



"The violence drove us from our homes...I feel relieved when I help my sisters in the camp... There is nothing like seeing a smile on their faces." Yusra, a Syrian youth volunteer at the Yasmin Women's Space in Domiz Camp in Iraq, that provides psychosocial support and skills training to refugee women and girls. She is one of UNFPA's heroes who celebrated the International Youth Day by advocating for stronger action to End Violence Against Women. Credit: UNFPA, 2014.

HIGHLIGHTS

SYRIAN ARAB REPUBLIC: UNFPA reaches 20,300 women of reproductive age in Damascus, Rural Damascus, Homs, Aleppo, Deir ez-Zor, Al Raqa and Hama, Deraa, Tartus and Latakia with reproductive health and GBV services. Additionally 7,100 Iraqi refugees in Al-Hasakah receive dignity kits and reproductive health supplies to ensure safe deliveries. UNFPA facilitates training and awareness raising sessions on reproductive health and GBV for 42 community leaders and NGO staff in Sweida.

LEBANON: UNFPA develops 230,000 reproductive health information leaflets to Syrian refugees and 200,000 pregnancy cards to Syrian and Lebanese women. A total 50 women receive GBV services, 453 persons benefit from GBV outreach activities and training and 345 women benefit from UNFPA's peer-to-peer programme.

JORDAN: UNFPA provides reproductive health services to 7,807 women and girls, provides services to 1,037 GBV survivors, and 2,969 women, men, boys and girls were sensitized on GBV related issues.

IRAQ: UNFPA provides GBV services to a total of 901 refugees and internally displaced women. UNFPA deploys 50 nurses and midwives to work in the reproductive health clinics run by the Department of Health in Dohuk, distributes 3,600 dignity kits and launches youth spaces in Kawargosek and Darashakran camps.

TURKEY: UNFPA delivers 2,500 hygiene kits through the second cross-border convoy to Northern Aleppo (Hairitan) in collaboration with OCHA, other United Nations agencies and INGOs. UNFPA conducts a Minimum Initial Service Package for Reproductive Health (MISP) training for Syrian service providers in Sanliurfa province for 19 Syrian health providers.

EGYPT: UNFPA conducts a clinical management of GBV survivors training and organizes activities for Syrian youth during International Youth Day.

HUMANITARIAN SITUATION

The risk of instability in the Middle East has increased as Syrian and Iraqi people continue to flee to neighboring cities and countries in order to escape the ongoing violence. Lebanon, Turkey, Jordan and Iraq continue to experience economic and political pressure as a result of the massive influx that has increased their population size and is straining their resources.

The Syrian conflict has resulted in the death of more than 190,000 people, more than 3 million people have become refugees in the neighboring countries of Lebanon, Turkey, Jordan, Iraq, and Egypt, of which 761,175 are women and girls of reproductive age. An additional 6.5 million remain internally displaced, with around 432,000 pregnant women in the Syrian Arab Republic. In Iraq, the number of internally displaced has reached 1.8 million during the reporting period and there are still 215,000 Syrian refugees in Kurdistan. There are now more than 2.4 million Iraqi women and girls of reproductive age that are affected. As a result of the scale and complexity of the

situation, the United Nations has declared Iraq a Level 3 emergency - its highest level humanitarian crisis.

Countries may soon be reaching their limits, as they may no longer be able to accommodate the 100,000 Syrian refugees that continue to flee Syria every month. Social and health services are overstretched and water, sanitation, and energy shortages are affecting all areas of life. There is an urgent need for more assistance—not only for the refugees and internally displaced who are escaping violence but also for the host countries protecting them.

On the International Youth Day, UNFPA called on the international community to increase efforts to ensure that Syrian youth have the knowledge, skills and services to enable them to exercise their rights and make informed decisions about their health and well-being. UNFPA remains concerned about the well-being of all young people affected by the Syria Crisis as they lack access to many of these essential opportunities.

During the reporting period, UNFPA vowed to scale up reproductive and maternal health and family planning support to countries with the greatest needs and to strengthen its interventions in humanitarian settings to meet the targets set by the Millennium Development Goals (MDGs), especially the MDG 5 targets to reduce maternal death and achieve universal reproductive health.



On World Humanitarian Day, UNFPA celebrated humanitarian heroes

There are currently hundreds of UNFPA staff working right now in the Syrian Arab Republic and in neighboring countries responding to the needs of the most affected people. Each have their own reasons for doing the work that they do and risk their own safety to help others.

The 2014 World Humanitarian Day campaign asks each of us to take action, make a difference and become a messenger of Humanity. UNFPA is proud to take part and support the work of #humanitarianheroes far and wide.



"The thing that gives you the most energy to go on is people's smiles, satisfaction and appreciation." Mohamad Tarek Alashraf, Humanitarian coordinator, Syrian Arab Red Crescent Homs, Syrian Arab Republic.



"I try to assure them that they are not alone, that we are here to listen and support them medically, psychologically and legally," Ruba Anga, a legal consultant at the UNFPA supported Al-Halbouni health clinic in the Syrian Arab Republic.

AT A GLANCE:

In Syria Arab Republic

10.8 MILLION PEOPLE AFFECTED
2.7 MILLION WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
432,000 PREGNANT WOMEN

In Lebanon

1,161,479 REFUGEES
279,132 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
20,557 PREGNANT WOMEN

In Jordan

611,685 REFUGEES
149,056 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
10,826 PREGNANT WOMEN

In Iraq

215,369 REFUGEES
47,970 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
3,812 PREGNANT WOMEN

In Turkey

1,000,000 REFUGEES
250,000 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
40,000 PREGNANT WOMEN

In Egypt

139,090 REFUGEES
35,017 WOMEN AND GIRLS OF REPRODUCTIVE (CHILD-BEARING) AGE
2,462 PREGNANT WOMEN

SOURCE:
AFAD, UNHCR AND UNFPA, AUGUST 2014

SYRIAN ARAB REPUBLIC

The tension in the bordering governorates with Iraq, especially Al-Hasakah and Deir ez-Zor governorates continued with the expansion of military operations of the Islamic State of Iraq and the Levant. Additionally, thirteen locations in Damascus, Rural Damascus, Aleppo and Hom are besieged and armed violence continued especially in Rural Damascus and Aleppo, as well as mortar shelling in different areas of Damascus.

As such, 60,000 women residing in the besieged locations, and 50,000 Iraqi refugees, of which 12,500 are women of reproductive age, who have entered Al-Hasakah Governorate, Al-Malikiyah district as a result of ongoing violence in Iraq are in need for reproductive health and family planning services. Due to the fighting in the Lebanese town of Arsal, where troops have been battling armed groups for days, 1,700 Syrian refugees fled back to Syria, mostly in the Rif Damascus governorate.

Since the overall security situation in the country remains tense and volatile with ongoing areas of besiegement and active conflict, UNFPA and its implementing partners are concerned about the ability of women to access reproductive health and GBV services.

Restricted access to besieged areas, especially those covered by the UNSCR 2139, remains a critical gap in delivery. For UNFPA, the ability to provide basic reproductive health services and safe delivery in these areas is further limited by the low number of accredited health partners. The same remains true for GBV, as few partners are able to provide GBV services in those areas. Cross-border operations from Turkey still require greater coordination and international partners to access the estimated three million inhabitants in the peripheral areas, a quarter of whom are women of reproductive age and who will require reproductive health services and care.

Monitoring the impact of the humanitarian response for IDPs residing in urban settings is still a challenge due to limited access and capacity of implementing partners to provide timely and quality reports on the needs and the delivery of the services.

LEBANON

The number of registered Syrian refugees reached 1,161,479 people of which 279,132 are women and girls of reproductive age. In August, the 2,000 Syrian refugees who were stranded on the highway in the Bekaa were permitted to cross into their home country after coordination between the Lebanese and Syrian authorities. Even though ten days have passed since the end of major clashes between the Lebanese Army and armed groups, the security situation in Aarsal remains unsafe and volatile. The restoration of a regular humanitarian presence is challenging, as local authorities and security officials remain opposed to the rehabilitation of informal settlements and the resumption of aid distribution.

The Aarsal event pushed Lebanese authorities to take exceptional measures to limit the number of Syrians entering Lebanon as part of efforts to reduce the more than one million refugees already within their borders.

JORDAN

In August, the total number of Syrian refugees who have fled their homes to reach Jordan reached 611,685 persons. Over 70 per cent of these are women and children, 25 per cent are women and girls of reproductive age, 20 per cent live in refugee camps and 80 per cent live in communities.



HRH Princess Sarah Zeid, the maternal and new born health advocate visiting UNFPA-supported reproductive health clinic in Zaatari Camp in Jordan accompanied by the UNFPA Assistant Representative of Jordan, Ms Suad Nabhan. Credit:UNFPA, 2014.

Her Royal Highness Princess Sarah Zeid visited Zaatari camp and called on the international community to increase investments in reproductive health during emergencies and humanitarian crises to reduce avoidable maternal and newborn mortality and morbidity among most affected populations.

HRH Princess Sarah praised the work UNFPA is doing to save the lives of women and girls and stressed the importance of ensuring that no woman dies while giving birth. HRH Princess Sarah listened to Syrian refugee women and girls and interacted with the health and social workers in the UNFPA-supported women comprehensive centre and reproductive health clinics.

IRAQ

This month, the estimated number of internally displaced persons in Iraq reached 1.8 million and the number of persons residing in conflict affected zones reached 8.5 million, of which, more than 2.4 million are women of reproductive health age and up to 380,000 women are pregnant. The Government of the Kurdistan Region in Iraq is responding to two crisis at the same time as it hosts approximately 215,000 Syrian refugees and it is responding to the need of the 1.8 million of Iraqis, of which 40 per cent are women and girls of reproductive age, who were forced to flee their homes in Mosul Governorate and Anbar after the threat of Islamic State in Iraq and the Levant (ISIS).

The United Nations agencies along with the Government are facing a challenge to maintain reproductive health and GBV services for both the Syrian refugee and internally displaced women due to the scale of the situation that remains fluid and also very insecure.



"Shelter from the Storm, documenting UNFPA intervention to assist refugees and IDPs in Duhok/North of Iraq. Credit:UNFPA, 2014. <https://www.youtube.com/watch?v=IEBtFk2Z6Qw&feature=youtu.be>

TURKEY

According to the Prime Ministry's Disaster and Emergency Management Presidency (AFAD), the total number of registered Syrian refugees reached 217,259. They are living in 22 camps that are spread across ten provinces: Hatay, Sanliurfa, Gaziantep, Kahramanmaraş, Osmaniye, Mardin, Adana, Adiyaman, Malatya, and Kilis. There are an estimated 604,869 Syrian refugees living outside of camps in cities in the south-eastern region and in major cities in Turkey. The estimated number of women and girls of reproductive age is almost 250,000, 40,000 of which are pregnant.

The armed conflict in Syria has continued to be fierce near the Syrian border with Turkey. The sectarian internal conflict currently escalating in Iraq is causing further instability in the region and increasing the needs of the displaced populations. To date, thousands of Yezidis have been entering Turkey through its southeastern borders.

Tensions between the host communities and the refugees are increasing. Turkish communities are starting to hold demonstrations against the Syrian refugees in Gaziantep, Sanliurfa and humanitarian services are being affected in the border regions, as a result of these tensions.

EGYPT

There are 139,090 Syrian refugees in Egypt, of which 48.8 per cent are female.

HUMANITARIAN RESPONSE (1 - 31 AUGUST 2014)

SEXUAL AND REPRODUCTIVE HEALTH, INCLUDING FAMILY PLANNING

SYRIAN ARAB REPUBLIC

Reproductive health services: During this reporting period, UNFPA delivered through its implementing partners in Damascus, Rural Damascus, Homs, Aleppo, Tartus, Latakia, Hama Deir el-Zor, Al Raqa and Daraa 19,500 lifesaving reproductive health services and information, including emergency obstetric care for 8,400 women, safe delivery for 500 women through reproductive health vouchers and family planning for 3,000 women.

Reproductive health supplies: Through a United Nations joint convoy, UNFPA sent reproductive health equipment and supplies to support safe deliveries for 5,600 Iraqi woman refugees that are pregnant in Al-Hasakeh, and is in the process of sending new supplies to support health facilities where deliveries take place.

Reproductive health awareness sessions: UNFPA assisted-mobile teams reached 3,500 women residing in in Damascus, Rural Damascus, Homs, Aleppo, Tartus, and Hama with awareness raising information on reproductive health, including family planning.

Reproductive health training: A total of 24 midwives completed the basic and advanced life support for obstetrics training (BALSO), enabling them to provide safe delivery services for 1,600 women in Aleppo, Hama, Homs and Al-Sweida governorates.



UNFPA organizing a training course for 24 midwives in Al-Sweida governorate in Syrian Arab Republic Credit: UNFPA, 2014.

Supporting human resources: UNFPA is continuing to support the 28 mobile clinics, 27 static clinics, 13 medical points and mobile teams of the Syrian Family Planning Association and the Syrian Arab Red Crescents through the deployment of 207 obstetricians, gynaecologists, midwives, nurses and social workers in 12 governorates.

LEBANON:

Reproductive health materials: Around 80,000 reproductive health pamphlets were developed and printed addressing an array of topics such as; nutrition during pregnancy, reproductive tract infections, postpartum depression and family planning. Additionally, 150,000 reproductive health informative leaflets for Syrian refugees and 200,000 copies of pregnancy cards for women from the Syrian refugees and the Lebanese communities were printed and will be made available at the UNFPA-supported women's safe spaces as well as the registrations, primary health care and social development centres.

JORDAN

Reproductive health services: A total of 7,807 women and girls benefited from reproductive health services during the month, including family planning services, ante-natal care, post-natal care, the management of sexually transmitted infection, deliveries and other gynaecological services.

UNFPA supported the emergency delivery of a Syrian refugee woman who accessed one of the four UNFPA-supported Institute of Family Health (IFH) clinics in Sweleeh in Amman. The women and baby were referred to the hospital for further follow-up and care.



New born baby at UNFPA-supported clinic in Sweleeh, Amman-Jordan. Credit: UNFPA, 2014.



UNFPA implementing partners providing comprehensive reproductive health services to Syrian refugee women in Zaatari Camp, Jordan. Credit: UNFPA, 2014.



UNFPA distributing kits specially designed for mothers to Syrian refugee women at UNFPA-supported clinic in Irbid, Jordan: UNFPA, 2014.

UNFPA in collaboration with UNICEF supported the IFH with 100 baby kits and 100 mother kits covering the needs of Cyber City, King Abdalla and Emirate Jordanian camps for six months.

Reproductive health awareness: As part of the reproductive health awareness campaign, "tent to tent" individual awareness-raising and group sessions took place in Zaatari camp. UNFPA organized orientation sessions for an average of 60 women and girls and 45 men and boys community health volunteers, sensitized 1,508 persons in the camp and host communities with messages on family planning, early marriage, personal hygiene, sexually transmitted infections, nutrition, and vaccination for pregnant / lactating women and girls. UNFPA also distributed 3,200 information and communication leaflets on reproductive health.

Reproductive health supplies: UNFPA supported 20 selected primary health care centres with customized IUDs kits.

UNFPA supported the distribution of vouchers of super cereals to 69 women receiving ANC services so that all children aged 6-59

months can receive them. The gynaecologists provided the vouchers to pregnant women in their 2nd and 3rd trimester and provided clear messages on the use and benefits of the cereals for children.

IRAQ

Reproductive Health Services: During the reporting period, around 500 women and girls benefited from reproductive health services specifically: 82 women received reproductive health services in Domiz Camp in Dohuk and 111 deliveries were referred, while a total of 300 women and girls benefited from the reproductive health services at UNFPA-supported clinics in Kawergosk, Darashkran, Qushtapa and Basirma camps.

Supporting human resources: UNFPA deployed 50 nurses and midwives to support the Department of Health in Dohuk to provide reproductive health services for maternities and delivery rooms and to cope with the increase in patients as a result of the influx of internally displaced persons from Sinjar district.

Reproductive health supplies: UNFPA distributed post-rape treatment kits to the health facilities in Dohuk.

Reproductive health awareness materials: Approximately, 1,000 women health booklets were distributed to Syrian refugee women in Erbil and Duhok governorates.

TURKEY

Reproductive health supplies: 2,500 hygiene kits were delivered through the second cross border convoy to Northern Aleppo (Hairitan) in collaboration with OCHA, other United Nations agencies and INGOs.

Reproductive health training: UNFPA conducted the Minimum Initial Service Package for reproductive health (MISP) training for Syrian service providers in Sanliurfa province. The 19 Syrian health providers that were trained were identified through the International Middle East Peace Research Centre (IMPR) who conducts social support activities with the Syrian population in Turkey. The training participants included doctors, nurses, midwives and pharmacists who will be coordinating reproductive health humanitarian activities. This was the first training of Syrian service providers since the onset of crisis and was within the context of the Memorandum of Understanding (MoU) signed in July 2014 with the Ministry of Health – Public Health Agency of Turkey.



Participants during the MISP training course organised by UNFPA, Turkey. UNFPA, 2014.

EGYPT

UNFPA and the Arab Medical Union signed an agreement to recruit and build the capacity of community health workers in Giza governorate in Greater Cairo. The community health workers will include Syrian women and Egyptian women from the host community, they will receive a comprehensive TOT course on sexual and reproductive health and GBV related issues.

GENDER EQUALITY AND WOMEN'S EMPOWERMENT

SYRIAN ARAB REPUBLIC

Gender-based violence services: During the reporting period, UNFPA assisted-Syria Arab Red Crescent (SARC) and Syrian Family Planning Association (SFPA) clinics and mobile teams to provide medical examination and psychosocial support to around 3,100 women residing in the affected areas of Damascus, Rural Damascus, Idlib, Homs and Tartous. In Damascus and Rural Damascus, GBV screening services were provided to 600 women, of whom 90 women were GBV survivors who consequently received medical, community services and legal advices by UNFPA assisted SFPA clinic.

Outreach gender-based violence volunteers/activities: During the reporting period, UNFPA assisted clinics and mobile teams of SARC and SFPA in Damascus, Rural Damascus, Homs, Latakia, Tartus, Idlib and Deraa, provided 14,000 counselling services, including 2,800 psychosocial services.

Gender-based violence supplies: Around 1,500 Iraqi refugees received male and female dignity kits as part of a joint United Nations convoy.

Gender-based violence training course: In cooperation with the Ministry of Social Affairs, UNFPA facilitated a training and awareness raising sessions on reproductive health and GBV humanitarian needs and response for 42 community leaders and NGO staff in Sweida, which host 133,000 violence affected people, including 33,250 woman of reproductive age.

A total of 19 volunteers from the Syria Family Planning Association, who serve the affected people in Latakia, Tartous, Idlib, Hama, Homs, Aleppo, and Deir ez-Zor, completed a training session on psychosocial support and psychosocial first aid organized by UNFPA.

Gender-based violence supplies: UNFPA procured 10,500 dignity kits to be distributed among women and men affected by the ongoing crisis.

Staffing: UNFPA supported nine comprehensive reproductive health women centres in Damascus and Rural Damascus through the deployment of gynaecologists, midwives, psychosocial coun-

LEBANON

Gender-based violence services: A total of 50 women received GBV services during the month of August at Al Marj, Bekaa Listening and Counselling Centre (LCC) supported by UNFPA and run by NGO KAFA the national. Specifically: 13 new cases of GBV received social counselling sessions and 15 women attended follow up sessions; 6 women received legal counseling services and 16 women benefitted from psychotherapy sessions.

Gender-based violence outreach and trainings: During the month of August the following activities were implemented at the Listening and Counselling Centre (LCC) in Al-Marj, Bekaa: 8 awareness sessions on GBV related topics, including discrimination against women, early forced marriage, family violence, gender roles and stereotypes, reached 200 women; 4 sessions on reproductive health targeted 80 women; 24 animations sessions engaged more than 150 children; 12 sessions of English language were held for 23 women.

Gender-based violence supplies: Post-rape treatment kits were distributed to four health facilities in Beirut and Mount Lebanon, following the Clinical Management of Rape (CMR) health facility based-trainings conducted by the International Rescue Committee at the Majid Irsan primary health care centre (PHCC), Harii Governmental Hospital Beirut, Ain w Zein Hospital and Makhzoumi Foundation PHCC. Following the delivery of each kit, a sensitization session on CMR treatment and the content of the kit was conducted to a total of 30 service providers.



Distribution of the post rape treatment kit to Majid Irsan primary health care centre in Choueifat, Lebanon. Credit: UNFPA, 2014.

JORDAN

Gender-based violence services: A total of 1,037 GBV survivors have sought assistance in UNFPA-supported spaces and benefitted from different services, such as case management, psychosocial and legal representation and referral to other specialized centres.

During this month, UNFPA and its partners received 385 unaccompanied women and their 826 dependents at their safe reception center in Azraq camp which is especially reserved for women headed households or women that arrive alone. An average of 12 women per day utilized protection services at the reception area. The majority of refugee women were between 18-29 years of age (30 per cent). One per cent of female-headed households served by the reception services were under 18 and 7 per cent were elderly. The largest proportion of women, 46 per cent, was from Deraa, followed by Aleppo with 17 per cent.

Gender-based violence awareness sessions: UNFPA and its partners sensitized 2,969 persons on GBV issues, available services

and referral pathways both in the camps and in host communities, through awareness sessions. UNFPA in partnership with the International Rescue Committee reached 8,674 refugees, through home-to-home visits conducted by 24 volunteers in Zaatari Camp, as follow: 1,680 females (1,441 girls and 2,975 women) and 2,321 males (1,568 boys and 2,346 men).

Gender-based violence training: The GBV sub-working group and the health working group attended a two-day training workshop in Amman on how to integrate GBV into the health response. This training was part of the global revision of the IASC GBV guidelines.

The Ministry of Health in partnership with UNFPA, conducted six training workshops to strengthen the capacity of 121 health service providers on caring for GBV survivors, reaching 71 female and 50 male staff in Amman, Irbid and Zarqa.



Distribution of the dignity kits to internally displaced women in Erbil, Iraq. Credit: UNFPA, 2014.

IRAQ

Gender based-violence services: A total of 12 women received basic listening and counselling services and referrals in Domiz Camp in Dohuk and a total of 47 women received GBV services in Kawar-gosek, Darashakran and Baserma camps and in Bahraman women's space in Erbil, while seven GBV survivors were referred to further psychological support.

60 women participated in basic vocational trainings and weekly seminars in Domiz Camp in Dokuk and 271 women and girls attended the various recreational sessions in the camps, including sessions on tailoring, hair dressing, crocheting in addition to English language and computer skills.

Gender-based-violence training: UNFPA provided basic GBV case management session at the Yasmin women's space in Domiz Camp to a total of 69 Syrian refugee women.

Gender-based-violence outreach activities: Four field mobile teams were established to provide psychosocial support to internally displaced persons in Dohuk and to conduct a basic assessment to better understand the situation and assess the immediate and long-term needs of women and girls. During the reporting period more than 200 women benefitted from group and individual counseling services in the following areas: Shariya, Khanke, Fayda, Semeel Domiz, Zakho, Amadia, Zawita, Sarsank, Mangesh, Bagera, Deralok, and Sheladiz.

Gender-based violence awareness activities: Six awareness ses-

sions on GBV and reproductive health were conducted and attended by 140 women in Kawargosek, Darashakran and Baserma camps. The sessions aimed to provide equip women with the necessary information on primary healthcare, reproductive health and GBV.

Gender-based violence supplies: UNFPA distributed 3,600 dignity kits to the internally displaced persons and refugees in Erbil and Dohuk.

TURKEY

Gender-based violence training: A draft manual for a three-day training of trainers (ToT) on "Gender Based Violence (GBV) Focused Psychosocial First Aid" has been developed and is currently under peer-review.

EGYPT

UNFPA in collaboration with Save the Children built the capacity of 12 GBV service providers on the clinical management of GBV survivors. The trained providers serve both Syrian refugees and host communities.

SUPPORTING ADOLESCENTS AND YOUTH

JORDAN

UNFPA with the support of the Institute of Family Health reached 743 youth (365 young women and 378 young men) in the Emirati Jordanian, Cyber City, King Abdullah Park camps in Amman and the Jordan valley. In Zaatari Camp, the International Rescue Committee supported by UNFPA provided life-skills and recreational activities to 90 girls and 153 boys.

IRAQ

International Youth Day: UNFPA celebrated International Youth Day by inaugurating the two youth spaces at Kawargosek and Darashakran camps, with the participation of 120 youth comprising 12 teams. The first information sessions at the spaces were provided by a psychosocial support specialist.

Youth training: A total of 48 young women and men participated in sessions organized in Sulaymaniyah on sexual and reproductive health; early and forced marriages; anger management and dealing with emotions.

In Dohuk, 100 young women and men benefited from trainings and peer-education sessions at the Sardam youth centre in Domiz, as follow: 20 persons participated in music classes, 20 in painting classes and 60 in peer-education weekly sessions.

Supplies: A small football field has been established in Kawargosek and Darashakran camps.

Supporting human resources: Ten young Syrians volunteered with UNFPA to distribute dignity kits to internally displaced persons (IDPs) at Shariya, Bajid Qandala and Dohuk. Being themselves displaced, they were able to communicate with the IDPs and support them emotionally.

EGYPT

UNFPA invited Syrian young people to participate in the International Youth Day activities which took place at the American University of Cairo, Greek Campus and Sawi cultural wheel. The participation of Syrian young people came under the framework of the Y-PEER network and they participated as youth volunteers. The participation of Syrian young people in this and similar events continues to enhance the relationships between Syrian refugees and the host community, hence leading to better refugee and resilience efforts.

COORDINATION AND CAPACITY BUILDING

SYRIAN ARAB REPUBLIC

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

UNFPA participated in developing a two-month United Nations emergency work plan for cross-line and cross-border convoys.

LEBANON

UNFPA chaired the reproductive health sub-working group meeting, where they discussed with the members the launching of the situation analysis of the reproductive health, the reproductive health commodities procurement and distribution and the on-going reproductive health awareness programmes. Moreover they shared updates on the clinical management of rape services and activities.

UNFPA participated in the validation workshop for the national GBV Standard Operational Procedures (SOPs), where members of the gender-based violence task force reviewed the draft SOP documents and provided comments on the content.

Initiation of the 3RP (Regional Resilience Response Plan) situation analysis. UNFPA, together with UNHCR and UNICEF, finalized the first draft of the 3RP (Regional Resilience Response Plan) situation analysis. The draft has been shared with the protection working group and the coordinators in the field for review and comments. The drafting of the situation analysis for the sector constitutes the first phase of the 3RP process.

JORDAN

UNFPA chaired the monthly national reproductive health coordination meeting in Amman to discuss the performance checklist, family planning logbook, and reproductive health map and suggested monitoring framework.

UNFPA co-chaired the bi-weekly Reproductive Health coordination meeting in Zaatari Camp to discuss the awareness campaign, including education and communication materials, data collection tools, the quality of reproductive health data and services provided, referral system and challenges. Family planning guidelines and a log book was provided in Arabic to partners. A discussion took place on post-abortion care as it remains one of the main challenge in

Zaatari Camp. A reproductive health awareness meeting was held to discuss a play to be presented as part of reproductive health campaign on early marriages and early pregnancy.

UNFPA co-chaired the weekly Youth task force meetings in Zaatari Camp to map regional and international scholarships opportunities and coach and motivate youth from the camp to apply.

The GBV sub-working group continues the mapping of 40 safe spaces, as well as revising a position paper on standards and definitions.

IRAQ

UNFPA co-chaired the bi-weekly SGBV sub-working group meeting and weekly protection meetings in Erbil and bi-weekly meetings at the camp level (protection/coordination) in the governorates of Duhok and Erbil. During the reporting period, UNFPA and its partners endorsed the ToRs and strategy of the SGBV working group.

TURKEY

UNFPA participated in the "Response Plan for Humanitarian Operations from Turkey" workshop organized by OCHA in Gaziantep. The workshop highlighted the process of developing a response plan, the roles of partners in implementing the Syria assessment and monitoring initiative, the link between the Emergency Response Fund (ERF) and the response plan, and monitoring of implementation of the joint activities.

UNFPA visited a humanitarian international NGO "Syrian Social Gathering" working in Mersin, where 200,000 Syrians reside in urban settings. The INGO provides social support to registered Syrian refugees and medical support in its out-patient clinic. UNFPA pledged to support the INGO with a woman's health counseling unit to be able to provide counseling and listening services to refugees visiting the INGO.

In August, UNFPA participated in the United Nations Task Force weekly meetings in Ankara, field sector coordination meetings in Gaziantep and GBV Working Group monthly meetings at the Ministry of Family and Social Policies.

UNFPA participated in the monthly GBV working group meeting, where participants reviewed and discussed agency collaboration activities on the GBV humanitarian response.

CHALLENGES

SYRIA ARAB REPUBLIC

The timely delivery of humanitarian assistance, especially in light of the Security Council Resolution 2139 and 2165 is challenging due to the changing and increasing insecure conditions especially in the border governorates.

A bureaucratic hurdle imposed by the government for approving joint United Nations convoys is also affecting the ability of United Nations agencies to deliver humanitarian response to the affected governorates, including the besieged areas.

Shortage of funding and hesitancy to continue to fund the Syrian crisis remain major challenges that affect the sustainability of the on-going interventions and affect the ability of UNFPA and implementing partners to reach additional affected populations with reproductive health and GBV services.

LEBANON

Refugees are moving to new areas that require additional interventions. The highly fragile situation with intensified hostility in the North, Bekaa and the South is affecting programme delivery and staff movement.

JORDAN

The delay in signing a memorandum of understanding between the International Federation of Red Cross and Red Crescent and the Ministry of Health to open a referral hospital in Azraq camp has left women with no place to go for normal and Caesarean-section deliveries, putting women's lives at risk. As a result, UNFPA with the International Medical Corps established emergency sites to receive and refer cases.

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

High turnover between health care professionals had led to interruption of some services and there is continuous demand for capacity building of new staff.

Increasing salaries scales among health care professionals due to high demands and competitiveness between organizations are constricting already scarce resources.

According to health providers, unsafe abortion is one of the main challenges in Zaatari Camp. Health providers receive up to five cases a month of women seeking post-abortion care. This requires increasing family planning programmes as well as building the capacity of UNFPA-supported providers on the provision of post-abortion care.

IRAQ

Challenges in allocating and providing needed services to internally displaced persons, as people are still regularly moving.

The public private hospitals are overcrowded, especially as Ministry of Health protocols only allow deliveries in hospitals.

The absence of registrations system at the health facilities, making it difficult to obtain accurate figures concerning the number of refugees women that visit UNFPA-supported clinics or received safe delivery services..

Difficulties in deploying specialized medical experts in Dohuk as most are fleeing their country.

The living conditions of the internally displaced person are alarming as they are spread all over Dohuk governorate, living on the streets, in schools, public buildings, in host communities and in unfinished buildings with no privacy or protection measures. Reaching them is challenging and requires additional efforts. There are also challenges in identifying psychosocial and GBV experts to support the field teams in Dohuk to respond to the increasing demand.

The lack of access to certain affected areas because of insecurity prevents, UNFPA and partners from delivering reproductive health and GBV services.

TURKEY

The escalating regional conflict with additional fighting in Iraq is causing greater displacement and humanitarian needs.

Social tension between Turkish communities and Syrian refugees are continuing to escalate across the country. More-over targeted attacks on Syrian refugees have raised serious concerns.

There are a limited number of partners with reproductive health and GBV expertise to support cross border operations. Reproductive health and GBV issues are still seen as taboo by many and make it difficult to implement.

Significant organizational changes in the structure and leadership of the Ministry of Family and Social Policies and the Ministry of Health at the central and provincial levels have presented challenges for the coordination and implementation of programmes.

DONORS & PARTNERS

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