Ameera, 28, a mother of six children, was forced to evacuate three houses in less than a year. “We used to farm and live a peaceful life. Since Daesh and the chaos they cause, nowhere is safe in Syria. I never imagined that I would live in a settlement, walk day and nights in cold weather searching for a shelter, live in fear, counting the seconds every day until I see all my children back from school alive.”

Ameera’s life, already not an easy one amid the ongoing crisis, became more than she could bear. She spent her days crying and eventually had a nervous breakdown. Her children lived in a constant state of sadness and grief. With her family, Ameera decided to leave rural Aleppo as she was pregnant and her thirteen-year-old daughter became a target for the armored group. “Living in a settlement was the only choice to protect my daughter and to give birth in a safe place. I remember how we used to walk in muddy paths and sleep in tents during the harsh winter. My life changed after I gave birth to my child. The treatment and care I received in the hospital were excellent. Even better than what I received back home. I always believed that bad things happen for a good reason,” she said.

Ameera’s husband decided to move to Turkey aiming to secure a better life. They left Syria with the support of their relatives and friends. “My little child was two months old. I was in a terrible condition, looking for basic items. No words can explain our situation.”

Help came from one of UNFPA’s partners. Ameera was reached by social workers who visited her house offering support and introduced her to the services available in the centres. Ameera enrolled in sessions that helped her learn how to better cope with her losses and move forward. Progress came slowly for Ameera, but she said the treatment has helped. She learned how to control her temper and how to speak with her husband and children when she’s upset. “I got to know specialists who helped me regain my composure,” Ameera said. “Their friendship has lifted our spirits, and we now feel that we have known them for a long time. I’ve started taking my daughter to the sessions too.”

Ameera said the support has helped her and her family — but theirs is just one of millions of families affected by the conflict.
HUMANITARIAN RESPONSE
SYRIAN ARAB REPUBLIC
FROM ALL CHANNELS

UNFPA RESPONSE IN SYRIA (MARCH 2016)

REPRODUCTIVE HEALTH AND SAFE MOTHERHOOD

REPRODUCTIVE HEALTH SERVICES

290,300 reproductive health services
• 40,000 reproductive health services to hard-to-reach areas
• 5,400 deliveries supported by UNFPA for women above 18
• 4,400 deliveries for women under 18
• 6,200 ante-natal services
• 16,100 pre-natal services
• 13,300 family planning beneficiaries
• 490 beneficiaries of the UNFPA voucher

OUTREACH ACTIVITIES 23,300 services

GENDER EQUALITY AND WOMEN’S EMPOWERMENT

RESPONSE SERVICES 6,809 women and girls

WOMEN ACCESSING SAFE SPACES 16,200 women and girls
3,163 women and girls in hard-to-reach areas

OUTREACH ACTIVITIES 5,849 services

TRAINING 53 social workers

UNFPA-SUPPORTED FACILITIES IN SYRIA

Number of women’s spaces 25
Number of field reproductive health clinics or mobile teams 49
Number of health facilities 959

SYRIAN ARAB REPUBLIC:

2015:
• 1202 safe deliveries
• 953 Caesarean-section deliveries
• 201 pregnancy under 18
• 4,904 ante-natal care services
• 1,382 family planning

2016:
• 1,202 safe deliveries
• 353 Caesarean-section deliveries
• 201 pregnancy under 18
• 4,904 ante-natal care services
• 1,382 family planning

OUTREACH ACTIVITIES 5,849 services through outreach activities

AWARENESS SESSIONS

117 women and girls participated in the northern part of Syria
466 women and girls participated in the southern part of Syria

GENDER EQUALITY AND WOMEN’S EMPOWERMENT

RESPONSE SERVICES

795 beneficiaries received gender-based violence services in the northern part of Syria
147 beneficiaries received gender-based violence services in the southern part of Syria

WOMEN ACCESSING SAFE SPACES

169 beneficiaries accessed women safe spaces in the northern part of Syria
36 beneficiaries accessed women safe spaces in the southern part of Syria
6,475 dignity kits distributed (6,000 in the north and 475 in the south)

Two safe spaces in Idlib started activities in April, while UNFPA finalised the details to resume work in a centre in Aleppo. A new partner started providing services through outreach teams in six locations in Idlib and Aleppo, with a focus on family planning.

“Inside the operation room, for me, holding the surgical blade, means there is a new life waiting the freedom to get outside,” said this health care provider in the southern part of Syria. Credit: UNFPA’s implementing partner, 2016

“Men, children, women, the elderly, they all need medical attention. They are running out of medications,” said this medical professional in the northern part of Syria. Credit: UNFPA’s implementing partner, 2016

Sources: Turkey’s Disaster and Emergency Management Authority (AFAD), UNHCR, OCHA, and UNFPA April 2016
Dulama is one of many female staff working at humanitarian organisations in Damascus who refuse to let the conflict stop them from looking after their loved ones.

I was born and raised in Deir ez-Zor city, where I graduated from the Al-Furat University of Humanities in English Language and Literature in 2009. I was so close to completing my MA from Homs University – I only had my thesis to finish in 2011 - when the unrest in Homs broke out. I had to go back to Deir ez-Zor and put my dreams on ice.

There was no way out of the city as the roads were cut off, with nobody daring to travel through heavy-conflict areas. I’m the sort of person who needs to keep busy and be a productive member of society, so I started teaching English Language and Literature at Al-Furat. Many of the professors couldn’t come to college, so I had to step up and help those students who were still motivated to earn their degrees. I felt that I had what it takes to teach them, and so I conducted lectures until mid-2012 when the violence suddenly escalated in Deir ez-Zor. Da’esh soldiers had arrived in the city.

The next six months were filled with terror and pain. We only received rumours about the security situation in the city, such as which area had fallen under Da’esh control, the estimated number of casualties, and names of close friends and family killed in the conflict. Families started fleeing the city to rural areas and even to other states to save their lives. Fear made my father keep me inside home for three whole months, where I didn’t even approach a window, because no one was supposed to know that there is a girl inside our family house. Eventually my father had a chance to send me to Damascus, which he thought would be safer for me.

“I was immediately surprised by the normality in Damascus. It was so strange to see people walking casually in the streets, going about their business with all the shops open as usual.”

I had tears in my eyes and a wry smile on my face. This was a bittersweet feeling. How could there be so wild a comparison between two places in the same country?

I stayed in Damascus at a relative’s house until April 2013, when I started working at a commercial logistics and freight company. My job enabled me to rent a room in the old city of Damascus, pay for my upkeep and host my younger brother.

That’s when I started to learn more about United Nations humanitarian aid agencies. I felt that one day I should be part of their team, providing aid to my community and the wider ‘Syrian family’, as I like to see our nation. In October 2014, that dream came true when I joined a United Nations agency as a storekeeper in one of WFP’s warehouses in rural Damascus. Despite being a woman in a job that’s usually assigned to men in this part of the world, I managed to gain respect from all of the workers and overcome any stereotypes.

Working with the United Nations office allowed me to afford rent for a bigger living place and so invite my father, mother and sister to come and live with me, in addition to supporting my two brothers’ college fees. Only my elder brother remained in Deir ez-Zor to complete his studies. I felt indebted to pay my family back all that they had done to support me during my education.

There were times when everything would go dark, and I felt that life couldn’t get any crueler. But then light appeared on the horizon. Knowing that my family are all safe and well is happiness enough for me. We are still waiting for the day to come when we are all re-united back home. I dream of living in a time when all the bad memories are swept away, and a better future awaits all Syria.

“I dream of living in a time when all the bad memories are swept away, and a better future awaits all Syria.”
HUMANITARIAN RESPONSE

NEIGHBOURING COUNTRIES AFFECTED BY THE CRISIS

REGIONAL SITUATION REPORT FOR SYRIA CRISIS
1-30 APRIL 2016
ISSUE NO.
44

NEIGHBOURING COUNTRIES AFFECTED BY THE CRISIS
(LEBANON, JORDAN, IRAQ, TURKEY, EGYPT):

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

FAST FIGURES

NEIGHBOURING COUNTRIES AFFECTED BY THE CRISIS
(SYRIAN REFUGEES AFFECTED BY THE CRISIS):

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
727 services for Syrian and Turkish beneficiaries
• 103 ante-natal care services
• 101 pre-natal care services
• 169 family planning services
• 63 pregnancies for women under 18

AWARENESS SESSIONS
210 Syrian and Turkish beneficiaries

OUTREACH ACTIVITIES
1,534 Syrian and Turkish beneficiaries

CAPACITY BUILDING
38 health service providers (6 nurses and 32 midwives) on Emergency Obstetric Care

JORDAN

SERVICES
16,545 reproductive health services
• 246 safe deliveries and 23 C-sections
• 1,610 family planning services
• 2,944 ante-natal care services
• 981 pre-natal care services

OUTREACH ACTIVITIES
471 services

AWARENESS SESSIONS
3,190 beneficiaries in camp and in host communities

SUPPLIES
21 reproductive health delivery kits

UNFPA, in coordination with its implementing partner IMC and SRD, is ensuring that new refugees arriving from the BERM have access to all reproductive health services at the Azraq hospital. The reproductive health clinic embedded in the hospital is providing ante- and post-natal care, family planning and other related primary level services. However, as the numbers increase (the projected figure is 20,000 by end of June), there is a need to scale up services. UNFPA is planning to expand its centre by establishing comprehensive reproductive health and gender-based violence services.

Dispatches from the road; UNFPA Goodwill Ambassador Ashley Judd describes visiting refugees in Jordan

In April, humanitarian, writer and actor Ashley Judd travelled to Jordan on her inaugural mission as UNFPA Goodwill Ambassador. During her two-week trip, she visited UNFPA-supported clinics and programmes for women and girls, including refugees who have fled the violence in Syria, throughout the country. She also met with international dignitaries, including Alice G. Wells, U.S. Ambassador to Jordan, and Jordan’s Princess Basma. Below are excerpts from her written and video diaries of her mission.

“Jordan is lovely. Looking out the window while landing, I saw the desert stretching as far as my eyes could see, its terrain gently marked by gatherings of low hills and folds of sand, like skin.

Jordan is currently hosting over 635,000 refugees from Syria.

Rates of maternal death greatly increase during refugee and other humanitarian crises, but despite these risks, in March, the 5,000th newborn was safely delivered in a UNFPA-supported clinic in Zaatari refugee camp. Her name is Rima. I met with her young parents, aged 20 and 21, who named her after the doctor who delivered her.

I wondered what it would be like to thank the Jordanians for accepting refugees, so, today, I tried it. It was special. It’s something I will continue to do. The exchange was brief, their responses modest, mute even, but the air contained an acknowledgment.”


Fatima, a 16-year-old woman, came to UNFPA-supported clinic in Zaatari camp complaining of contractions and severe abdominal pain. Fatima was immediately seen by the gynecologist who diagnosed that she was in active labour, and suffering severe anemia. It was a complicated case and she was admitted immediately for delivery. After a safe and successful delivery, Fatima had postpartum bleeding for which she was urgently referred for blood transfusion outside the camp. UNFPA’s implementation partner JHAS continued to follow up with her until she recovered. Reflecting on her experience, Fatima said: “I am thankful to UNFPA as they saved both my life and the life of my baby, I will definitely keep visiting the clinic for routine health checkups.”
**REGIONAL SITUATION REPORT FOR SYRIA CRISIS**

1-30 APRIL 2016

**JORDAN**

**SERVICES**
- **Psico-social support, social counselling, legal consultations, and referral**: 1,187 Syrian beneficiaries
- **Women and Girls Accessing Safe Spaces**: 1,217 Syrian beneficiaries
- **Outreach Activities**: 351 Syrian beneficiaries
- **Publications**: 100 copies of brochure on gender-based violence prevention and response

**LEBANON**

**Women and Girls Accessing Safe Spaces**: 56 Syrian beneficiaries

**Outreach Activities**: 68 women, girls, men, and boys

**Training**: 29

**IRAQ**

**Women Accessing Safe Spaces**: 270 women and girls

**Outreach Activities**: 440 women and girls

**TURKEY**

**Services**
- **11 services**

**Women and Girls Accessing Safe Spaces**: 1,187 Syrian beneficiaries

**Outreach Activities**: 1,422 women, girls, men, and boys

**Publications**: 100 copies of brochure on gender-based violence prevention and response

**Supporting Adolescents and Youth**

**Turkey**

**Youth Centre**
- UNFPA launched a new youth centre in cooperation with TOG at Diyarbakir, Turkey

**Lebanon**

**Activities**: 40 Syrian young people

**Jordan**

**Activities**: 154 Syrian young people

During the reporting period, a total of 35 Iraqi and Syrian women were introduced to UNFPA-supported services. Many of them received family planning counselling, four women were registered for Turkish language lessons and women who have children were informed about the planned activities for children.

UNFPA, along with KAFA, launched a national report on the knowledge and perceptions on the implementation of domestic violence LAW 293, attended by ministries representatives, embassies, the humanitarian coordinator, as well as a range of media personnel.

Credit: UNFPA 2016

**Lebanon**

**Women and Girls Accessing Safe Spaces**: 56 Syrian beneficiaries

**Outreach Activities**: 68 women, girls, men, and boys

**Training**: 29

**Iraq**

**Women Accessing Safe Spaces**: 270 women and girls

**Outreach Activities**: 440 women and girls

Women-safe spaces serving Syrian women and girls in Iraq started to provide more engaging activities including sewing and artistic performances. An exhibition was organised to demonstrate the sewing and arts productions prepared by the women visiting these safe spaces.

Credit: UNFPA, 2016
## Regional Situation Report for Syria Crisis

### Number of Field Reproductive Health Clinics or Mobile Teams

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lebanon</td>
<td>5</td>
</tr>
<tr>
<td>Jordan</td>
<td>19</td>
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<tr>
<td>Iraq</td>
<td>10</td>
</tr>
<tr>
<td>Egypt</td>
<td>5</td>
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<tr>
<td>Turkey</td>
<td>20</td>
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<tr>
<td>Jordan</td>
<td>24</td>
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<tr>
<td>(14 in host communities, 10 in camps)</td>
<td></td>
</tr>
<tr>
<td>Iraq</td>
<td>20</td>
</tr>
<tr>
<td>(11 in host communities, 9 in camps)</td>
<td></td>
</tr>
<tr>
<td>Egypt</td>
<td>10</td>
</tr>
<tr>
<td>Turkey</td>
<td>17</td>
</tr>
</tbody>
</table>

### Number of Youth Centres and Safe Spaces

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
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</thead>
<tbody>
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<td>Jordan</td>
<td>24</td>
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<td>Iraq</td>
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<td>Egypt</td>
<td>12</td>
</tr>
<tr>
<td>Turkey</td>
<td>2</td>
</tr>
</tbody>
</table>

### Stories from Syrian Refugees | Turkey and Jordan

**Rana, Zaatari Camp, Jordan**

Rana, a 30-year-old woman, separated from her husband because he was abusing her, and is currently living with her parents in Zaatari camp in Jordan. Rana was deliberating whether to grant custody of her children to her husband because she could not afford to raise them on her own. She approached the UNFPA-supported centre for help. The social worker sat with Rana and provided her with a one-on-one session to empower her and help her overcome her insecurities, which were caused by the abuse she went through. The social worker tried to communicate with the husband but he made it clear that he does not want to talk. Rana was provided with legal counseling and she filed a lawsuit asking for a pension that would support both her and her children. The rehabilitation process encouraged Rana to start looking for a simple business in order to be able to support herself and her children. She is currently able to rent a place for herself and is living with her children. She is also attending activities held at the safe space whenever her work allows and is continuing to go through one-on-one counseling sessions and group therapy to help her maintain the positive change that she has achieved.

**Trainee Gender-based Violence Carer, Northern Syria**

“We learnt a lot of new information. It was very important to learn the specific methodology for performing the physical examination of survivors, the importance of documentation and its challenges, and the necessary treatment for survivors of sexual violence” - a trainee of a caring for gender-based violence survivor session in northern Syria through the cross-border operation from Turkey. UNFPA-community and women centres in Turkey provide different kinds of support to Syrian women and girls.

**M., raised in a family of six, Huksam/Ulubey, Turkey**

M. was raised in a family of 10. Now she is 29 years old with 6 children. Her aim was to finish her education yet her family was against the concept as they believed that it was dishonorable for women to attend school. Moreover, they thought that it was a sin for women to attend mixed schools. She was not allowed to continue her higher education. Instead, she was compelled to marry somebody at the age of 14 and was subjected to domestic violence by her husband’s family. She was forced into having 6 children, solely because her husband loves having them. While they were in Syria, they supported their children’s needs by working in the fields. That proved problematic for them both, as they could show no documented work experience when they went to Turkey and so found it difficult to find a job. Not to mention the fact that her husband had medical complications, which provided another hurdle to cross. The family are currently living off the money that their two sons (10 and 12 years old) earn by collecting papers from the street. Since they’re the only source of income, the two boys are not able to attend school. She willingly went to the centre for help. The centre taught her crafts and skills that could help her in potentially starting her own small business. She is ambitious and very optimistic about her craft and believes that she will, with the proper guidance, will be able to open her own business one day and enrol all her children at school.

**Diyala, Zaatari Camp, Jordan**

Diyala, married and living with her husband in in Zaatari camp in Jordan, was searching for a job and found her dream. The 23-year-old completed all the basic training at Questscope youth centre, and then began to participate in related arts activities. At first, mosaic art was very difficult for her since it requires both fine motor skills as well as the development of very specific hand muscles (for cutting the ceramic pieces into different small sizes). But Diyala persevered and has become very skilled at mosaic art and is now trains others at the centre.

**A Syrian girl participating in a mosaic art class in Zaatari camp, Jordan. Credit: Ruba Hikmat, UNFPA, 2016**

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**UNFPA-Supported Facilities**

<table>
<thead>
<tr>
<th>Country</th>
<th>Number of spaces</th>
<th>Number of field reproductive health clinics or mobile teams</th>
<th>Number of youth centres and safe spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lebanon</td>
<td>5</td>
<td>72</td>
<td>33</td>
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<tr>
<td>Jordan</td>
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<td>Egypt</td>
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<tr>
<td>Turkey</td>
<td>20</td>
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</tr>
</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 participated in protection workshops, which aim to build consensus among stakeholders on the agenda of protection for women and girls, by understanding the principles of intervention activities implemented through protection, child protection and gender-based violence programming in Syria. The workshop hosted 52 participants from government, NGOs and United Nations agencies in Homs and Hama and covered several issues regarding programme modalities and coordination.

UNFPA participated in the assessment Mission to Qariteen and contributed to the reproductive health and protection assessment through FGD and key informant interviews.

UNFPA participated in IA/cross line mission to Talbiseh and contributed to the reproductive health and gender-based violence assessment through FGD and key informant interviews.

UNFPA participated in population movement trend meeting to discuss the programme criticality in the country.

GBV sub-cluster group in Gaziantep carried out refresher training on the GBV 4Ws. The training helped to clarify outstanding matters.

The GBV sub-cluster group in Gaziantep analysed the data from the service mapping, and was able to clearly identify gaps, and a way forward to start addressing them.

The GBV sub-cluster group in Gaziantep participated in the quarterly ‘Whole of Syria’ protection meeting.

TURKEY

UNFPA co-chaired the SGBV Sub-working group meeting in Gaziantep. Work plan for the Gaziantep SGBV Sub-working group finalised and shared with the involved parties.

UNFPA participated in the health working group meeting, mental health and psychosocial sub-working group, cash-based Initiatives working group, protection working group meeting UNFPA participated in.

Non Food Items and health working group meetings for the west-coast coordination in Azmir, Turkey.

“ActivityInfo” training in Gaziantep organized by WHO

“Women in Crises and Emergencies” in Istanbul and experiences from the field have been shared with the participants.

The monthly coordination meeting organised by the Provincial Directorate of Family and Social Policies’ in Sanliurfa, where new legislation for SONIM has been discussed.

Improving humanitarian action in resilience cities was held in Gaziantep organised by the UCLG-MEWA-ACTED consultation with the participation of Gaziantep municipality, local authorities, United Nations agencies and I/NGOs.

UNFPA organised a training courses on data collection tools for 41 people in Gaziantep municipality, local authorities, United Nations agencies and I/NGOs.

LEBANON

UNFPA co-led with UNHCR and the Ministry of Social Affairs the April SGBV task force meeting where the ‘Activity Info’ data for first quarter was analysed and the inter-agency monitoring and evaluation package presented by IRC.

UNFPA led the national gender-based violence information management system (GBV IMS) steering committee where the revision points of the information system protocol (ISP) were discussed based on the GBV IMS workshop organised last month. The revised ISP is taking effect in May for one year. The Committee is also finalising advocacy points regarding domestic violence and early marriage.

IASC GBV guidelines - the GBV sector started to present the 2015 inter-agency guidelines to the other sectors, namely basic assistance and food security/agriculture. These global guidelines need to be contextualised for each sector in Lebanon and aim at improving gender-based violence prevention and response interventions by other sectors.

JORDAN

UNFPA, along with UNICEF and UNHCR, are supporting national efforts to develop a national clinical management of rape protocol in 2016. This effort is led by the National Council of Family Affairs (NCFA) and the Ministry of Health (MOH). The need to develop this protocol came into place after the advocacy efforts that UNFPA, UNICEF, and UNHCR have contributed to since 2008. Moreover, the joint MOH, UNFPA and UNHCR assessment of the clinical management of rape (CMR) services in November 2015 clearly identified a gap in the provision of comprehensive CMR services in Jordan. Therefore, the need to develop a national CMR protocol was realised as an urgent need on the ground.

Y Peer focal point In-charge and core team yearly election was held at Zaatari camp. The process spanned over a period of three weeks and included the drafting of TORs for all positions, presentation of work plans leading to the elections. The core team was elected, comprising of three members, for monitoring and evaluation, communication and advocacy, and training and research.

UNFPA participated in a session called for by the national team on family protection from violence (under the umbrella of the National Council for Family Affairs- NCFA) to facilitate the joint efforts of all involved institutions in early marriage programmes and policies in Jordan. The meeting is the first of more regular meetings to follow bringing together all involved institutions in early marriage programmes, including the Jordanian National Council for Women (JNCW), Jordan River Foundation (JRF), Higher Population Council (HPC), Shareea’a Court (Qathi Al-Qothat), UNICEF, UNHCR, UNFPA, and NCFA. The meeting discussed the current efforts on the ground relating to early marriage in Jordan. The participants agreed on the importance of having one national compressive study on early marriage. This study should bring all involved entities’ efforts and resources together instead of having scattered efforts on this subject. This study should request the Shareea’a Court (Qathi Al-Qothat) to document the reason for the new early marriage cases when being registered, and should take into account old records of early marriage. Moreover, it was agreed that the study should offer deep and clear analysis on the prevalence of this issue in Jordan, and cover all involved institutions/entities databases and needs. The outcome should enable clear programme and project interventions. A tentative short-term/coordination action plan was developed to have this study in place building on a brief study that the HPC is currently leading on the subject.
CHALLENGES

SYRIAN ARAB REPUBLIC

The dramatic depreciation of the Syrian Pound value is affecting the ability of the people to cope with the increased cost of living. As such, women can be exposed to different risks including gender-based violence.

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

Beneficiaries’ access to services is still a challenge in many areas due to the deteriorating security situation, restriction of movement, lack of transportation and border-crossing constraints.

Implementing of the humanitarian response is challenging due to limited capacity of implementation partners as well as the limited access to the affected areas due to security conditions.

The deteriorated security situation in Dara’a creates difficulties accessing medical facilities. Air strikes 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 part of Syria.

UNFPA reported a 15 percent increase in the number of people who received reproductive health services in the Al-Noor medical centre and obstetric unit in Duma. In response to the need, two psychologists and one community mobiliser were hired in the centre.

A large number of medical centers have been shut down either in Duma, southern Syria; due to the siege, security situation, or because of a large shortage of medical supplies in these centres.

Although the ceasefire is still officially holding, there was an escalation of hostilities, particularly in Aleppo. During the last week of April, Aleppo witnessed a significant increase of aerial shelling and bombardment targeting various areas throughout Aleppo governorate. Notably, on April 27 2016, a series of shelling impacted one of Aleppo’s biggest hospitals, which provided important gynecological and pediatric services. The shelling caused numerous casualties, and due to the extensive damage, the hospital is now out of use. The escalation is leading to population displacement to relatively safer areas.

UNFPA’s supported hospitals in the area reported increased demand for services as a consequence. Three of UNFPA-supported women and girls safe spaces put their services on hold for several days as a result of the ongoing shelling.

TURKEY

Economic problems hinder people from reaching or participating in activities.

The poor security situation outside the borders of Turkey has an indirect negative impact on the on-going programme.

Language barrier is limiting access to some of the services, especially in the field of health.

Lack of funds shut down many of women’s empowerment and recreational activities, and affect the sustainability of outreach activities.

There is lots of demand to organise computer and ICT courses, however no computer-equipped room is available to conduct the course.

High turnover of health staff, with minimum support or incentives.

JORODAN

According to the findings of an inter-agency rapid assessment of Ruwayshid Hospital, there is an urgent need to support and upgrade the Ruwayshid hospital, which serves individuals at the North-Eastern border of Jordan (BERM). As of April 2016, UNHCR has registered 32,000 individuals located in two sites Al Rukban (27,711) and Hadalat (3,728) referred collectively as “the BERM”, however, the border guards report that the number is much higher, close to 50,000. These asylum seekers are in need of health services not available at the BERM, including emergency health care. Amongst the population there are high numbers of extremely vulnerable individuals including pregnant women, unaccompanied and separated children of all ages, female heads of households, and individuals who already suffer from serious medical conditions. In addition, maternal deaths have been reported at each location with a high number of pregnant women living there, many of whom require urgent medical assistance. Since October 2015, the number of asylum seekers has steadily increased to an estimated 40,000+ requiring services from Ruwayshid Hospital. In response to the assessment findings and current situation, UNFPA is carrying out consultations with the Ministry of Health to propose a plan of action for the Ruwashid hospital, including provision of key medical equipment, medical consumables in the labour and delivery and the neonatal units and the provision of additional staff through UNFPA-implementing partner.

IRAQ

There is a continuing lack of resources to sustain the on-going programmes.

WOMEN AND GIRLS IN THE SYRIA CRISIS: UNFPA RESPONSE

The document includes a factsheet of the countries affected by Syria crisis. Each sheet presents the main achievements of 2015, priorities of 2016, main challenges and funding requirements.

REPORTING ON GENDER-BASED VIOLENCE IN THE SYRIA CRISIS.

GOOD PRACTICES IN THE MEDIA

The book aims to demonstrate how the nine ethical principles of reporting on gender based violence in a humanitarian context can be practically incorporated by journalists to improve the lives of women and girls affected by the Syrian crisis. In this book, UNFPA presents real examples from well-written media reports published in 2015 that represent effective gender-based violence reporting. For each example, the booklet provides context and explanations of how they represent best practices.

DONORS & PARTNERS

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

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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 (JWU), Youth Peer Education Network (YPE), NCFA (National Council for Family Affairs), Questscope.

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.

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RELEVANT RESOURCES

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