on gender-based violence focused on issues of domestic violence, gender-based violence prevention and response, sexual violence, sexual harassment, and details of available services in the camps.

Tailored group sessions on child married for children were delivered both in the Zaatari and Azraq camps. In the Azraq camp, self-defense courses continue to attract young females. In the Zaatari camp, legal counseling services for gender-based violence survivors are being piloted in 2 out of the 4 UNFPA safe spaces. These services are available on a weekly basis, and are being offered in cooperation with UNHCR and its partner ARDD Legal Aid.

GENDER-BASED VIOLENCE TRAININGS: A total of 62 women and adolescent girls completed a six-week life and vocational skills training course in the UNFPA safe space in the Azraq camp. The training course included activities related to psychosocial support.

UNFPA also conducted a two-day training workshop on-post abortion care for 20 doctors and midwives working at maternity clinics. The workshop was aimed at provision of clear guidance on post-abortion care advice and counseling, and family planning methods.

IRAQ

GENDER-BASED VIOLENCE SERVICES: A total of 74 women received counseling services while 5 cases were referred to the Danish Refugee Council for cash assistance in Erbil. Moreover, 29 gender-based violence cases were reported to UNFPA-supported women safe spaces in Domiz and Gawilan camps. Of these, 18 women received counseling, listening, psychosocial support while 3 received health services for clinical management of rape.

GENDER-BASED VIOLENCE SUPPLIES: UNFPA distributes 119 dignity kits to women and girls of reproductive age.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: On March 8, UNFPA supported the International Women's Day celebration in the refugee camps and host community under the theme 'Let's save our women and girls.' Assisted by its implementing partner Al Massela, UNFPA organized activities on issues around women refugees and how UNFPA can support mitigating the risk of gender-based violence and enhancing gender-based violence response in camps. These activities were led by the refugees themselves. A variety of messages pertaining to women and girls were disseminated through plays, dramas, songs and development of locally-relevant information, education and communication material. The event was commemorated in Basirma, Darashakran and Kawergosk camps and Kaznazan host community.

GENDER-BASED VIOLENCE OUTREACH/VOLUNTEER ACTIVITIES: UNFPA conducts 35 outreach sessions on gender-based violence and reproductive health-related information, targeting 9 women and girls in Basirma camp, 10 women in Darashakran camp, 250 women in Kawergosk camp, and 764 women in Domiz camp.

GENDER-BASED VIOLENCE TRAINING COURSE: UNFPA, in collaboration with Al Massela, conducts a gender-based violence case management course for 20 social workers managing women centres for Al Massela and other partners.

UNFPA and Al Massela also conducted a three-day training session on reproductive health and gender-based violence outreach techniques for 35 outreach volunteers. The session was aimed at enhancing outreach skills for linking women spaces and primary health care centres with the refugee community.

WOMEN AND GIRLS SAFE SPACES: Two new women spaces for refugees were established in Domiz camp 2 in Dohuk and Gawilan camp in Erbil under the leadership of the Department of Social Affairs (DOLSA).

RECREATIONAL ACTIVITIES IN WOMEN CENTRES: A total of 2,177 women and girls participated in the UNFPA-supported recreational activities in camps. In Erbil, 394 women and girls benefited from literacy, English, sewing, and hairdresser sessions in the UNFPA-supported women space in Basirma camp; 253 women and girls participated in knitting, sewing, and hairdresser sessions in the UNFPA-supported women space in Darashakran camp; 654 women participated in knitting, sewing, English, and hairdresser sessions in the UNFPA-supported women space in Kawergosk camp; 82 women and girls attended hairdressing, as well as sewing and knitting training in Domiz camp.

TURKEY

GENDER-BASED VIOLENCE SERVICES: According to the UNFPA-supported counseling units, 150 Syrians benefited from gender-based violence services during the reporting period.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: UNFPA organizes three awareness sessions at the Nizip 1 camp, and the counseling units in Urfa and Mersin, reaching 205 Syrian women in all.

GENDER-BASED VIOLENCE OUTREACH/VOLUNTEER ACTIVITIES: UNFPA, through its partner Harran University in Urfa, offers a Turkish language course to 113 Syrian refugees so that they are able to communicate with host community and narrow down the language gap barrier.

EGYPT

GENDER-BASED VIOLENCE TRAINING COURSE: UNFPA supports the training of 15 physicians on clinical management of rape. These

physicians were working with UNHCR medical partners in Delta, Alexandria, and Matrouh. Post rape treatment kits supplied by UNFPA were also distributed to providers based on caseload.

WOMEN AND GIRLS SAFE SPACES: UNFPA supports two women safe spaces for adolescent girls in Masr El Gedida. These spaces offer several services including psychosocial support, training, recreational activities, awareness campaigns, and sport activities.

As part of International Women's Day celebrations on March 8, UNFPA with UN Women hosted an event at the American University in Cairo. UNFPA's implementing partners were able to display their products; the event also featured a cultural performance by a Syrian youth group.

UNFPA-PUBLICATIONS



Journalist Handbook on Reporting on GBV in the Syria Crisis

Under the patronage of Her Royal Highness Princess Rym Ali, UNFPA launched a handbook on 'Reporting on Gender-Based Violence in the Syria Crisis' to help journalists better understand issues surrounding gender-based violence (GBV) and to write about it more effectively and sensitively.

The handbook is the first comprehensive collection of practical tips for journalists on how to report on GBV in the context of the Syrian crisis, building upon internationally recognized ethical principles. It gives an overview of techniques to guarantee the safety, confidentiality, and dignity of survivors, their families and communities. It includes terms, ethical questions and practical concerns associated with covering GBV, as well as an overview of some of the organizations involved in both combating GBV and providing support services for survivors.

The handbook was developed by UNFPA in collaboration with a selective group of journalists and experts in the area of GBV, and with the financial support of the United Kingdom's Department for International Development (DFID). It will be distributed in the six countries affected by the Syria crisis and will be used in trainings for journalists.



Women and Girls Safe Spaces – Guidance note based on lessons learned from the Syria crisis

UNFPA, with the financial support of the United Kingdom's Department for International Development, launched the 'Women and Girls Safe Spaces: Guidance Note Based on Lessons Learned from the Syria Crisis,' in March. The document provides guidance on how to establish women and girls safe spaces in humanitarian and post-crisis contexts, and presents key guiding principles for the management of these spaces. The guidance is based on the experiences of UNFPA and its partner organizations in Jordan, Lebanon, Iraq, Syria and Turkey. It also refers to experiences documented by the GBV coordination mechanisms in Jordan and Lebanon.

The gender-based violence information management system: Reporting on data collected May-December 2014

The Gender-Based Violence Information Management System (GBVIMS) Task Force compiled and generated the end-of-year report covering incidents reported to GBVIMS agencies from May 1 to December 31 in Amman Governorate, Irbid Governorate (including Cyber City and King Abdullah Park), Mafraq Governorate (including Zaatari refugee camp), and the Azraq and Emirates Jordanian camps. The report provides specific non-identifiable information on survivors, types of violence, perpetrators, country and location of incidents, and service provision.

SUPPORTING ADOLESCENTS AND YOUTH



UNFPA conducted a session on child marriages in the UNFPA-supported centre in Deir Alla in Jordan, targeting young Syrian and Jordanian women.

Credit: UNFPA, 2015.

JORDAN

UNFPA, in partnership with teams of the Institute of Family Health, conducts 54 recreational activities in camps and host community, benefiting 584 beneficiaries. These activities included open sessions and handcrafts to relieve stress and increase community cohesion. Syrian volunteers also helped mobilize the Syrian community and identify their needs and likes.

Youth educators of the Institute of Family Health, both at the camps as well as in the static clinic in Deir Alla, conducted 35 youth activities, benefiting 502 youth (both male and female) aged 15-24 years. They conducted awareness sessions on issues relevant to youth and gender-based violence and reproductive health, in addition to life skills and recreational activities.

As many as 36 women refugees and 22 Jordanian women in the host community (aged under 18 years); and 8 male refugees in host community (also aged under 18 years) participated in self-reliance, vocational training, and life skills. In the age bracket of 18-24 years, there were 66 women refugees and 63 Jordanian women in the host community; moreover, 13 male refugees in the host community and 1 Jordanian male also participated in self-reliance, vocational training and life skills. In the camp setting, 382 female and 268 male refugees (under 18 years of age), and 27 female and 46 male refugees in the age bracket of 18-24 years participated in these activities.

During the reporting period, the Directorate of Youth Affairs at the Higher Council for Youth, in collaboration with UNFPA, carried out a health campaign in Salt Youth Centre with the participation of 30 youth. The campaign lasted six days and was aimed at imparting knowledge in the field of women's reproductive health care and sexually transmitted diseases. It also encouraged exercise of positive behaviour while refraining from negative attitudes.

IRAQ

YOUTH-RELATED TRAINING COURSE: A total of 23 youth benefit from a five-day basic peer education session.

YOUTH ACTIVITIES: UNFPA organizes various socio-cultural activities in connection with International Women's Day; these included peer

education sessions, basic computer training, photography sessions, and a drawing course. During the month of March, 400 boys played football, 24 boys played volleyball, 10 boys and 6 girls participated in the handcraft session, 12 boys and 3 girls played chess, 20 girls participated in dance and physical exercise, 12 boys and 8 girls participated in a drawing course, and 14 boys and 4 girls attended the music course.

YOUTH AWARENESS SESSIONS: A total of 800 tent visits conducted to orient male and female youth on various topics during the month.

PRODUCTION OF SUPPORT MATERIAL: UNFPA supports the translation of life skills manuals into Kurdish to facilitate life skills education to young people. One out of four of these manuals has been printed and is ready for use.

EGYPT

YOUTH-RELATED TRAINING: A total of 300 Syrian youth continue to receive football training for boys and basketball training for girls in 10th Ramadan and 6th October areas of Cairo. During the training, which is held three times a week, behavioural communication material is distributed, and a weekly reproductive health awareness session is held. A tournament with Egyptian teams in the area has also been initiated to build social cohesion and sensitize the host community to the needs of Syrian refugees.

YOUTH ACTIVITIES: A total of 20 Syrian youth attended a volunteerism and human rights training organized in collaboration with Y-PEER and the Arab Organization for Human Rights.

PRODUCTION OF SUPPORT MATERIAL: As many as 1,800 copies of reproductive health and GBV material were distributed to around 400 households in Alexandria to raise public awareness and direct beneficiaries to relevant services for reproductive health and gender-based violence.



"I can finally breathe," said Hiam, a 13 year-old Syrian refugee living in Lebanon. "Being enrolled in hair dressing courses and learning so many skills was a dream to me," she said. "It felt like continuing the educational that I had to drop due to my displacement."

Read the full story on www.unfpa.org

Credit: UNFPA, 2015.

COORDINATION & CAPACITY BUILDING

SYRIAN ARAB REPUBLIC

UNFPA participates in the United Nations sector group meetings on health, protection, and logistics, as well as meetings of the United Nations Humanitarian Country Team and the United Nations Security Cell.

UNFPA participates in the United Nations Programme Management Team to discuss the processes governing the preparation of the strategic framework.

UNFPA leads the GBV sub-cluster for cross border operations from Turkey.

LEBANON

UNFPA is currently mapping activities related to family planning. The aim of this exercise is to identify key actors involved in family planning, and to have a clearer idea about existing programme interventions, beneficiaries, and locations. The mapping will also help identify duplications and/or gaps, thereby ensuring a complementary and coordinated approach among relevant actors. It will also inform where the focus and workload should be. A matrix prepared by UNFPA was shared with members of the Reproductive Health Sub-Working Group as well as the Health Working Group.

UNFPA participates in the coordination review process initiated by the United Nations Resident Coordinator's Office and OCHA. The objective of this review was to provide recommendations for the overall optimal coordination structure in Lebanon. Recommendations will be made on the roles, responsibilities, and practices of different mechanisms with an aim to clarify and strengthen coordination and accountability between partners and the Government of Lebanon, keeping in mind the different mandates and underlying accountability to vulnerable individuals and communities.

UNFPA attends the monthly SGBV Task Force meeting, chaired by UNHCR and co-chaired by UNFPA and UNICEF. During the meeting, a further discussion on targets for the SGBV Task Force for 2015 was initiated. BBC Media Action, in cooperation with Relief International, proposed the development of a video related to domestic violence. The Task Force provided comments and recommendations to improve on the video and its message. Input was also provided for revision of leaflets for the referral pathway.

JORDAN

UNFPA organises a consultation on ways forward towards achieving MDGs 4 and 5, identifying gaps in reproductive health, enhancing

UNFPA-SUPPORTED FACILITIES



Number of women's spaces

SYRIAN ARAB REPUBLIC

3

JORDAN

17

(10 in camps)

LEBANON

5

IRAQ

9

(3 in host communities)

EGYPT

2

TURKEY

1



Number of reproductive health clinics or mobile teams

SYRIAN ARAB REPUBLIC

68

JORDAN

17

(10 in camps)

IRAQ

8 in camp

(40 in non camp)



Number of youth centres

JORDAN

7

(10 in camps)

LEBANON

5

IRAQ

1



Number of health facilities

SYRIAN ARAB REPUBLIC

200

3 hospitals

JORDAN

All Ministry of Health Facilities
/all NGOs providing RH services

IRAQ

5

EGYPT

5

TURKEY

3

utilization of resources, and strengthening linkages among concerned stakeholders.

UNFPA chairs the Reproductive Health Sub-Working Group meeting, where partners discussed ways to achieve the MDG 5 targets through implementation of the 'Making Pregnancy Safer' initiative and integrating gender based-violence guidelines within reproductive health services.

UNFPA, together with UNHCR, co-chairs the bi-weekly National Gender-Based Violence Sub-Working Group meeting as well as the SGBV working group in Zaatari camp.

The Youth Task Force (YTF) endorses the action plan for 2015 focusing on youth participation, advocacy on behalf of youth, and programming for youth needs. It also updated the term of reference of YTF.

IRAQ

Following the activation of the Gender-Based Violence Sub-Cluster, UNFPA is now officially a national coordinator for the GBV sub-cluster for the double emergency of Syrian refugees and Iraq's internally displaced persons. In view of this, UNFPA has been leading the process for the development of humanitarian needs overview and a humanitarian response plan for internally displaced persons, which will have implications for the refugee response as well.

UNFPA chairs the Gender-Based Violence Sub-Cluster at Dohuk level, and spearheads the development of a gender-based violence contingency plan, which is under finalization to ensure preparedness for gender-based violence response.

UNFPA and UNHCR are leading the gender-based violence informational management system roll-out in Erbil, Dohuk, Sulaymaniyah, and Baghdad. Awareness meetings and self-assessment exercises are taking place with data gathering organizations to determine roll-out service providers and selection of locations.

Following the activation of the Gender-Based Violence Sub-Cluster, UNFPA is now officially a national coordinator for the sub-cluster due to the double emergency of Syrian refugees and Iraq's internally displaced persons. In view of this, UNFPA has been leading the process for the development of humanitarian needs overview and a humanitarian response plan for internally displaced persons, which will have implications for the refugee response as well.

The attention of the Gender-Based Violence Working Group in Sulaymaniyah was drawn towards young school girls encountering different forms of harassment. The working group has established a committee to address the issue.

TURKEY

UNFPA attends the biweekly meetings of the United Nations Syria Crisis Task Force in Ankara, and field sector coordination meetings in Gaziantep.

UNFPA chairs the Gender-Based Violence Working Group monthly meetings at the Ministry of Family and Social Policies, General Directorate of Woman's Status (GDWS). The meeting featured a discussion on agency collaboration activities on gender-based violence humanitarian response.

UNFPA meets with AFAD (Disaster and Crisis Management Institution) provincial directorate and the governor of Gaziantep for a discussion on challenges impeding the provision of services in the field.

EGYPT

UNFPA participates in the UNHCR Mainstreaming Task Force meeting, where the participants discussed coordinating efforts for finalizing launch of mainstreaming Syrians into primary health care in Cairo.

UNFPA participates in the SGBV Sub-Working Group meeting, where members discussed outreach and communities activities, SGBV priority activities/projects, and standard operation procedures.

UNFPA participates in the mass information and outreach meeting, where participants shared updates on partner activities, communication strategy for mainstreaming Syrians into primary health care in Cairo, and partnership with Arab Diabetes Society for better management of diabetes among Syrians.



Wondering what the future holds for her, a Syrian girl is playing outside the tent, waiting for her mother to complete a session on reproductive health related issues in the UNFPA-supported women's centre in Nizip 1 camp, Turkey.

Credit: Behire Ozek | UNFPA, 2015.

CHALLENGES

SYRIAN ARAB REPUBLIC

Limited financial resources, deteriorating security conditions, and increasing operational costs are affecting the ability of UNFPA to ensure timely provision of reproductive health and gender-based violence services to beneficiaries.

Timely delivery of humanitarian assistance, especially in the light of Security Council Resolutions 2139 and 2165, has become a challenge due to ongoing security conditions and coordination issues with neighbouring countries. As such, UNFPA implementing partners in the opposition-controlled areas are facing challenges in the delivery of timely reproductive health services to women in need.

Monitoring of the UNFPA-supported humanitarian response continues to be a challenge due to inaccessibility to affected areas in the Syrian governorates.

LEBANON

Some gender-based violence survivors refused counseling due to social prejudice around psychological help. Others refused to continue upon discovering that they would not receive any additional cash assistance to support them.

The validation of residency permits undertaken by the Government of Lebanon is of concern to many beneficiaries who are not able to renew their papers. Obtaining a valid permit is, until now, virtually impossible for Palestinian Refugees from Syria. This is causing limited mobility of the beneficiary population, which again may affect attendance or drop-out rates.

It would reportedly be easier to attract additional participants if incentives such as sanitary pads or dignity kits are given to them. According to LFPAD, it was easier to have participants to previous sessions where dignity kits were distributed.

JORDAN

There are challenges in the deployment of qualified gynaecologists and obstetricians for new reproductive health centres in camps. Since most of the local female obstetricians have their own private clinics, they do not accept full-time outside employment; a majority of the refugees has expressed strong preference for female obstetricians and health workers.

High turnover between health care professionals had led to interruption of some services; as such, there is a continuous demand for capacity-building of new staff.

Increasing salary scales of health care professionals due to high demand and competitiveness between organizations are stretching the already scarce resources.

Movement of Syrian refugees and the inability to reach cases over the telephone creates challenges in terms of arranging visits, implementing the protection programme, and ensuring continuity in the delivery of required care.

IRAQ

Funding for refugee response is getting thinner day by day due to the protracted Iraq conflict.

Operational protection strategy for refugees in urban areas is insufficiently developed in Iraq, affecting the response provided; and yet over 60 per cent of the Syrian refugees reside in non-camp communities.

Refugee camps are overcrowded with the additional refugees from Kobane. Lack of effective mechanisms to engage with refugee community in urban areas has limited awareness-raising activities on gender-based violence.

The inability to get a budget passed for the Kurdistan Region by the Government of Iraq has led to a significant decline in availability of funds for the Ministry of Health, which has resultantly impacted refugees, internally displaced persons, and people in host community. The situation has stretched the health sector response in some areas beyond coping capacity.

TURKEY

Weak data collection and management information systems are a challenge. AFAD figures on deliveries are lower than humanitarian standard estimates would indicate, thus raising questions on unattended deliveries in camps and host community.

Host community and humanitarian services are negatively affected by collateral damage in the border region.

Tensions between the host community and Syrians continue to grow. There have been protests and violence against Syrians in Gaziantep, Sanliurfa, and several other places.

Finding a specialized or trained partner on gender-based violence and reproductive health is still a challenge, especially when it comes to cross-border operations.

EGYPT

Refugees are scattered over large urban areas in Egypt, making it challenging for most aid agencies to extend support to them. Moreover, since the population is still on the move, the allocation and provision of services continues to be difficult.

Birth registration of Syrian newborns in the absence of the father or marriage certificate remains an issue that requires advocacy, although several legal and human rights organizations are currently providing aid for registration of these cases.

Although the Government of Egypt has allowed access to medical and educational public services for Syrians, the issue of improving accessibility and quality of services remains a challenge and necessitates continual support and capacity-building of sectors in areas marked by a high concentration of Syrians.

The living conditions of refugees are alarming; they often live in crowded quarters with multiple family households. Lack of privacy contributes to tensions and increased domestic violence.

FUNDING

UNFPA-Syria received \$501,286 from the Central Emergency Response Fund (CERF) to support the reproductive health programme and \$839,287 to promote and conserve personal hygiene of affected men and women.

UNFPA-Lebanon received \$430,000 from The Bureau of Population, Refugees, and Migration (BPRM).

UNFPA-Iraq received \$250,000 from CERF underfunded window to support reproductive health interventions among Syrian refugees in Kurdistan Region in Iraq.

UNFPA-Turkey received \$872,900 from CERF to support a project titled 'Emergency Sexual and Reproductive Health and Gender-Based Violence Response for Syrian Women and Girls.'



The basketball and volleyball play yard hand over in Kawergosk camp in Iraq, thanks to the contribution of the Government of the United States of America. Credit: UNFPA, 2015.

ECHO FROM THE FIELD

UNFPA introduced Syrian women to basic concepts of gender-based violence through an interactive exercise organized in Nizip 1 camp in Nizip-Gaziantep. An evaluation showed a positive and marked difference in the knowledge gained by women participating in the session.

UNFPA received many requests from Syrian women and girls for the establishment of a library in the women safe space in Nizip 1 camp, therefore UNFPA purchased books on reproductive health, psychosocial issues, and parenting. "We would like to be together with our children in spaces where books can be found for both children and women."

A Syrian refugee woman in Turkey.



Credit: UNFPA, 2015

DONORS & PARTNERS

UNFPA IS GRATEFUL FOR THE SUPPORT OF THE FOLLOWING DONORS IN THE SYRIA CRISIS:

Australia, Canada, European Commission, Germany, Denmark, Italy, Kuwait, Netherlands, Norway, OCHA/CERF, Qatar, United States, United Kingdom, UNDP.

IMPLEMENTING PARTNERS

IN SYRIAN ARAB REPUBLIC: Ministry of Social Affairs and Labor (MOSA), Ministry of Health (MoH), Ministry of Higher Education (MoHE), Syrian Family Planning Association (SFPA), Syrian Arab Red Crescent (SARC) and International Medical Corps (IMC).

IN LEBANON: Ministry of Public Health, Ministry of Social Affairs, Lebanese Family Planning Association, Palestinian Red Crescent Society, Humedica, Makhzoumi Foundation, Amel Association, International Medical Corps and Caritas Lebanon, KAFA ("Enough Violence and Exploitation"), Akkarouna, INTERSOS, SHEILD, LOST, Heartland Alliance, Makassed Primary Health Care Centers, Mazloum Hospital and International Organization for Migration (IOM).

IN JORDAN: Ministry of Health (MOH), Institute for Family Health (IFH), International Medical Corps (IMC), International Rescue Committee (IRC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Un Ponte Per (UPP), Jordanian Women's Union (JWU), Youth Peer Education Network (YPE), NCFCA (National Council for Family Affairs).

IN IRAQ: Ministry of Culture, Sport and Youth (MCSP), Ministry of Labor & Social Affairs (MLSA), AL Massela, START NGO and Harikar.

IN EGYPT: Ministry of Health (MOH), Resala and FARD Foundation.

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 Polices (MoFSP), Turkish Red Crescent Society (TRCS), universities including Harran in Sanliurfa, NGOs including the International Middle East Peace Research Center (IMPR), Syrian Social Gathering.



CONTACT INFORMATION

Daniel Baker,
UNFPA Syria Regional
Response Advisor
baker@unfpa.org
+962797225829

Ruba Hikmat,
UNFPA Syria Regional
Communications & Media Specialist
hikmat@unfpa.org
+962795096066

RELEVANT RESOURCES

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