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 its partners are scaling up efforts to empower women and youth from Syria as well as affected communities in host countries, with the aim of improving their lives, including by advocating for the respect of human rights and gender equality.

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

Siham, 21 years old, arrived three years ago with relatives to Domiz camp, Iraq, while her parents stayed behind in Qamishli, Syria. She is homesick and lonely. Siham desperately wants to be reunited with her parents and to be able to return to Syria. “Everything is alien. I miss my parents, home, neighbourhood and friends. I miss the familiarity of home, neighbourhood. In a camp there are always new people arriving and the camp around you is always changing.

“Syrian women in the camp are doubly at risk: both as refugees, and because of their gender. They always feel that they are precieved as easy targets. Many Syrian women are supporting their families alone,” Siham said. She feels very isolated but she is slowly making friends at the centre. “It helps me to become a little more outgoing and less lonely. Taking part in activities and courses makes it easier for me to find friends and support women around me. Syrian women are strong. They are only asking for two things: a safe place and dignity,” Siham said.

Credit: David Brunetti | UNFPA, 2016
HUMANITARIAN RESPONSE

SYRIAN ARAB REPUBLIC FROM ALL CHANNELS

SYRIAN ARAB REPUBLIC:

SYRIA'S AFFECTED BY THE CRISIS
13.5 MILLION

WOMEN AND GIRLS OF REPRODUCTIVE AGE
4.1 MILLION

YOUTH
2.5 MILLION

PREGNANT WOMEN
360,000

QUICK FIGURES

SYRIANS AFFECTED BY THE CRISIS
13.5 MILLION

WOMEN AND GIRLS OF REPRODUCTIVE AGE
4.1 MILLION

YOUTH
2.5 MILLION

PREGNANT WOMEN
360,000

SOURCES: Turkey’s Disaster and Emergency Management Authority (AFAD), UNHCR, OCHA, and UNFPA. February 2016.

UNFPA RESPONSE IN SYRIA

REPRODUCTIVE HEALTH AND SAFE MOTHERHOOD

SERVICES

296,644 reproductive health services
• 45,855 reproductive health services to hard-to-reach areas
• 3,685 deliveries supported by UNFPA for women above 18
• 4,988 deliveries for women under 18
• 6,900 ante-natal services
• 16,300 pre-natal services
• 14,720 family planning services
• 510 deliveries supported through the UNFPA voucher system

AWARENESS SESSIONS
8,160 beneficiaries

OUTREACH ACTIVITIES
16,830 beneficiaries

GENDER EQUALITY AND WOMEN’S EMPOWERMENT

SERVICES

43,802 gender-based violence related services
3,300 services in hard-to-reach areas

AWARENESS SESSIONS
14,533 beneficiaries

OUTREACH ACTIVITIES
7,933 beneficiaries

HYGIENE KITS
39,500 kits distributed

TRAINING
47 service providers on gender-based violence prevention and response

RESPONSE THROUGH CROSS-BORDER MODALITY (1-30 JANUARY 2016)

SERVICES in northern governorates of Syria

13,766 beneficiaries received reproductive health services in the northern part of Syria
• 156 early pregnancies were recorded
• 1,140 safe deliveries
• 375 Caesarean-section deliveries
• 4,166 ante-natal care services
• 848 family planning

69 percent (similar to January) of women rated the medical services as excellent, while the rest rated the medical services as very good. The feedback shows that staff helpfulness and friendliness were the strength in the centres. 44 percent commented positively on the hygiene level of the hospital.

UNFPA-SUPPORTED FACILITIES IN SYRIA

IN AN-GOING ASSESSMENT OF THE QUALITY OF SERVICES SUPPORTED BY UNFPA, AS PART OF CROSS-BORDER OPERATIONS FROM TURKEY, A TOTAL OF 29 FEEDBACK FORMS WERE FILLED BY BENEFICIARIES IN A UNFPA-SUPPORTED HOSPITAL IN ALEPPPO. 69 PERCENT (SIMILAR TO JANUARY) OF WOMEN RATED THE MEDICAL SERVICES AS EXCELLENT, WHILE THE REST RATED THE MEDICAL SERVICES AS VERY GOOD. THE FEEDBACK SHOWS THAT STAFF HELPFULNESS AND FRIENDLINESS WERE THE STRENGTH IN THE CENTRES. 44 PERCENT COMMENTED POSITIVELY ON THE HYGIENE LEVEL OF THE HOSPITAL.
INTERNATIONAL WOMEN’S DAY

On International Women’s Day, we reaffirm our commitment to supporting Syrian women who are determined to stand strong and united in the face of challenges,” said Massimo Diana, UNFPA Representative in Syria.

UNFPA organized several activities in collaboration with implementing partners, youth pledging events, with the participation of women and community leaders, advocating for better female youth rights and opportunities. There was a reception and handicraft exhibition in Homs, where around 40,000 women received an orientation on women’s rights and the importance of their empowerment.

Two new women safe spaces were inaugurated in Damascus countryside and Homs in cooperation with the Syrian Archbishopric Relief and Development Centre to promote women’s potential and to provide means of women protection, aiming to benefit 120 women a day. “The goal of the centre is to help Syrian women in these difficult circumstances. In addition to their rehabilitation and training in order to find jobs, we also provide psychological support to encourage resilience for women in their local community.”

In December, the library was one aspect of the centre that received a range of positive feedback from UNFPA beneficiaries.

STEP IT UP FOR GENDER EQUALITY

For more than five million Syrian women and girls, gender equality and the full enjoyment of human rights remain elusive.

This month, on International Women’s Day, UNFPA called for action to protect the rights of women and girls and to rectify long-standing gender inequalities. Gender equality and equal protection of human rights, including the right to sexual and reproductive health, are important in and of themselves, but they are also a means to achieving social and economic objectives, including the new United Nations Sustainable Development Goals adopted by the international community in September 2015. These goals emphasize the achievement of gender equality, good health and quality education for all and the elimination of poverty.

The six countries affected by Syria celebrated International Women’s Day, each in its way:

SYRIAN ARAB REPUBLIC

“On International Women’s Day, we reaffirm our commitment to supporting Syrian women who are determined to stand strong and united in the face of challenges,” said Massimo Diana, UNFPA Representative in Syria.

UNFPA organized several activities in collaboration with implementing partners, youth pledging events, youth participating in activities and training in order to find jobs, as well as providing psychological support to encourage resilience for women in their local community.”

JORDAN

UNFPA celebrated Mother’s Day at one of its centres at Zaatar camp. Activities included a quiz on reproductive health and gender issues. A singer was also invited to the event for recreational purposes. Flowers and gifts were given to mothers attending the event.

In addition to the regular activities offered at the UNFPA/Questscope Youth Centre in Zaatar, youth from inside and outside the centre are continually accessing services at the library, including borrowing books in many different fields (such as self-development, problem-solving, and writing skill development). The library has become known as a safe and peaceful space for students to study, as well as to participate in a number of educational and cultural activities such as literary discussions, writing competitions, and poetry and prose writing sessions. In December, the library was one aspect of the centre that received a range of positive feedback from UNFPA beneficiaries.
HUMANITARIAN RESPONSE

NEIGHBOURING COUNTRIES AFFECTED BY THE CRISIS

QUICK FIGURES

SYRIAN REFUGEES AFFECTED BY THE CRISIS 4,812,851
SYRIAN REFUGEE WOMEN AND GIRLS OF REPRODUCTIVE AGE 1,200,000
SYRIAN REFUGEE YOUTH 800,000
SYRIAN REFUGEE PREGNANT WOMEN 85,184

SOURCES: Turkey’s Disaster and Emergency Management Authority (AFAD), UNHCR, OCHA, and UNFPA March 2016.

REPRODUCTIVE HEALTH AND SAFE MOTHERHOOD

TURKEY

SERVICES

- 280 services for Syrian and Turkish beneficiaries
- 168 ante-natal care services
- 61 post-natal care services
- 69 family planning services
- 17 pregnancies for women under 18

OUTREACH ACTIVITIES

- 1,931 Syrian and Turkish beneficiaries

CAPACITY BUILDING

- 34 health service providers (12 nurses and 23 midwives) on Emergency Obstetric Care

KITS

- 226 Kits include condoms, microlut pills and mycrogynon

LEBANON

BUILDING CAPACITIES

- 40 beneficiaries

PUBLICATIONS

- Clinical management of rape (CMR) services related brochure developed and designed by ABAAD

JORDAN

SERVICES

- 15,772 reproductive health services
- 232 safe deliveries and 24 C-sections
- 999 family planning services
- 2,937 ante-natal care services
- 784 post-natal care services
- 1,876 infection

AWARENESS SESSIONS

- 6,411 beneficiaries in camp and in host communities

SUPPLIES

- 7 reproductive health delivery kits to Institute of Family Health, IRC and MDM

IN JORDAN, AS A RESULT OF JOINT ADVOCACY EFFORTS BETWEEN UNFPA, UNHCR AND THE HIGHER POPULATION COUNCIL (HPC), A LETTER WAS ISSUED BY THE MINISTRY OF HEALTH STATING THAT MOTHER AND CHILD HEALTH AND FAMILY PLANNING SERVICES WILL BE PROVIDED FREE OF CHARGE FOR REGISTERED SYRIAN REFUGEES STARTING 1 MARCH 2016.

UNFPA PARTICIPATED IN A MULTIAGENCY ASSESSMENT LED BY THE MINISTRY OF HEALTH FOR RUWAYSHID HOSPITAL WHICH IS THE CLOSEST REFERRAL FACILITY FOR INDIVIDUALS SITUATED AT THE NORTH-ASTERN BORDER OF JORDAN WITH SYRIA. THE OBJECTIVE OF THE ASSESSMENT WAS TO IDENTIFY ANY GAPS IN THE HOSPITAL AND ACCORDINGLY DEVELOP A RESPONSE PLAN JOINTLY WITH THE MINISTRY OF HEALTH SO THEY CAN ASSIST THE MOST VULNERABLE.

AROUND 100 REFUGEES ARE BEING ADMITTED TO THE AZRAQ CAMP IN JORDAN ON A DAILY BASIS SINCE MARCH 2016. UNFPA THROUGH ITS IMPLEMENTING PARTNER, IMC, HAS ESTABLISHED A MOBILE TEAM THAT IS PROVIDING REPRODUCTIVE HEALTH SERVICES AT THE RECEPTION AREA. HOWEVER, THERE IS A NEED TO SCALE UP SERVICES AND UNFPA IS PLANNING TO EXPAND ITS ACTIVITIES IN AZRAQ CAMP IN ORDER TO RESPOND TO THIS NEW ADDITION TO THE CAMP POPULATION.

IRAQ

OUTREACH ACTIVITIES

- 800 beneficiaries

EGYPT

AWARENESS SESSIONS

- 566 beneficiaries

OUTREACH ACTIVITIES

- 542 beneficiaries
### Gender Equality and Women’s Empowerment

#### Turkey
- **Services to Survivors**: 42 services
- **Women and Girls Accessing Safe Spaces**: 275 Syrian beneficiaries
- **Outreach Activities**: 175 Syrian beneficiaries
- **Training**: 35 Syrian psychologists and Turkish social workers at the Turkish Psychological Association

#### Lebanon
- **Women and Girls Accessing Safe Spaces**: 57 Syrian beneficiaries

#### Jordan
- **Services (including psychosocial support, social counseling, legal consultations, and referral)**: 1,018 Syrian beneficiaries
- **Activities Inside the Women’s Spaces**: 9,916 beneficiaries
- **Outreach Activities**: 1,272 women, girls, men, and boys
- **Recreational Activities (including self-reliance, vocational training, and life skills)**: 5,375 Syrian beneficiaries

#### Iraq
- **Awareness Sessions**: 30 beneficiaries

#### Egypt
- **Recreational Activities**: 94 Syrian beneficiaries
- **Awareness Sessions**: 594 Syrian women and girls
- **Outreach Activities**: 542 Syrian women and girls

UNFPA established eight women and girls safe spaces in Ankara, providing services for Syrian refugees.

Fatme, Syrian refugee in Lebanon, “I am proud of who I am now thanks to the training I got at the UNFPA centre. In the beginning, I came with sorrow, but now I am only sad because this training is coming to its end. I realize now how enriching it is to talk to peers and share experiences. I sold all the items in the exhibition, and I am happy for that. However, from now on, I will only see my friends and our trainer occasionally. I know now that they are another family for me who I can count on and trust when I am in need.”

### Supporting Adolescents and Youth

#### Lebanon
- **Activities**: 180 Syrian young people

#### Jordan
- **Activities (including self-reliance, vocational training, life skills and other activities related to reproductive health and gender-based violence)**: 1,397 Syrian and Jordanian youth in camps and host communities
- **Training**: 102 Syrian and Jordanian youth in camps and host communities

#### Iraq
- **Activities**: 80 Syrian young people

#### Egypt
- **Activities**: 80 Syrian young people

Abdullah is seventeen years old and lives in Zaatari Camp with his family, including his mother and father, two brothers, and three sisters. He has dropped out of school and expressed that he is no longer interested in studying. His family faces extreme poverty, which has led him in the past to seek work outside of Zaatari Camp in Jordan. Abdullah came to the youth centre after hearing about it from friends who were already attending activities there. He began participating in sports activities and in the mentoring programme. Through working with Abdullah for a short time the UNFPA’s implementing partner, Questscope, noted that he had some aggressive tendencies and hostility towards others.

UNFPA-supported youth centre employees strongly recommended that he attend the center on a regular schedule, to provide some routine and stability in his schedule. He responded well to this approach and began attending regularly and being committed to the activities. Through Abdullah’s serious engagement in and dedication to sports and mentoring activities, Questscope volunteers have started to observe a decreasing in his negative, unpredictable behaviour. It was observed recently that he began to take more care of his physical appearance, began coming on his own to the centre with regularity, and started to interact more positively with his peers. His demeanor is noticeably calmer as well. These changes have been noted both in individual psychosocial support sessions as well as through observation of his interaction with the group both on and off of the sports field. The frequency of his aggressive outbursts has decreased and the team is continuing to work with him closely.
UNFPA-SUPPORTED FACILITIES IN REFUGEE-HOSTING COUNTRIES

Number of field reproductive health clinics or mobile teams

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>Lebanon</td>
<td>5</td>
</tr>
<tr>
<td>Jordan</td>
<td>19</td>
</tr>
<tr>
<td>Iraq</td>
<td>10</td>
</tr>
<tr>
<td>Egypt</td>
<td>5</td>
</tr>
<tr>
<td>Turkey</td>
<td>19</td>
</tr>
</tbody>
</table>

Number of women’s spaces

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
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<td>Lebanon</td>
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</tr>
<tr>
<td>Jordan</td>
<td>24</td>
</tr>
<tr>
<td>Iraq</td>
<td>20</td>
</tr>
<tr>
<td>Egypt</td>
<td>5</td>
</tr>
<tr>
<td>Turkey</td>
<td>16</td>
</tr>
</tbody>
</table>

Number of youth centres and safe spaces

<table>
<thead>
<tr>
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<td>Egypt</td>
<td>12</td>
</tr>
<tr>
<td>Turkey</td>
<td>1</td>
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</tbody>
</table>

COORDINATION & CAPACITY BUILDING

SYRIAN ARAB REPUBLIC
UNFPA participated in the access working group meeting, 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 met AKDN (a new implementing partner), to expand its programme and to improve the reproductive health and gender-based violence response.

TURKEY
UNFPA participated in the WASH working group meeting, health working group meeting, protection working group meeting and SGBV sub-working group meeting in Gaziantep.

UNFPA attended the monthly coordination meeting in Gaziantep. Turkish Family Planning Association (TAPV) and organized a workshop on refugee and reproductive health and rights in Gaziantep.

LEBANON
UNFPA co-led with UNHCR the SGBV Task Force meeting where the 2016 workplan and priorities were endorsed.

The Lebanon Humanitarian Coordination, M. Philippe Lazzarini, visited the UNFPA funded centre that promotes women’s empowerment and provides reproductive health services though a local NGO “Al Mithaq” in the area of Baalbeck.

JORDAN
UNFPA contributed to the revision of the Inter Agency Standing Committee Gender Handbook in Humanitarian Action 2005. The revision of the handbook entailed three participatory processes. UNFPA participated at two levels, providing technical inputs in the capacity of the working groups lead and suggested direct inputs to the content of the handbook through an initiative led by UN Women and Oxfam. The revised handbook with suggested inputs will be ready by early 2017.

A task force was set up by the reproductive health sub-working group in order to identify a strategy on how to better involve men in reproductive health issues. The group also finalized the 3W mapping of reproductive health services offered by various NGOs. Due to the new Ministry of Health decision providing free-of-charge maternal and child health services to refugees, the reproductive health working group is working with partners providing cash for reproductive health in order to avoid duplication in service provision. This will ensure that the cash for reproductive health programme covers unregistered refugees and other services not covered by the Ministry of Health such as deliveries.

UNFPA is co-chairing the Youth Task Force in Zaatari camp. In the past month, UNFPA facilitated two field visits to partner agencies. The purpose of these exchanges is to learn best practices from partners, improve referrals between organisations, provide a space for youth volunteers to attend the meetings, which are held in Arabic, and share information with youth and partners on issues related to youth in the camp.
LILAF: FROM A REFUGEE GIRL LIVING IN DENIAL TO AN INSPIRING CHANGE-MAKE

In February 2013, Lilaf Khalil Hamousse from Aleppo entered the Kurdistan region in northern Iraq, crossing the border with her parents and three brothers in a bid to escape for their lives. Aged 23 years, she was then a second year undergraduate student studying chemistry in a university.

“When we first came to Kurdistan, I discovered that it was impossible for me to live in the camp. I left my family and started living with my aunt and her family close to Domiz camp because I couldn’t come to terms with leaving behind a comfortable life in our own house to live in a tent under hot weather conditions. For four and a half months, I didn’t go to my family. At my aunt’s place, I used to perform all their housework, but found consolation in the fact that I was at least not living in a tent. Those were the toughest days of my life.”

Embracing life for a larger objective as a peer educator

Lilaf smiled as she described the turning point of her state of depression, seclusion, and resentment. “It was after those four and a half months that they called me from a centre nearby and said I could take part in a training; it was May 2013. That was the first training in my life, and the first time I participated in any activity or session inside the camp.”

“The five-day peer education training turned out to be the best hours I had spent ever since I had started living as a refugee. It opened my eyes to so many things. Before attending the session, I had given up on life; it seemed like life had come to a halt.” Lilaf recalled having been influenced by her interactions with other young people her age who were living in the camp. “There were others like me who were university students but were now living in a single tent with all their family members. They had also left behind all their dreams.”

Immediately after the peer education training, Lilaf voluntarily packed her bag and went to the camp to live with her parents and brothers. “At first, I hated going to the toilet. I rejected the idea of sharing a single bathroom with all neighbours, but soon, just like everyone else, I got used to it,” Lilaf recollected.

For over a year, Lilaf acted as a volunteer peer educator in Domiz refugee camp’s UNFPA-supported Sardam youth space. She conducted sessions for young people on sexual and reproductive health, early and forced marriages, and HIV/AIDS, in addition to other capacity building activities and life skills that enabled young people to deal with the situation in the camp, and to make informed decisions. “I am living with them; I can see their pain, and we all learn from each another. This is very unique.”

Lilaf’s jubilant and outgoing personality, as well as her determination to assist young people, won her an interview and she ended up being appointed as manager of the Sardam youth friendly space at Domiz refugee camp. On an average, 90 youth per day visit the youth space that she manages.

Lilaf holds the peer education programme very close to her heart, and is determined to involve as many youth as possible from the camp. “In one of the sessions, I asked the group to give their opinion on an issue I had raised. One of the girls conceded that it was the first time in her life that anyone had sought her opinion. I feel I have become part of making young people’s dreams come true, helping them to move out of the box they live in, or the depression they experience as refugees living in a tent,” Lilaf stated.

“Peer education changed me a lot, a lot, a lot,” Lilaf reiterated when asked what peer education meant to her. She added, “My thinking has totally changed. I accept everyone. I don’t judge people. I wasn’t like this before. Mum raised me to live at home and study only.”

“I used to be very lonely but now I am social too. I laugh. My dad always tells me that I have changed in Kurdistan. I don’t regret coming here. I feel I have grown up and opened my eyes. Peer education was the start of a new me.”

“The biggest challenge facing young people who were university students or who had finished year 12, was that they wanted to continue their education. Most of them cannot find jobs; it is hard for them to just sit and do nothing. So many are thinking about migrating to Europe; of course, just the boys; girls cannot leave or travel without their families.”

A refugee training young IDP girls in her host country

The youth friendly space manager passionately spoke about her experiences with regard to training new peer educators among IDPs in Dohuk governorate. As part of UNFPA’s initiative to assist girls whose families and themselves had been affected by the ISIS attack on Sinjar, Lilaf and her peer educator friends have trained more than 80 young girls in the IDP camps in Dohuk.

“Here I was, a refugee myself, training young IDP girls in the country I was hosted by.” Lilaf’s tone changed; with sorrow and empathy, she muttered, “I narrated my story to them (IDP girls). I can relate to their pain. I told them life goes on; it doesn’t stop.” After a momentary pause, she admitted, “but their (the IDPs) pain is harder than ours (the refugees).”

“In one of the sessions I conducted, all girl participants thought HIV/AIDS is acquired by shaking hands with an infected person or by eating from the same plate.”

“My dream is to become a pharmacist’

When asked about her dreams, Lilaf said she wanted to complete her studies, like so many other girls around her. “And I want to become a pharmacist, but even while I am a pharmacist, I will continue to conduct peer education training and sessions. Marriage can be a dream too, but not now; I need to fall in love first,” she added, laughing. “My mum won’t let me marry any local here; she wants me to marry someone from our own area. I am trying to change her opinion, slowly.”

Lilaf, who also advocates against early and forced marriages, joked, “I am using all that peer education has taught me with my mum, so that she can change her mind and let me marry the man of my choice.”

By Sazan Mandalawi
CHALLENGES

SYRIAN ARAB REPUBLIC

The dramatic depreciation of the value of Syrian pound is affecting the ability of affected people to cope with the increase in living costs. As such, women can be exposed to different risks including gender-based violence.

Limited financial resources are affecting the ability of UNFPA to expand the humanitarian response programmes.

Accessing beneficiaries to services is still a challenge in many areas due to the deteriorating security situation, restrictions of movement, lack of transportation and border crossing constraints.

Implementing of the humanitarian response is challenging due to limited capacity of implementing partners.

The deteriorating security situation in Dara’a creates difficulties in accessing medical facilities. Air strikes have targeted some health facilities, making provision of health services in some areas a challenge.

Staff availability and lack of supplies, especially medication and consumables, for new health facilities remain a challenge in the southern areas of Syria.

TURKEY

The economic conditions of Syrian refugees make it difficult for them to reach or access many of the programmes set up for their benefit.

The current legislation on employment for the Syrians under temporary protection increase hopes among the population for future employment opportunities.

Current security threats within and outside the borders of Turkey have had indirect negative impact on the programming.

IRAQ

There is a continuing lack of resources to sustain the ongoing programmes.

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 continue to be difficult.
Since 2012, UNFPA (the United Nations Population Fund) in Lebanon has been an active member of the Syria humanitarian response and coordination mechanisms, always guided by its core mandate on promoting access to Reproductive Health (RH) services and information and preventing/responding to Gender Based Violence (GBV). In times of crisis, UNFPA keeps serving the most vulnerable, in particular women and young girls. Based on the specific needs identified in the field through continuous generation of evidence, UNFPA has provided a variety of services targeting both Syrian refugees and Lebanese in hosting communities.

Specifically and in RH, the main priorities supported by UNFPA consisted of capacity development of medical and paramedical staff on quality services, procurement and distribution of needed medical equipment, supplies, drugs and contraception to hospitals and primary health care centers, as well as awareness-raising of the affected population on various issues namely family planning, sexually transmitted infections, safe motherhood, among other.

On the other hand, the GBV prevention and response programme supported by UNFPA focused on delivering services to survivors of violence including legal representation, psycho-social support and basic livelihood skills; through shelter, safe spaces and listening and counseling centers among others. In addition, developing capacity of partners and service providers on GBV was supported at national level complemented with women empowerment initiatives using innovative approaches. While engaging men and boys was initiated in 2015 in the fight against GBV, focus on preventing child marriage was also addressed. Dignity kits were continuously provided to women and young girls throughout all the activities.

Under the youth programme, UNFPA supported several activities aiming at providing Syrian and Lebanese young people with the knowhow, tools, and spaces to engage in cultural expression for promoting participation, cooperation, tolerance and acceptance. UNFPA leads the RH Sub-Working Group, the Inter Agency Youth Task Force, and the Task Force on Clinical Management of Rape survivors and co-leads the SGBV Task Force.

**Overview**

**Activities - Geographical Distribution**

**Activities - Funding**

**People of concern to UNFPA**

**Beneficiaries**

**Partners**

**Contact Information:** info-lebanon@unfpa.org

**UNFPA Lebanon**

**UNFPA Because Everyone Counts**

**UNHCR Figures - 31 December 2015**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Total</th>
<th>Gap</th>
<th>Ratio</th>
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<tbody>
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<td>43%</td>
<td>57%</td>
<td></td>
</tr>
<tr>
<td>GBV</td>
<td>56%</td>
<td>44%</td>
<td></td>
</tr>
<tr>
<td>Youth</td>
<td>77%</td>
<td>23%</td>
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</tbody>
</table>

**Funding**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Funds Allocated per sector</th>
<th>Funds Appeared: Received versus Gap per sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>RH</td>
<td>43%</td>
<td>57%</td>
</tr>
<tr>
<td>GBV</td>
<td>56%</td>
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<td>Youth</td>
<td>77%</td>
<td>23%</td>
</tr>
</tbody>
</table>

**Donors:** Canada, CERF, Denmark, MBC Group, UNFPA, UNICEF, USA

**UNFPA Estimates - 31 December 2015**

1. Total registered refugees*
2. Female-headed households*
3. Women & girls in reproductive age (15 - 49 yrs.)*
4. Syrian pregnant women **
5. Youth (15 - 24 yrs.)*

* UNHCR Figures - 31 December 2015
**UNFPA Figures - 31 December 2015
Mrs. Ban Ki-moon, the wife of United Nations Secretary-General, selected a UNFPA-supported women and girls centre in Sweileh, Amman as her main field site during her visit to Jordan. The centre provides integrated reproductive health and gender-based violence prevention and response services free-of-charge to Jordanians and Syrian refugees who live in urban areas in the capital.

With inquisitiveness and passion, Mrs Ki-moon took a tour of the women and girls centre. She met the staff and talked to Syrian refugee women, asking them about the quality of services they received. They shared information about their living conditions, their needs, and protection concerns. Most importantly Mrs Ki-moon had the opportunity to listen to women about their hopes and dreams.

UNFPA is grateful for the support of the following donors since the beginning of the Syria crisis:

Australia, Canada, Denmark, European Commission, Germany, Italy, Japan, 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 Jordan: Ministry of Health (MOH), Institute for Family Health (IFH), International Medical Corps (IMC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Jordanian Women’s Union (IWU), Youth Peer Education Network (YPE), NCFA (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 and Hacettepe University in Ankara, NGOs including the International Middle East Peace Research Center (IMPR), Syrian Social Gathering.