



UNFPA programmes incorporate a variety of activities for women in camps: sewing and knitting session in Azraq camp, Jordan

"We had to leave home because ISIL moved into our neighbourhood. We lived under their rule for months, but I could not bear living there anymore," Rabee'a, a mother of six, says, explaining her reasons for leaving her home in Homs only a few weeks ago.

"Before the war, I used to go out on my own, without a relative male escort - muhrum - but suddenly, women weren't allowed to move around freely anymore. I wasn't even allowed to sit on my own terrace or be in my garden on my own! They banned so many normal activities that nobody would think as problematic such as my daughters going to school; they banned education for girls! Funeral prayers. And 'Eid' celebrations. I couldn't bear living in such a restrictive environment. My family does not share ISIL's values, and we decided to leave."

When Rabee'a arrived in Azraq camp in Jordan, an outreach volunteer approached her, introduced her to available services, provided her with basic information, and invited Rabee'a to join women at the centre. At the centre, she learns new skills that she believes will be useful in the future, and sees an opportunity to make a contribution herself. In Syria, she used to make children's clothing and sell them to boost her income. She says the sewing classes could be more than just a leisure activity to pass time.

"I could teach other women how to make clothes for children out of blankets, for example. If only there were more sewing machines! One is not enough." Rabee'a believes there is a lot of skill and talent among women and is excited about the possibilities. "There are so many things we could make ourselves that our families desperately need - such as warm clothing for winter."

"My favourite crochet pattern is called 'Yasmeen.' It reminds me of 'ash Sham.' It's what we call Damascus - the city of jasmine - where jasmine trees grow with their beautiful and fragrant blossoms. One day, I will teach this pattern to all women in Azraq. Crochet helps dispel some of our worries."

Credit: David Brunetti | UNFPA,2014

HIGHLIGHTS

SYRIAN ARAB REPUBLIC: UNFPA delivers 315,000 reproductive health services, distributes 211 reproductive health kits, as well as 20 Dopplers and ultrasound machines to health facilities serving 268,500 internally displaced women. It also reaches 16,800 women with gender-based violence related messages, and provides 26,500 gender-based violence related services.

LEBANON: UNFPA provides reproductive health related services to 8,080 women and girls, mostly in Bekaa and Akkar. It provides 332 gender-based violence related services, as well as distributing 185 dignity kits. UNFPA also promotes male engagement in support of gender-based violence prevention and response at the community level by inviting 36 men to attend awareness sessions.

JORDAN: UNFPA provides 11,630 reproductive health services and reaches 3,609 beneficiaries with health messages in camps and host communities. A total of 9,608 refugees participate in gender-based violence related awareness sessions while 1,220 youth participate in UNFPA-supported activities. UNFPA, in partnership with Questscope, inaugurates a comprehensive youth centre in Zaatari camp.

IRAQ: UNFPA provides 4,740 reproductive health services to women and girls, supports the delivery of 533 babies, and manages 117 Caesarean-section deliveries. As many as 167 refugees benefit from gender-based violence services, while 717 are reached with information on gender-based violence, and 1,110 participate in recreational activities. A total of 477 girls and boys participate in activities organized within UNFPA-supported spaces in camps.

TURKEY: UNFPA provides reproductive health and family planning services to 1,390 women and girls, and gender-based violence related services to 153 women and girls. Moreover, it provides 212 hygiene kits for children and 104 for women in Gaziantep. Supported by UNFPA, the Adana provincial public health directorate organizes a training workshop on emergency obstetric care for 51 Turkish midwives and nurses.

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.



HUMANITARIAN SITUATION



Syrian refugee families are facing increased financial stresses.

"Before the war, we had a good life. My children were doing well in school. We weren't rich, but for me, it was like heaven. Our family life was happier too. I only left Dara'a to keep my children safe" says Habeeba, a Syrian refugee in Jordan.

Now there's a lot of tension due to the family's financial situation. Habeeba's eldest son has recently found work, but the family has therefore been excluded from the food aid programme. "I don't know why. My son is the only one who works and he earns 250JD only, which is barely enough to pay for the rent and bills. We need the vouchers. I'm not sure how we will manage without them."

"Discrimination is normal," Habeeba remarks. Many Syrians experience discrimination, especially from informal and formal authorities such as landlords. Landlords often ask for rent in advance, pushing or threatening vulnerable Syrian families out of their accommodation. In Habeeba's case, the man responsible for running water came to her house and asked for money in advance, even though they had just recently settled their previous bill. When she refused to pay because of lack of funds, he replied: "You Syrians are always unreliable."

"Our life has to continue. If there isn't just a little bit of normalcy, then we'll have nothing," fears Habeeba, who is determined to keep her children in school. After hearing from a neighbour about its services, Habeeba turned to the women's centre in Zarqa, Jordan to help herself and her children to adjust to their new environment. "My two youngest children don't go to school because they get bullied there. They call them 'Syrians' like it's an insult! I worry what is going to become of them without education."

Families under stress need extra support. UNFPA is helping parents be the best they can be, for their children, and for themselves. The women's centre in Zarqa offers psychological counseling and support. Here, Habeeba receives the assistance to help her understand her children's needs and behaviour.

Credit: David Brunetti | UNFPA,2014

SYRIAN ARAB REPUBLIC

No major change in the map of influence was observed during the reporting period as clashes continued between the Government of Syria and armed opposition groups in the northern and southern parts of the country. Increased mortar and rocket shelling was reported on Damascus, Homs, and Lattakia cities.

Sanctions imposed on Syria continued to adversely impact the ability of economic and social sectors, including health, to better serve people during the crisis.

Despite the salary increase made for government employees, the deteriorating economic situation of Syrian families, especially displaced persons, negatively affected their ability to cope with the crisis. As such, many women and girls were at risk of gender-based violence, particularly domestic violence.

The rising trend of emigration among Syrian people, especially youth, has triggered a dramatic "brain drain", especially within the economic and service delivery sectors, as well as exposing the migrants to a wide variety of hazards on their journey.

LEBANON

The total number of registered Syrian refugees as of September was 1,113,941, declining from 1,172,753 in the previous month. Although registration of Syrian refugees has remained temporarily suspended since May 6, 2015, there is still movement across the border. The majority of refugees who are currently arriving are transiting through Lebanon, travelling on by boat from Tripoli to Turkey, and on to Europe. The authorities are issuing transit visas. Concerns remain regarding the risks (such as that of trafficking) involved in such movement of people through Lebanon.

As a result of funding shortages, the World Food Program (WFP) discontinued its safety-net assistance, which was given to vulnerable individuals (10,000 since 2013).

A cross-sector analysis of household visits indicated that 38 percent of the households were socio-economically vulnerable, and 84 percent were living in low quality shelters. Early marriage remained the key access barrier to education for girls aged between 15-17 years.

A full-day inception workshop on the modalities for revising the Lebanon Crisis Response Plan (LCRP) for 2016 was held with the participation of humanitarian actors and with the Government of Lebanon as the lead.

JORDAN

During the reporting period, UNHCR recorded Jordan as hosting 628,778 refugees. Azraq camp is hosting 23,754 refugees (males: 50 percent, females: 50 percent) and Zaatari camp around 79,472 (males: 50 percent, females: 50 percent). The Government of Jordan is making significant efforts to aid Syrian families fleeing the conflict in spite of the increased burden that the rising population is placing on the country's infrastructure, while facilitating cooperation between host and refugee communities in order to mitigate potential conflict.

IRAQ

As of August 15 (according to UNHCR), Iraq is hosting 251,499 Syrian refugees; of these, 44.5 percent are living in Erbil, 39.5 percent in Dohuk, and 12.05 percent in Sulaymaniyah, while the rest are scattered in other governorates. About 62.37 percent of the refugees live in urban areas while 37.63 percent live inside camps. Most of the Syrian refugees in Iraq are from Hasakah (57 percent) and Damascus (25 percent), while the rest are from other places across Syria. During the month under review, UNHCR registered 1,483 new refugees in Iraq (0.7 percent greater than in July).

TURKEY

The prolonged crisis in Syria, coupled with escalation of terrorist attacks and the existence of a temporary government in Turkey, has impacted all sectors, including humanitarian programmes like those of UNFPA.

There is a temporary government in Turkey till the early election scheduled on November 1. This situation affects routine work with line ministries. Moreover, a possible staff turnover might take place once the new government is sworn in. An unstable security environment also hampers implementation of humanitarian projects by United Nations agencies and implementing partners. Already, some modifications have been introduced with regard to responsibilities of line ministries; AFAD has transferred all health-related issues of Syrian refugees to the Ministry of Health, while the Ministry of Finance will take over the budgetary aspects. One of UNFPA's implementing partners, Syrian Social Gathering (SSG), has closed.

EGYPT

The number of registered Syrians seeking refuge in Egypt reached 132,375 during the reporting period. Most of the refugees are scattered in rented households located in the outskirts of large urban centres such as Greater Cairo, Alexandria, and Damietta. Syrian refugees have been granted access to public services, including primary health care and education, at the same cost as Egyptians. However, issues related to quality and availability of these services remain a major challenge, given that the public sector is already struggling to meet the needs of Egyptians.

Q U I C K F I G U R E S

SYRIAN ARAB REPUBLIC:

SYRIANS AFFECTED BY THE CRISIS	12.2 MILLION
WOMEN AND GIRLS OF REPRODUCTIVE AGE	4 MILLION
SYRIAN PREGNANT WOMEN	300,000
YOUTH	2.5 MILLION

LEBANON:

SYRIANS AFFECTED BY THE CRISIS	1,172,750
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	293,188
SYRIAN PREGNANT WOMEN	20,757
SYRIAN YOUTH	209,907

JORDAN:

SYRIANS AFFECTED BY THE CRISIS	630,224
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	153,096
SYRIAN PREGNANT WOMEN	11,154
SYRIAN YOUTH	130,907

IRAQ:

SYRIANS AFFECTED BY THE CRISIS	251,499
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	57,466
SYRIAN PREGNANT WOMEN	4,419
SYRIAN YOUTH	65,144

TURKEY:

SYRIANS AFFECTED BY THE CRISIS	1,938,999
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	484,750
SYRIAN PREGNANT WOMEN	34,320
SYRIAN YOUTH	290,850

EGYPT:

SYRIANS AFFECTED BY THE CRISIS	132,375
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	33,312
SYRIAN PREGNANT WOMEN	2,343
SYRIAN YOUTH	27,243

SOURCES: Turkey's Disaster and Emergency Management Authority (AFAD), UNHCR MENA Bureau, OCHA, and UNFPA August, 2015

HUMANITARIAN RESPONSE

SEXUAL AND REPRODUCTIVE INCLUDING FAMILY PLANNING



Syrian women standing in line to receive medicine at the UNFPA-supported women's centre in Suweileh, Jordan.

Credit: David Brunetti | UNFPA, 2014

SYRIAN ARAB REPUBLIC

REPRODUCTIVE HEALTH SERVICES: UNFPA delivered around 315,000 services to 106,000 affected people; this included provision of safe delivery services to 7,800 women, of whom 440 benefited from reproductive health services through UNFPA's reproductive health voucher system in Damascus, Rural Damascus, and Aleppo. As many as 164 women opted for Caesarean-section.

REPRODUCTIVE HEALTH SUPPLIES: UNFPA delivered 211 reproductive health kits, as well as Dopplers and 20 ultrasound machines to health facilities to enable the delivery of quality reproductive health services to around 268,500 internally displaced women in 10 governorates.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: The UNFPA-assisted Syrian Arab Red Crescent (SARC) and Syrian Family Planning Association (SFPA) mobile teams reached 16,400 violence-affected persons with awareness messages on reproductive health related issues in eight governorates.

UNFPA, through the mobile teams of SARC and SFPA, supported the delivery of 18,000 reproductive health and gender-based violence related services to crisis-affected families in Damascus, Rural Damascus, Homs, Aleppo, Lattakia, Tartous, and Hama.

REPRODUCTIVE HEALTH TRAINING: A total of 70 health professionals from Damascus, Rural Damascus, Homs, Dar'a, Hama, and Sweida completed a course on basic life support in obstetrics. Moreover, 14 heads of the reproductive health departments of the health directorates in Syrian governorates were updated on needs and actions related to joint programmes of UNFPA and the Ministry of Health. Moreover, 20 midwives attended a training courses on preventing mother-to-child transmission of HIV in Damascus, Lattakia and Sweida.

SUPPORTING HUMAN RESOURCES: UNFPA supported mobile and static clinics of SFPA and SARC through deployment of 80 health workers in 12 governorates.

LEBANON

REPRODUCTIVE HEALTH SERVICES: During the reporting period, UNFPA, in partnership with International Orthodox Christian Charities (IOCC), International Medical Corps (IMC), Lebanon Family Planning Association for Development and Empowerment (LFPAD), and Al-Mithaq approached 8,080 women and girls with reproductive health services and related messages as reflected in the following data:

700 women in Bekaa and 580 in Akkar attended awareness sessions on infant and young child feeding (IYCF) and family planning.

A total of 4,100 women in 25 in Bekaa were reached through 587 sessions on safe motherhood, with a focus on ante- and post-natal care, breastfeeding, newborn care, and vaccination promotion. As many as 1,800 women attended 90 awareness sessions on family planning in Akkar.

Three hundred women participated in 10 awareness sessions conducted by a trained midwife on reproductive health issues including family planning methods, and prevention of cancer and sexually transmitted infections. These sessions were held in Tal Abiad, Saaydiyyeh, Hammoudieh, and Younin.

Four hundred women in Bekaa and 200 in Akkar received one-on-one counseling on infant and young child feeding

REPRODUCTIVE HEALTH TRAINING: UNFPA, through the Lebanese Society for Obstetrics and Gynecology, organized six capacity-building workshops for 160 paramedical staff members from Bekaa, Saida, Mount Lebanon, Beirut, and Tripoli, and for 73 medical doctors from Bekaa, Saida, Akkar, Tripoli, and Beirut. These trainings were related to reproductive health service delivery guidelines and protocols including pre- and post-natal care, clinical management of rape, the reproductive health minimum initial services package (MISP), emergency obstetric care, and ethical issues, among other topics.

Moreover, 27 participants from the Ministry of Public Health, United Nations agencies, INGOs, and NGOs attended a sensitization meeting for humanitarian actors; the meeting featured an introduction to the reproductive health service delivery guidelines and protocols.

The family planning counseling trainings supported by UNFPA between 2014 and 2015 showed that the initiative was perceived as important and as meeting a great need. The trainings highlighted the need to:

- Build on the initiative and better articulate the counseling element, which was less evident as compared to the family planning element.

- Enhance coordination with national stakeholders including academia, specialized agencies (such as the Order of Midwives and NGOs), and the Ministries of Social Affairs as well as Public Health for review and finalization of the counseling curriculum to be adopted by the Ministry of Public Health.

SUPPORTING HUMAN RESOURCES: UNFPA's implementing partner Al-Mithaq recruited a gynecologist for provision of services in Baalbek; as a result, 90 Syrian and Lebanese patients received services during the period under review.

JORDAN

REPRODUCTIVE HEALTH SERVICES: UNFPA provided 11,630 reproductive health services in camps and host communities. As such, 183 women received safe delivery services, 1,692 women (4 percent of them less than 17 years of age) benefited from family planning services, 3,235 received ante-natal care, and 1,612 received

post-natal services. A total of 598 women received management for genito-urinary tract infections. As many as 279 pregnant women with anemia were screened and provided with iron folate tablets while 181 women received immediate post-delivery support by midwives for successful early initiation of breastfeeding.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: UNFPA, in partnership with the Institute for Family Health (IFH) and Jordan Health Aid Society (JHAS), organized 53 awareness sessions and one-to-one counseling sessions in Zaatari camp, reaching 3,315 beneficiaries (26 percent of them women aged between 18-24 years). It also organized nine awareness sessions in Cyber City camp, reaching 191 beneficiaries. Sessions were also held in King Abdullah Park camp, targeting 103 individuals. The awareness sessions covered topics such as family planning methods, personal hygiene, early detection of breast cancer, infections and sexually transmitted diseases, early marriage, and safe pregnancy.

IRAQ

REPRODUCTIVE HEALTH SERVICES: During September, the total number of reproductive health services provided to Syrian women and girls of reproductive age reached 4,740; of these, 342 pertained to family planning. UNFPA supported the safe delivery of 533 babies, and managed Caesarean-section deliveries of 117 women.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: During the reporting period, 149 women and girls in Domiz and Gawilan camps benefited from awareness sessions on contraception and reproductive health.

TURKEY

REPRODUCTIVE HEALTH SERVICES: As many as 1,390 Syrians

benefited from reproductive health and family planning services provided by counseling units.

REPRODUCTIVE HEALTH OUTREACH: UNFPA organized 10 reproductive health outreach activities targeting 312 beneficiaries. It also organized hairdressing, make-up, sewing, and first aid activities in Mardin and Urfa in partnership with Harran University and the International Middle East Peace Research Centre (IMPR).

REPRODUCTIVE HEALTH TRAINING: The Provincial Health Directorate in Adana organized a training workshop on emergency obstetric care in the province for 51 Turkish midwives and nurses providing around 25 percent of the total services for Syrians.

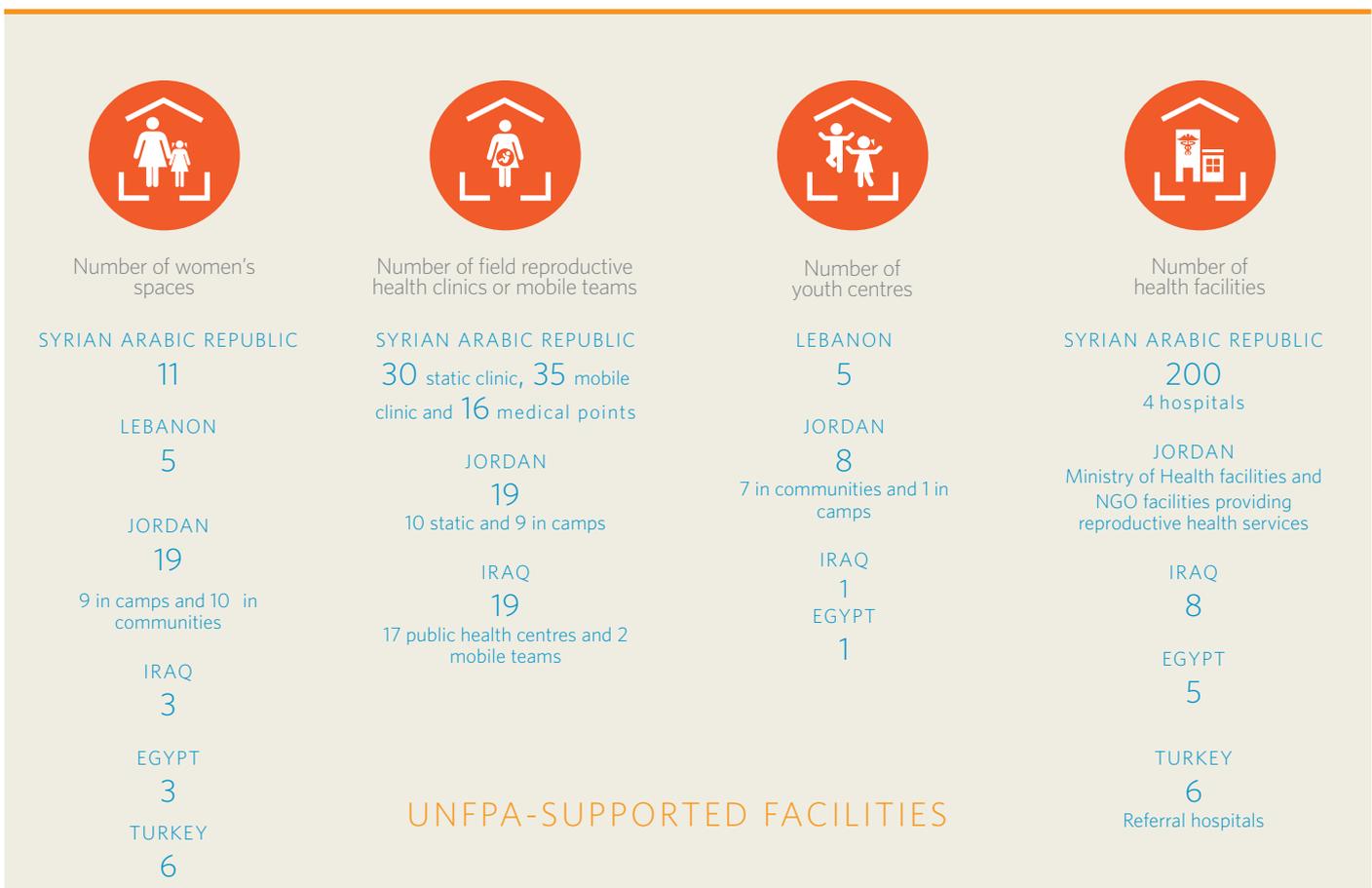
REPRODUCTIVE HEALTH MATERIAL DEVELOPED: UNFPA, in partnership with the Refugee Education Trust (RET), developed 12 brochures on reproductive health, breastfeeding, healthy childhood, healthy lifestyle, pregnancy, family planning, and evaluation tools.

IMPR developed six brochures on the patient follow-up card, school information, the women's centre, breastfeeding, breast cancer, and gynecological infections. Moreover, brochures on family planning, antenatal care, and breastfeeding were also distributed.

The Hacettepe/Ulubey counseling unit distributed 150 brochures on reproductive health. The Harran University also developed two brochures on reproductive health.

A total of 20,200 health brochures were distributed in Malumat, Sönim (Violence Prevention and Monitoring Centres) and Kamer Women Centre in Gaziantep, ASAM in Gaziantep, Adana, Istanbul, Izmir and Sakarya. The Helsinki Citizens Assembly and Danish Refugee Council in Kilis also received a pack of health brochures.

SUPPORTING HUMAN RESOURCES: UNFPA continued to support six Syrian service providers at various counseling units; one at Hacettepe/Ulubey counseling unit, three at Harran University, and two at IMPR.



GENDER EQUALITY AND WOMEN'S EMPOWERMENT

SYRIAN ARAB REPUBLIC

GENDER-BASED VIOLENCE SERVICES: During the reporting period, the UNFPA-assisted SARC and SFPA clinics and mobile teams provided 26,500 gender-based violence services, including medical examination and psychosocial support related services, to around 3,540 women.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: The UNFPA-assisted clinics and mobile teams approached 11,600 people with gender-based violence related awareness messages in Damascus, Rural Damascus, Homs, Lattakia, Tartous, and Dar'a.

GENDER-BASED VIOLENCE TRAINING: In cooperation with SFPA, UNFPA assisted 18 health and gender-based violence professionals working in two women's safe spaces in Homs to complete on-job training on gender-based violence.

LEBANON

GENDER-BASED VIOLENCE ACTIVITIES: UNFPA, through its partner KAFA ('Enough') Listening and Counseling Centre (LCC) in Beirut, provided 332 gender-based violence related services such as social counseling, follow-up sessions, legal and psychological consultations, and court representations and referrals for safe housing.

GENDER-BASED VIOLENCE SUPPLIES: A total of 80 UNFPA bags and tool kits were distributed to beneficiaries of socio-economic empowerment activities while 185 dignity kits were distributed to beneficiaries of the livelihood component (titled 'Socio-economic empowerment') in four centres in Shouf, Shoueifat, Shiah, and Burj Hammoud.

GENDER-BASED VIOLENCE OUTREACH: As part of efforts by INTERSOS and UNFPA to promote male engagement in support of gender-based violence prevention and response at the community level, 36 men attended awareness sessions, which included information on illegal migration and its risks. They also received an explanation about the registration procedure for their children to attend Lebanese schools.

UNFPA, through KAFA, organized two awareness sessions in Badaro; these sessions focused on mother-child relationships. Al-Mithaq facilitated the establishment of seven problem-solving groups in Bekaa. For this, 14 trainers/facilitators were divided into pairs and were asked to recruit female Syrian refugees and Lebanese women from various locations in Bekaa. A total 20 NGO staff members in the Baalbek area were trained on basic life skills programme in partnership with the Lebanese American University. Moreover, Al-Mithaq supported an awareness session for women in a neighbourhood in Baalbek.

GENDER-BASED VIOLENCE TRAINING: UNFPA, in partnership with KAFA, organized five training sessions on gender-based violence case management and communication for 80 healthcare providers in Fnaydek health facility, Makassed health centre in Wadi Khalid, Tripoli governmental hospital, and the Order of Midwives.

JORDAN

GENDER-BASED VIOLENCE SERVICES: A total of 469 survivors benefited from case management services; of these, 49 percent reported cases in camps and 51 percent in hosting communities. Likewise, 659 survivors benefited from individual psychosocial



FOOD SECURITY BECOMES A KEY CONCERN.

Tala has been volunteering at the women's centre in Suweileh in Jordan since July. She loves working at the centre, and being a Syrian herself, knows the women who trust her. "I learn a lot here at the centre and I am happy that I can help women access healthcare and counseling, and attend workshops."

In Syria, Tala lived with her family in Damascus and had just finished high school when she, her parents, and three sisters fled the country. Back home, higher education was free and she had planned to attend university, if not in Damascus, then in Amman. But university fees in Jordan are too high and her dreams are postponed for now. Working at the centre as a volunteer is an opportunity to gain valuable work experience. It's a chance for Tala to hold on to her dream of continuing her education.

"Before I started to work at the centre, I spent a lot of time at home. I helped my mother with chores and looked after my younger siblings. I seldom went out, and as a result, felt lonely and isolated. When we moved here, I thought I could go to university but that wasn't possible." Tala said, she felt her future slip through her fingers. "We don't know how long we have to live in Jordan, and I am not sure if I would be able to go to university in Syria if we return when the war ends." But Tala is more hopeful now. "I am not sure what I want to become, but ever since I started working at the centre, I feel like I'm doing something useful again. I'm very lucky to have the chance to work, and I am hoping it will lead to another opportunity."

Tala's three younger sisters have missed a lot of school, but they have just started the new school year at a lower grade. "At first, they were a little embarrassed to go to school with children younger than them, but now they like school."

Food security and rent are the family's main worries and take precedence over everything. Tala is the only earning member, and her entire family relies on her income to make ends meet. Her sisters are too young to work. Their father is a trained electrician. Every once in a while, he does odd jobs to earn a little extra but does not have a work permit. The family receives a monthly cash assistance stipend of 100JD while Tala has been earning an allowance of 150JD ever since she started volunteering at the centre/clinic. She's grateful for the income because "Jordan is very expensive. Our monthly rent is 250JD, and once that's paid, we have nothing left. Right now, food is our main worry."

Credit: David Brunetti | UNFPA, 2014

counseling; the majority of the reported cases (60 percent) were women aged between 25-49 years, while 9 percent were girls aged between 15-17 years. On the other hand, 122 survivors participated in psychosocial support groups; of these, 63 percent were delivered in camps. As many as 174 survivors were referred to services provided by other service providers. Moreover, 538 survivors received individual health education and reproductive health counseling services.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: A total of 1,185 refugees were sensitized on gender-based violence related issues; 65 percent were delivered in hosting communities and 35 percent in camps. Also, 993 Syrians benefited from individual psychosocial support while 4,959 beneficiaries made use of self-reliance, vocational training, and life-skills sessions. Moreover, 200 beneficiaries were involved in designing, implementation and review of gender-based violence prevention activities while 2,271 participated in stress and anger management sessions.

GENDER-BASED VIOLENCE OUTREACH: A total of 4,079 women, girls, men, and boys (females: 63 percent, males: 37 percent) were reached through outreach visits.

GENDER-BASED HUMAN RESOURCE DEVELOPMENT: A training of trainers on 'home visits in the antenatal, post-natal period including family planning counseling and with a focus on care of the new-born,' was organized for 32 community health workers and volunteers working in camps and host communities. The training was organized by the community health task group, with support from UNICEF, UNFPA, IFRC, IRC, and Save the Children.

UNFPA, in collaboration with its partners, organized a MISP training course targeting 25 health and psychosocial service providers, and carried out training on reproductive health protocols targeting 20 healthcare providers working at health centres in camps and host communities.

IRAQ

GENDER-BASED VIOLENCE SERVICES: During the reporting period, UNFPA provided 167 women and girls with counseling, listening, psychosocial support and case management services, one clinical management of rape service, and six follow-up services in Dohuk, Basirma, Darashakran, and Kawergosk and Qushtapa camps.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: A total of 717 women and girls benefited from gender-based violence awareness sessions in September. In Dohuk, 520 women and girls benefited from awareness sessions on gender-based violence prevention and response, and reproductive health related issues. In Basirma camp, 70 women and girls participated in sessions on child protection, decision-making processes, and medical care for pregnant women. In Darashakran camp, 53 women and girls attended awareness sessions on family planning, and social and psychological issues. In Kawergosk, 54 women and girls benefited from sessions on child marriage and prevention and treatment of scabies. In Qushtapa, 20 women and girls participated in sessions on domestic violence, family planning, and on how to raise teenagers in camps.

GENDER-BASED VIOLENCE OUTREACH: A total of 545 women and girls were reached by outreach volunteers with information on gender-based violence related issues in Dohuk, Basirma, Darashakran, Kawergosk, and Qushtapa camps.

GENDER-BASED VIOLENCE TRAINING: A total of 75 women and girls in Domiz and Gawilan camps were trained on community-based interventions to prevent gender-based violence. The training enabled them to address the risks associated with gender-based violence, to advocate for the rights of women and girls, as well as



Al-Mithaq trainers in Lebanon conducting a hairdressing and make-up workshop for Syrian refugee women.

Credit: Al Mithaq 2015

to support women and girls to access required services through safe mechanisms.

Five persons in Darashakran, Kawergosk, and Basirma camps received training on the basic concepts of gender-based violence.

RECREATIONAL SERVICES IN WOMEN CENTRES: During the reporting period, 1,110 women and girls attended UNFPA-supported recreational activities such as sewing and hairdressing workshops in Domiz 1, 2 and Gawilan camps in Dohuk, Basirma, Darashakran, Kawergosk, and Qushtapa.

TURKEY

GENDER-BASED VIOLENCE SERVICES: UNFPA, in partnership with IMPR, Sanliurfa, provided gender-based violence related services to 156 women at the Hacettepe/ULubey counseling units. UNFPA also organized seven sessions on hygiene of children and women at the Malumat project conducted by Mercy Corps; the sessions targeted 346 women and children.

GENDER-BASED VIOLENCE SUPPLIES: UNFPA, in partnership with the Malumat project, provided 212 hygiene kits for children and 104 hygiene kits for women in Gaziantep. A total of 4,776 hygiene kits and 16,515 buckets reached the United Nations storehouse for further distribution.

GENDER-BASED VIOLENCE MATERIAL DEVELOPED: UNFPA, in partnership with IMPR, developed a brochure on child marriage.

WOMEN AND GIRLS SAFE SPACES: UNFPA continued to support six women's health counseling units run by IMPR in Sanliurfa, RET in Gul neighbourhood, RET in Istasyon neighbourhood in Mardin, KAMER in Gaziantep, Harran University in Sanliurfa, and Hacettepe/ULubey in Ankara.

UNFPA CROSS-BORDER OPERATIONS AUGUST - SEPTEMBER 2015

RESPONSE

Note: Due to logistic and security challenges, implementing partners share their data a month late.

The three women and girls safe spaces in Latakia, Idlib, and Aleppo governorates served 207 beneficiaries in August; activities were ongoing in September.

REPRODUCTIVE HEALTH SERVICES: UNFPA-supported hospitals provided reproductive health services to 6,723 beneficiaries (4,950 women, 1,759 girls, and 14 boys) in the northern part of Syria. A total of 514 women under 18 years of age received services from UNFPA-supported health facilities, while 687 women received safe delivery services, and 230 women opted for Caesarean-sections.

REPRODUCTIVE HEALTH SUPPLIES: UNFPA distributed 38 reproductive health kits to its partners in the northern part of Syria.

WOMEN AND GIRLS SAFE SPACES: UNFPA continued to support two local organizations in the management and strengthening of women and girls safe spaces in Lattakia, Idlib, and Aleppo. As per UNFPA guidance, the grantees conducted a consultation with the community, specifically with women and girls, to identify the spaces and activities.

Since the security situation was particularly precarious in August, all three spaces had to be shifted to safer locations in consultation with women and girls. In the village in Lattakia where the centre was established, a change in the group in power resulted in imposition of a very conservative dress code for women and girls. Since women themselves did not feel safe and were not willing to accept this imposition, most of them preferred staying at home.

In August 2015, a total of 207 women and girls took part in a variety of activities such as awareness-raising on gender-based violence, recreational activities, and life skills. All centres provide dedicated activities, including life skills, for adolescent girls.

COORDINATION

UNFPA chaired the reproductive health sub-working group. The meeting featured a discussion on topics such as the use of the miscarriage log book, diagnosis and management of sexually transmitted infections (STIs), health information system reporting,



advice and counseling on post-abortion care, and mainstreaming of gender-based violence in the health and reproductive health response.

FEEDBACK

Women and girls gave highly positive feedback on sessions conducted in the safe spaces, as reflected in the comments below. Many women offered to volunteer to support other women with their knowledge and skills.

"Due to the current situation and lack of health services, I have benefited the most from sessions related to reproductive health and disease prevention."

"There is no doubt that the issue of choosing a husband in the current situation is a matter of great concern for most girls. The session offered a lot of information about the ideal age for marriage."

"I had no knowledge about domestic violence and its effects. After attending the sessions, I became familiar with the negative consequences of domestic violence. Now, I have a clear idea about who is affected by it and who is responsible for it."



Syrian women and girls participating in a variety of activities in the UNFPA-supported women spaces in Aleppo, Syrian Arab Republic. Credit: UNFPA's partner, 2015

SUPPORTING ADOLESCENTS AND YOUTH



UNFPA and Questscope during the inauguration ceremony of the youth centre in Zaatari camp in Jordan.

Credit: MBC team, 2015

session in order to promote, protect and support breastfeeding while providing guidance for pregnant and lactating mothers. The session was held twice a week. A campaign titled 'Women and work, let's make it work,' was conducted by IMC with the support of Save the Children as part of the International Breastfeeding Week, with a total of 82 participants from both villages of the camp in attendance.

IRAQ

YOUTH ACTIVITIES: During the reporting period, 44 youth from Domiz and Gawilan camps attended the basic peer education training. A total of 110 young girls and boys attended different activities including a soccer tournament in the camp. In Darashakran, 131 girls and boys participated in computer, drawing, music and peer education sessions, while 104 boys and girls in Kawergosk camp participated in similar activities.

YOUTH AWARENESS SESSIONS: A total of 50 youth in Darashakran participated in problem tree analysis and "crossing barriers", and 33 youth in Kawergosk camp participated in sessions on STIs such as HIV, and domestic violence.

LEBANON

UNFPA, through INTERSOS, worked with 38 boys and girls to finalize a list of possible life skills-based activities. Curriculum development was also initiated. A total of 11 boys (aged between 15-19 years) from Mazboud and 7 boys (aged between 19-21 years) from Alman participated in cooking, movie screening, and Arabic calligraphy in Chouf. In Shia, 13 peers (aged between 15-18 years) including six refugee girls, five refugee boys and two Lebanese boys discussed in groups of four the major difficulties they were facing in their communities. This was presented and expressed either through a play, a song, or a letter. In Choueifat, 9 peers, all of them boys aged between 15-17 years, participated in sessions where they discussed family problems and their relationship with parents.

JORDAN

UNFPA, in partnership with Questscope, inaugurated a new youth centre in Zaatari camp. The centre sponsors 26 youth who participate in youth committees, while 14 youth volunteer in the host community. A total of 146 youth accessed various youth services in the UNFPA-supported centre.

In addition, during the month, 134 youth attended Y-PEER trainings, 24 attended a training of trainers in humanitarian settings, 21 participated in Y-PEER theatre technique training, 23 attended a session on autism spectrum disorders, 22 attended a training on advocacy, 54 participated in life skills training sessions, 479 participated in recreational activities such as football, table tennis, fitness, Arabic calligraphy, film-making, candle-making and cosmetics, and 463 youth participated in gender-based violence awareness sessions.

In Azraq camp, during the reporting period, 12 adolescent girls (aged between 15-17 years) participated in a 10-week psychosocial

COORDINATION & CAPACITY BUILDING

SYRIAN ARAB REPUBLIC

As part of expanding partnership endeavours, UNFPA entered into a long-term agreement with the Angelic Association of Anis Saade in Tartous in support of the delivery of gender-based violence related services to affected people.

LEBANON

A meeting of the clinical management of rape (CMR) task force was convened with the participation of IMC, ABAAD, UNICEF, UNHCR, and the Mental Health Programme of the Ministry of Public Health. The meeting featured a discussion on the advocacy paper on coverage of CMR for Lebanese people; the need to share service delivery guidelines with the mental health programme manager to assess whether mental issues regarding postpartum depression were covered, and to explore the possibility to coordinate the development of a national action plan for CMR.

UNFPA co-chaired the steering committee meeting of the national gender-based violence information management system, and contributed to finalization of data analysis of the first and second quarters of 2015.

JORDAN

UNFPA coordinated the Zaatari-based youth task force and organized a mid-term review workshop to evaluate new assessments, and to determine the changes that need to be adopted in the Action Plan for 2015.

IRAQ

A mid-year review meeting took place in three governorates with the participation of protection cluster and sub-cluster coordinators in Kurdistan. The meeting reviewed the situation of gender-based violence and child protection.

TURKEY

UNFPA continued to participate in monthly meetings of the United Nations Syria Task Force, sexual and gender-based violence sub-group and health sector coordination meetings in Gaziantep, monthly sexual and gender-based violence meetings at the Ministry of Family and Social Policies, General Directorate of Woman's Status, and protection working group meetings both in Ankara and Gaziantep.

JORDAN

Tension between Syrian refugee and citizens remains a challenge.

Families moving to camps are facing difficulties including adaptation to the camp atmosphere and crowded living conditions, which cause psychological stress and an increase in domestic violence.

There is a lack of knowledge among Syrian refugees about the importance of antenatal, post-natal and post-abortion care, breastfeeding, children's vaccination, and periodic follow-up visits.

Lack of electricity in some parts of the Zaatari and Azraq camps has been creating major issues, not only in the provision of services but also in relation to the level of frustration among refugees.

IRAQ

The ongoing conflict in the country that resulted in internal displacement is affecting the overall delivery of services and negatively impacting funding opportunities for refugees.

Refugees in urban settings represent more than 67 percent compared to those in camps; this entails development of strategies to respond to the needs of these populations.

TURKEY

Some of the key challenges encountered during the period under review revolved around issues such as the current situation of the government, rising incidence of terrorist attacks, insecure environment for programme implementation, language barriers, lack of employment opportunities, non-availability of qualified service providers, tension between refugees and host communities, funding problems, and management of programme activities according to donors' fiscal years.

CHALLENGES

SYRIAN ARAB REPUBLIC

The timely delivery of humanitarian assistance, especially in light of Security Council Resolutions 2139 and 2165, continued to pose challenges due to the ongoing security conditions.

Some donors expressed preference to support NGOs rather than government facilities; this has limited the amount of financial resources allocated to public sector facilities, and has consequently impacted the possibility of these partners delivering humanitarian aid to the affected population.

Availability of only a limited number of implementing partners (especially in the besieged and conflict areas) who are qualified to provide comprehensive gender-based violence prevention and response, continued to affect the delivery of timely humanitarian response.

The monitoring of the humanitarian response continued to pose a challenge due to the limited capacity of implementing partners, as well as limited access to affected areas due to security concerns.

LEBANON

Overloaded physician schedules made it difficult to set training schedules for doctors. While non-availability of qualified trainers continued to pose a challenge.

Difficulties were encountered in the recruitment of potential participants because there were several other workshops for NGOs taking place at the same time.

Absence of transportation facilities made it difficult to schedule reproductive health awareness sessions for women in the centre.

Infrastructural problems led to delays in execution of rehabilitation work planned for the Al-Mithaq Centre in Baalbek.

There is challenge posed by the practice of companies and shops offering free baby formula to girls and women who have received breast-feeding counseling. When the babies and mothers get accustomed to formula milk, they have to pay for it and some cannot afford to do so.



Syrian women visiting UNFPA women counselling unit in the Harran University in Sanliurfa, Turkey.
Credit: Harran University, 2015



A community health worker of the International Medical Corps conducting an awareness session in an informal tented settlement in Al Marj, Bekaa, Lebanon. Credit: IMC, 2015

DONORS & PARTNERS

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

Private sector: MBC

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), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Un Ponte Per (UPP), Jordanian Women's Union (JWU), Youth Peer Education Network (YPE), NCF (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 Policies (MoFSP), Turkish Red Crescent Society (TRCS), universities including Harran in Sanliurfa and Hacettepe University in Ankara, NGOs including the International Middle East Peace Research Center (IMPR), Syrian Social Gathering.

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RELEVANT RESOURCES

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