

UNITED NATIONS POPULATION FUND

REGIONAL SITUATION REPORT

FOR THE SYRIA CRISIS

ISSUE# 115

MARCH 2022

“ YES, IT'S BEEN A VERY LONG BATTLE, AND I'M STARTING TO FORGET WHAT MY LIFE WAS LIKE BEFORE THIS CRISIS. I STILL HAVE HOPE.

– LUJAIN, a young woman from Aleppo

SNAPSHOT

As of March 2022, the situation in Syria continues to be dire, further complicated by a deteriorating economy, increasing hostilities, and an unrelenting pandemic.

The crisis region, which spans the Whole of Syria, Turkey, Lebanon, Jordan, Iraq, and Egypt, continues to face a multitude of challenges, particularly in light of the recurrent waves of COVID-19 infections that continue to exacerbate existing needs. A decade into this protracted crisis, people in need continue to endure the cumulative effects of years of instability, the risks of which are even higher now due to the impacts of a far-reaching economic meltdown.

The Regional Situation Report for the Syria Crisis offers a bird's eye view of UNFPA's operations within the context of the Syria crisis. The report is prepared by the UNFPA Regional Humanitarian Hub for Syria and the Arab States in Amman, Jordan, and spans operations conducted by UNFPA offices in Turkey, Lebanon, Jordan, Iraq, and Egypt, in addition to operations conducted inside Syria from Damascus and cross-border via Turkey.

In addition to providing aggregated quantitative results for each country involved in UNFPA's regional Syria response, this report also brings stories from the field that highlight the plight of communities inside Syria and in host countries, underscoring the positive impact of the response delivered by UNFPA in the areas of sexual and reproductive health, gender-based violence, youth engagement, and others. The report also covers UNFPA's efforts to ensure continuity of operations throughout the Syria crisis region during the COVID-19 pandemic.



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THERE ARE MANY WAYS TO FIND HEALING FROM VIOLENCE, ESPECIALLY THROUGH THE FRIENDSHIPS I'VE MADE IN THIS SAFE SPACE.

– LANA, a Syrian woman from Quneitra

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FOR SYRIA & THE ARAB STATES

www.unfpa.org
www.ocha.org
www.unhcr.org
<http://syria.humanitarianresponse.info>

THE SITUATION / 2022

11 YEARS ON, SYRIAN WOMEN AND GIRLS FEEL LEFT BEHIND

In March 2022, the Syria crisis entered its 12th year, marking another grim milestone for Syrians throughout the region. For women and girls, the cumulative impact has been catastrophic, upending decades of progress on women's issues and bringing unprecedented risks that have fundamentally altered their realities.

Despite the continuing efforts of humanitarian actors, the situation in Syria remains dire, further complicated by a worsening economy, waves of hostilities and mass displacement, and the lingering aftermath of the COVID-19 pandemic. The crisis remains one of the world's most complex humanitarian and protection emergencies, with 14.6 million estimated in need of assistance, among them 7.2 million women and girls. This reflects a steep increase from the number of people in need reported in 2021 (13.4 million) and in 2020 (11.7 million).

When the crisis passed the decade mark in 2021, the world was already a year into the COVID-19 pandemic, and an array of other humanitarian situations were emerging. Among the millions of Syrians who have spent the last 11 years surviving conflict, displacement, economic collapse, and mounting risks to their safety, many feel their calls for help have been increasingly drowned out.

Women and girls pay the steepest price

The crisis has created a daunting array of challenges for women and girls, who are paying the steepest price of ongoing hostilities, economic collapse, climate-related challenges, among others. The lives of Syrian women and girls are marked by mutually reinforcing forms of gender-based violence and gender discrimination. Highly unequal gender practices, often exacerbated by discriminatory attitudes based on age, displacement status, disability and/or marital status, create an environment in which women and girls are devalued, controlled, and blamed for the violence they face.

"Violence against women and girls has become so common after the crisis," explains Shaza, an adolescent girl from Qamishli. "Many women in my family are struggling and cannot find the right support. I see more women being beaten by men in their families, and sometimes in public."

Moreover, these risks are further compounded by the deteriorating economy and widespread poverty, lack and loss of livelihoods, destruction and loss of housing and property, protracted and multiple cycles of displacement, substandard living conditions (even for people in areas of relative stability), and shortage of natural resources. This is further increasing reliance on negative coping mechanisms such as early and forced marriage and sexual exploitation and abuse.



THE IMPACT OF THIS CRISIS STRETCHES FAR BEYOND SYRIA TO INCLUDE TURKEY, LEBANON, JORDAN, IRAQ, AND EGYPT.

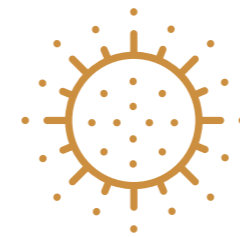
Even more alarming are the reports by women and girls stating that the violence against them has become normalised as a result of years of instabilities. Harassment, intimate partner and family violence, child and forced marriage and subsequent pregnancies, and sexual violence and exploitation are consistently reported, while new trends, such as various forms of technology-facilitated violence, have also been observed in recent years.

And yet, despite the enormous challenges levelled against them, Syrians throughout the region refuse to give up. People of different ages and backgrounds, including women and girls who have survived gender-based violence, continue to demonstrate remarkable resilience and determination. Many rise above their challenges and traumas to provide better prospects and opportunities for their children and loved ones, while others defy circumstances to become artists, activists, innovators and influential voices in their communities.

UNFPA continues to show up

UNFPA and humanitarian actors will continue to advocate for the rights and well-being of women and girls like Maram. Between January and March 2022, as part of its regional response to the crisis, UNFPA delivered SRH services to around 344,00 people, while more than 193,000 were reached with services designed to prevent and respond to gender-based violence, including close to 72,000 adolescent girls. More than 79,939 women were provided with cash assistance, and more than 1,500 LGBTQI+ individuals were served.

In 2022, UNFPA is appealing for a total of USD 144.3 million to fund its regional Syria crisis response, which spans the Whole of Syria, Turkey, Lebanon, Jordan, Iraq, and Egypt.



TOTAL CONFIRMED CASES OF COVID-19
SINCE THE START OF THE PANDEMIC

As of March 31, 2022

SYRIA	TURKEY	LEBANON
55,430	14,846,224	1,092,157
JORDAN	IRAQ	EGYPT
1,694,216	2,303,816	515,645



14.6 MILLION
Estimated people in need in Syria



3.7 MILLION
Women and girls of Reproductive age in need in Syria



7.1 MILLION
Refugees, asylum seekers, or stateless people in the region



500,000
Estimated pregnant women and girls in the crisis region

RESPONSES FROM ALL OPERATIONS

OPERATIONS IMPLEMENTED THROUGHOUT THE REGION, INCLUDING THE WHOLE OF SYRIA, TURKEY, LEBANON, JORDAN, IRAQ, AND EGYPT.

431,886

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

94% FEMALE

7,651

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

68% FEMALE

196,783

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

92% FEMALE

71,504

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

15,117

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

71% FEMALE

1,562

LGBTQI+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

79,932

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

99% FEMALE

4,367

PEOPLE TRAINED ON VARIOUS TOPICS

79% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	294,314	99%
Normal and assisted vaginal deliveries	6,481	100%
C-Sections	3,584	100%
Ante-natal care consultations	140,483	100%
Post-natal care consultations	31,895	100%
People trained on SRH-related topics	2,126	83%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	24,653	95%
People provided with GBV case management	9,158	95%
People reached with GBV awareness messages	146,844	92%
People trained on GBV-related topics	1,456	70%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	785	82%



243
PRIMARY HEALTHCARE FACILITIES *



102
WOMEN AND GIRLS SAFE SPACES



27
EMERGENCY OBSTETRIC CARE FACILITIES



17
YOUTH CENTRES



99
MOBILE CLINICS



76
OTHER SERVICE DELIVERY POINTS

AS THE CHALLENGES WORSEN, WOMEN AND GIRLS CONTINUE TO PAY THE PRICE.

The conflict in Syria has created one of the most severe and protracted humanitarian crises in the world today. Millions have been displaced both inside the country and outside as refugees, especially in Turkey, Lebanon, Jordan, Iraq, and Egypt. The crisis has permanently altered the fabric of society in Syria itself, with far-reaching ramifications for its future resilience.

Assessments and interviews conducted by UNFPA since 2016 have also been able to illustrate the profound effect that years of instability have had on women and girls, particularly adolescent girls, who face a variety of unique risks. Lack of individual autonomy, movement restrictions, forced and early marriage, denial of resources and opportunities, and sexual and physical violence continue to be part of their daily reality, creating a web of violence that can transcend generations.

Despite testing their limits, however, the crisis has also revealed the remarkable resilience of women and girls, many of whom defy enormous odds to become artists, activists, innovators, and other influential voices in their communities.

ACROSS THE WHOLE OF SYRIA

ENSURING THAT ALL COMMUNITIES INSIDE SYRIA HAVE ACCESS TO LIFE-SAVING ASSISTANCE AND QUALITY SERVICES, EVEN IN LOCATIONS THAT ARE HARD TO REACH.

280,520

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

94% FEMALE

2,690

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

92% FEMALE

156,900

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

93% FEMALE

61,801

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

7,068

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

60% FEMALE

1,401

PEOPLE TRAINED ON VARIOUS TOPICS

82% FEMALE

79,527

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	98,237	99%
Normal and assisted vaginal deliveries	6,041	100%
C-Sections	3,531	100%
Ante-natal care consultations	121,238	100%
Post-natal care consultations	24,088	100%
People trained on SRH-related topics	710	91%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	8,821	100%
People provided with GBV case management	7,248	98%
People reached with GBV awareness messages	119,436	94%
People trained on GBV-related topics	609	74%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	82	57%



93

PRIMARY HEALTHCARE FACILITIES*



49

WOMEN AND GIRLS SAFE SPACES



25

EMERGENCY OBSTETRIC CARE FACILITIES



11

YOUTH CENTRES



86

MOBILE CLINICS



61

OTHER SERVICE DELIVERY POINTS

In 2014, the Whole of Syria (WoS) approach was introduced across the United Nations, authorised initially by UN Security Council Resolution (UNSCR) 2165 in 2014. This allowed cross-border humanitarian assistance from Iraq, Jordan, and Turkey. Successive UNSCRs extended and adapted this, eventually reducing to cross-border assistance from Turkey exclusively. On July 11, 2021, the resolution was extended for an additional six months, with the proposed extension of a further six months subject to the Secretary General's report. The continuation of this large, UN-led humanitarian operation is vital to reach those most in need. In addition to the Whole of Syria approach under the Humanitarian Response Plan (HRP), there has been a succession of comprehensive Regional Refugee and Resilience Plans (3RPs) since 2014, which aim to coordinate and align responses to Syrian refugees and affected host communities across Turkey, Lebanon, Jordan, Iraq, and Turkey.



VIOLENCE AGAINST WOMEN AND GIRLS HAS BECOME SO COMMON AFTER THE CRISIS. MANY WOMEN IN MY FAMILY ARE STRUGGLING AND CANNOT FIND THE RIGHT SUPPORT TO FEEL EMPOWERED.

– MARAM, a Syrian woman from Qamishli

SYRIA COUNTRY OFFICE

DELIVERING EMERGENCY AND LONG-TERM ASSISTANCE TO SYRIAN COMMUNITIES IN NEED THROUGHOUT THE COUNTRY, WITH A FOCUS ON WOMEN AND GIRLS.

256,201

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

99% FEMALE

1,806

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

93% FEMALE

129,762

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

98% FEMALE

50,291

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

83% FEMALE

7,068

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

60% FEMALE

1,027

PEOPLE TRAINED ON VARIOUS TOPICS

83% FEMALE

78,716

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	95,217	99%
Normal and assisted vaginal deliveries	2,473	100%
C-Sections	2,359	100%
Ante-natal care consultations	107,679	100%
Post-natal care consultations	17,384	100%
People trained on SRH-related topics	658	92%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	8,821	100%
People provided with GBV case management	6,671	98%
People reached with GBV awareness messages	104,322	98%
People trained on GBV-related topics	287	71%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	82	57%



87

PRIMARY HEALTHCARE FACILITIES*



35

WOMEN AND GIRLS SAFE SPACES



19

EMERGENCY OBSTETRIC CARE FACILITIES



11

YOUTH CENTRES



85

MOBILE CLINICS



61

OTHER SERVICE DELIVERY POINTS

“ I DON'T WANT TO BE MARRIED NOW. I HAVE SO MANY THINGS I WANT TO DO. BUT MANY OF US NEVER REALLY FEEL LIKE WE HAVE A CHOICE, ESPECIALLY AFTER THE CRISIS.

– SEIVAN, a Syrian woman from Qamishli



IN SYRIA, UNFPA CONTINUES TO EMPOWER WOMEN AND GIRLS TO REACH THEIR FULL POTENTIAL

UNFPA IS TARGETTING THE ROOT CAUSES OF THE MANY FORMS OF GENDER-BASED VIOLENCE TAKING PLACE IN SYRIA, HELPING COMMUNITIES BUILD AN EQUITABLE AND MORE HOPEFUL FUTURE.

UNFPA marked International Women's Day with several activities in partnership with local partners throughout Aleppo city and rural areas. Given the mounting risks of gender-based violence and the continued normalisation of such violence in numerous communities, the occasion served as a platform for raising awareness on these issues and empowering women and girls to overcome harmful social norms.

As part of these awareness and capacity building efforts, UNFPA conducted a three-day training programme in Aleppo University Hospital on the main principles of reproductive health and gender-based violence. Participants included resident doctors, nurses, and midwives and midwifery trainers, in addition to administrators and technicians.

UNFPA is also working with UNDP on a joint project to rehabilitate the Zahi Azraq Hospital and two healthcare facilities in Hamimeh and Khafseh.

Khawla's Journey: "Like many other women in my community, I love to work."

Khawla was on her way to a dentist appointment when she noticed a flyer posted by a UNFPA-supported Safe Space. The flyer grabbed her attention, and she immediately asked about it and registered.

"I was particularly interested in the vocational training aspect," the widowed mother-of-six recalls. "I have experience raising livestock and making cheese

and dairy products. Like many other women in my community, I love to work."

Khawla has overcome countless daunting challenges in her life. Following the death of her husband, her 10-year old daughter Faten — who witnessed her father's death when she was only two years old — suffered from extreme anxiety and urinary incontinence.

"My daughter was terrified of losing me as well, and that fear made her terrified of everything; of going to school, of her teacher. So I started to go with her and to sit next to her in class."

"My daughter was terrified of losing me as well, and that fear made her terrified of everything"

After learning of the services on offer at the Safe Space, which include psychological support sessions, she invited Faten along to receive the support she needed. This took place across several visits, during which Khawla dedicated her time to awareness sessions on various topics related to reproductive health and gender-based violence.

"The support we received hugely improved Faten's self-confidence, and she clearly enjoys coming to the centre," says Khawla. Faten, who has since realised she wants to be a fashion designer, was quite inspired by the colouring activity she attends every time she visits the centre with her mother.

The UNFPA-supported Royaa Safe Space was established in 2021 to support and empower women and girls in Daraa city. The space offers many activities and services that span psychological support sessions and case management, awareness sessions on reproductive health and gender-based violence, in addition to literacy classes and sign and braille language training. More than 1,200 women and girls are regularly benefitting from the space.

"The support we received hugely improved Faten's self-confidence, and she clearly enjoys coming to the centre"

“ I'M THINKING OF LAUNCHING MY OWN BUSINESS FROM HOME. I WILL BE ABLE TO SUPPORT MY FAMILY AND MY HUSBAND, WHO CANNOT FIND WORK BECAUSE OF HIS DISABILITY.

— SALAM, who attended vocational training at a UNFPA-supported facility

CROSS-BORDER TURKEY

ENSURING THAT ALL COMMUNITIES INSIDE SYRIA HAVE ACCESS TO QUALITY SEXUAL AND REPRODUCTIVE HEALTH AND GENDER-BASED VIOLENCE SERVICES.

24,319

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

41% FEMALE

884

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

92% FEMALE

27,138

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

73% FEMALE

11,510

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

811

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

54% FEMALE

374

PEOPLE TRAINED ON VARIOUS TOPICS

76% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	3,020	100%
Normal and assisted vaginal deliveries	3,568	100%
C-Sections	1,172	100%
Ante-natal care consultations	13,559	100%
Post-natal care consultations	6,704	100%
People trained on SRH-related topics	52	81%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People provided with GBV case management	577	100%
People reached with GBV awareness messages	15,114	66%
People trained on GBV-related topics	322	76%



6

PRIMARY HEALTHCARE FACILITIES *



14

WOMEN AND GIRLS SAFE SPACES



6

EMERGENCY OBSTETRIC CARE FACILITIES



1

MOBILE CLINIC

A far-reaching humanitarian crisis continues to unfold in north-western Syria. As mass displacement continues, severe weather conditions are further exacerbating numerous risks for those living in tents and displacement sites, more than 200 of which were damaged within the span of the month.

Meanwhile, while artillery shelling occurred on most days, the Office of the High Commissioner for Human Rights (OHCHR) reported a significant decrease in airstrikes. In March, at least six civilians, including a child, were injured.

The overall COVID-19 situation continued to deteriorate in northwestern Syria, with confirmed cases rising for a second consecutive month. In March, 5,386 new COVID-19 cases and 49 deaths were recorded, compared to 4,147 cases recorded in February 2022. As of late March, 8.7 percent of the population had received one dose of COVID-19 vaccine while only 4.4 percent of the population have been fully vaccinated.

In the words of Fatima, a woman from Aleppo, northwest Syria, who is among the millions currently displaced

"One day, I decided that I have endured enough. I was the only woman in my family and I was treated as a maid by my father and my brother. When I learned from an outreach team about a Safe Space near my house, I did not know what to do. I have been subjected to psychological violence for a long time and I was feeling ashamed and desperate. Despite my fear, I decided to visit. There, I was welcomed by a caseworker and was invited to a private session, during which I told my story.

"I've spent my entire life taking care of my brother and my father. I am only 22 years old but I feel like a neglected piece of furniture waiting for its expiration date to be disposed of by the master of the house.

"Since birth, I've suffered from a respiratory disease that made me constantly terrified of experiencing sudden asthma attacks. This was yet another reason for my brother and my father to humiliate and insult me. Despite that, as any other woman, I had dreams: I loved science and I wanted to get married. However, my family did not believe nor support me.

"For instance, every time a young man proposed to me for marriage, my father dissuaded him. They wanted to keep me inside the house, as their cleaner. I was perceived as a burden to the family, a person without feelings or needs.

"The caseworker listened to my story without interrupting. When I finished, we decided together I could benefit from psychological support to relieve pressure, gain self-confidence, and learn relaxation and breathing techniques. I also received cash assistance, which enabled me to buy a nebuliser and some decent clothes. My caseworker encouraged me to focus on my strengths and cultivate my passions.

"Since I was feeling more self-confident, I decided to take a step forward and attend a life-skills programme. I started a livelihood course which helped me to build my professional skills. Today, I feel empowered and optimistic about the future. I am considered a role model in the centre and I always encourage other women to seek support."

TURKEY COUNTRY OFFICE

WITH THE HIGHEST NUMBER OF SYRIAN REFUGEES IN THE CRISIS REGION, TURKEY CONTINUES TO PROVIDE MUCH-NEEDED ASSISTANCE TO DISPLACED SYRIANS THROUGHOUT THE COUNTRY.

33,200

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

76% FEMALE

4,295

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

48% FEMALE

18,892

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

79% FEMALE

3,768

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

6,001

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

83% FEMALE

1,490

LGBTQI+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

86

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

57% FEMALE

2,183

PEOPLE TRAINED ON VARIOUS TOPICS

73% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	12,192	90%
Ante-natal care consultations	7,022	100%
Post-natal care consultations	5,108	100%
People trained on SRH-related topics	720	65%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	11,702	90%
People provided with GBV case management	662	61%
People reached with GBV awareness messages	13,093	83%
People trained on GBV-related topics	815	66%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	648	89%



4

WOMEN AND GIRLS SAFE SPACES *



14

OTHER SERVICE DELIVERY POINTS



10

MOBILE CLINICS



4

YOUTH CENTRES

* Safe Spaces in Turkey are providing an integrated response to refugees in need, including both gender-based violence and sexual and reproductive health services in the same facility.

“ IT’S DIFFICULT TO FIND HOPE WHEN YOU FEEL THAT EVEN YOUR FAMILY CANNOT WAIT TO BE RID OF YOU. I AM FORTUNATE TO HAVE FOUND PEOPLE WHO HELPED ME BELIEVE IN MY OWN WORTH AGAIN.

– MARAM, a Syrian woman from Qamishli

IN TURKEY, UNFPA WORKS TO PROMOTE THE HEALTH AND PROTECTION OF WOMEN AND GIRLS IN MIGRANT COMMUNITIES

AS TURKEY CONTINUES TO FACE A MOUNTING ECONOMIC CRISIS, UNFPA IS COMMITTED TO WORKING WITH GOVERNMENT AND LOCAL PARTNERS TO ENSURE THAT WOMEN AND GIRLS ARE NOT LEFT BEHIND.

The COVID-19 pandemic has had a significant impact on the Turkish economy and labour market. The relatively high unemployment rates (11.2 percent as of November 2021, according to data provided by Turkish Statistical Institute) and high inflation rates (more than 36 percent as of December 2021) have reduced household economic and social gains, negatively impacting incomes and access to basic needs.

According to the World Bank, the pandemic has deepened gender gaps and increased youth unemployment and poverty rates. These converging factors will likely have a negative impact on women and girls' well-being, leading to an increase in gender-based violence and harmful practices, such as child and early marriages.

According to the World Bank, the pandemic has deepened gender gaps and increased youth unemployment and poverty rates.

Meanwhile, the devaluation of the Turkish Lira has had a marked impact on communities throughout the country, including the more vulnerable refugee and migrant communities. In recent months, the Lira has taken a sharp nosedive in terms of value, adding to the economic woes already plaguing Syrian refugees. The inextricable link between the Turkish and regional economies, particularly in light of the current humanitarian needs in the region, underscores the serious risks facing those impacted, both inside Syria and in host communities region-wide.

In Turkey, UNFPA continues to target the most vulnerable population groups impacted by the Syria crisis, including refugees, women and girls with disabilities, young people, and other key groups who are survivors or at risk of sexual violence. Health teams continue to provide uninterrupted sexual and reproductive health and protection services, including prevention and response to GBV services. The static service units, in line with

government and inter-agency guidelines, continued providing support as part of a hybrid model.

On International Women's Day, UNFPA partners organised social gatherings and awareness-raising sessions with refugee women and girls to discuss the impact of climate change on their lives. Discussions focused on water scarcity, the causes of forest fires, consumption habits and the relationship between nature and mental health. In one of the art-based awareness exercises, participants were asked to imagine and draw the environment they would like to see when they look outside their windows. The results were quite varied and striking, with several of the participating women noting that it was their first experience with illustration.

Meanwhile, UNFPA signed a Memorandum of Understanding with WFP to further scale up the support being provided to LGBTQI+ individuals who access services at UNFPA-supported facilities. The agreement will see individuals in need enrolling in various training activities and benefitting from cash for training assistance under WFP's Socio-economic Empowerment and Sustainability (SES) programme.

“ I FELT LOST BEFORE, BOTH LEGALLY AND PSYCHOLOGICALLY. AFTER I MET WITH THE SERVICE UNIT, I FELT THAT I ACTUALLY EXISTED FOR THE FIRST TIME IN MY LIFE.”

— ALYA, a Syrian girl with disabilities living in Turkey

Helping women and girls with disability find safety and support

Alya is one of the hundreds of thousands of refugees with disabilities living in Turkey. She had come to the country from Iraq two years ago hoping to find safety and a better life. The 32-year old has been living with a physical impairment since she was 13 due to an accident.

After facing various difficulties in Iraq as a result of her disability, Alya was left to her fate by her own mother, who decided that she could no longer take care of her daughter and returned to her country.

Alya describes how her life changed when she met UNFPA's Refugees with Disabilities Service Unit in Ankara, operated in cooperation with the Association for Solidarity with Asylum Seekers and Migrants (SGDD-ASAM).

“I used to feel lost and scared all the time. A friend of mine told me that there is a centre where I can share my problems. I called them. At first, I was hopeless because I had applied to many places before, but this time was different.”

“First, my fears were completely gone because they provided me with psychological support. They also took care of the problems I faced accessing health services. Since I was living alone at home, I was not able to move. Thanks to their referrals, I have a wheelchair now.”

Alya is now more optimistic, thanks to the service unit. “I felt lost before, both legally and psychologically. After I met with the service unit, I felt that I actually existed for the first time because they supported me in getting my ID card. I also learned about my rights here. Thanks to their support, I saw the light again.”

There were a few situations during which Alya required urgent medical care. “They helped me get to the hospital. They also provided constant support in terms of language. Thanks to this, I can handle my medical care and daily life more comfortably.”

Alya added that the work being done at the unit is crucial because it does not only touch one person's life but the lives of many who are in similar situations.

“Can you imagine how important this is? For people with disabilities, not receiving help often means not being able to move. Thanks to this kind of support, such a person is able to hold on to life again, which is a huge thing.”

This newfound hope allowed Alya to return to one of her oldest's passions: poetry. “I used to write poems, but difficult living conditions, loneliness, and being unable to move prevented me from writing after a while. Thanks to the support I received from the service unit, I've picked it up again.”

Both this unit in Ankara and another in Izmir were established under SGDD-ASAM with the financial support of European Union Humanitarian Aid, their primary objective being to increase the access of refugees with disabilities to protection and other services they need. The centres provide information counselling, psychosocial support and referral, legal counselling services, and awareness raising activities on rights and entitlements so that thousands like Alya can move, access support, and write poetry.



LEBANON COUNTRY OFFICE

UNFPA CONTINUES TO ADAPT ITS PROGRAMMES TO PROVIDE LIFE-SAVING SERVICES TO PEOPLE IN NEED, WITH A FOCUS ON WOMEN AND GIRLS.

2,952

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

99% FEMALE

237

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

100% FEMALE

4,663

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

100% FEMALE

3,294

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

294

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

70

LGBTQ+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	1,780	100%
Ante-natal care consultations	110	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People provided with GBV case management	74	100%
People reached with GBV awareness messages	1,413	100%



5

PRIMARY HEALTHCARE FACILITIES*



11

WOMEN AND GIRLS SAFE SPACES



3

MOBILE CLINICS

“ I WISH TO SEE A WORLD WHERE THESE THINGS SIMPLY CANNOT HAPPEN, AND WHERE GIRLS LIKE ME CAN FEEL SAFE, ACCEPTED, AND MOTIVATED. I AM ALSO EAGER TO PLAY A PART IN MAKING THIS WORLD POSSIBLE, EVEN IF I FAIL.

– LAYAN, a Syrian girl living in Lebanon

DESPITE A COLLAPSING ECONOMY AND MOUNTING CHALLENGES, UNFPA LEBANON CONTINUES TO TARGET THOSE MOST IN NEED

Unfpa is targeting marginalised communities as Lebanon braces for another difficult year.

As Lebanon continues to host the second largest number of refugees in the crisis region, mounting other crises are unfolding from within, chief among them being the ongoing economic deterioration that is placing the lives and future of people at risk.

Most people in Lebanon continue to struggle to survive amid soaring inflation, with many families unable to afford generator costs. The Lebanese Lira depreciated rapidly during March, hitting a low point of 24,000 to the U.S. dollar on the parallel market. This will undoubtedly compound the gender-based violence and protection risks women and girls already face, such as intimate partner violence, child marriage, and sexual exploitation.

Lebanon is also witnessing an unprecedented deterioration in its healthcare system, and prices of medications have also significantly increased after government subsidies were restructured and reduced, leaving many families unable to afford healthcare. The larger ramifications of the pandemic for the country remain to be seen, particularly as efforts to accelerate economic recovery continue to stall and more communities are pushed to the brink as they struggle to survive.

The impact of the economic crisis and the COVID-19 pandemic can be seen on the ground.

A recent study has shown that 58 percent of women reported COVID-19 had a negative effect on their lives, while 83.5 percent reported that the economic crisis prevented them from accessing antenatal care. The crisis has exacerbated gender-based violence nationwide, particularly intimate partner violence and sexual exploitation and abuse. According to a survey conducted by the Inter-Agency SGBV Task Force in Lebanon in late 2021, more than two-thirds of GBV-related organisations have experienced increased calls for assistance on their hotlines, and 96 percent report reduced ability of survivors to reach out for assistance.

To help offset these effects, UNFPA continues to lead cash and voucher assistance programmes, which have proven crucial to safeguarding the rights, dignity, and well-being of women caught in this crisis. UNFPA also continues to prioritise the well-being and protection of women and girls and other vulnerable groups, including members of the LGBTQIA+ community, by preventing and mitigating risks of violence, abuse, and exploitation, and providing vital and essential gender-based violence programming.

‘with the work we’re doing here, we’re saving lives every day’

Over the past few years, Patrick has been working as a Voluntary Counselling and Testing (VCT) Officer at a UNFPA-supported health facility, offering consultations and testing for LGBTQ+ individuals who reach out for support through the facility’s helpline.

“In Lebanon, we have low levels of awareness on sexual and reproductive health, especially when it comes to sexually transmitted diseases,” says Patrick. “Over my years of working in this field, I’ve observed plenty of misconceptions in our society that might lead to preventable loss of life. It gives me great comfort to know that with the work we’re doing here, we’re saving lives every day.”

“Over my years of working in this field, I’ve observed plenty of misconceptions in our society that might lead to preventable loss of life”

Patrick’s experiences at the facility certainly highlight the impact that such work is having, particularly in communities with deeply entrenched patriarchal norms.

“One case, for example, involved a Syrian couple who — as they were fleeing to Lebanon — were both raped by the very men who were smuggling out of Syria. They were

provided with the needed tests and one had unfortunately contracted HIV. We began treatment immediately and made sure it was complemented with psychological support to help them overcome the trauma.”

“Sustainable support systems are needed to help vulnerable communities and encourage greater integration of services.”

Patrick explains that, without such services readily available, people in such situations would not be able to afford these tests and would end up endangering their lives. “The counselling alone had substantially helped them overcome that traumatic experience.”

Patrick believes that such work must not only continue but be scaled up to reach more members of the LGBTQIA+ community. “Sustainable support systems are needed to help vulnerable communities and encourage greater integration of services. This is vital to ensuring that such violence no longer occurs, even in humanitarian settings.”



JORDAN COUNTRY OFFICE

WITH 1.3 MILLION SYRIANS NATIONWIDE, UNFPA IN JORDAN CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES AND HOST COMMUNITIES NATIONWIDE.

26,115

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

25

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

12,789

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

86% FEMALE

348

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

98% FEMALE

1,972

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

71% FEMALE

2,013

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	4,798	100%
Normal and assisted vaginal deliveries	326	100%
Ante-natal care consultations	8,945	100%
Post-natal care consultations	1,149	100%
People trained on SRH-related topics	29	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People provided with GBV case management	548	93%
People reached with GBV awareness messages	6,241	81%
People trained on GBV-related topics	30	100%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	55	42%



16
PRIMARY HEALTHCARE FACILITIES *



19
WOMEN AND GIRLS SAFE SPACES



1
EMERGENCY OBSTETRIC CARE FACILITY



1
YOUTH CENTRE

“ I FELL TO THE FLOOR AND BURST INTO TEARS, AND I SIMPLY RECALL MYSELF PLEADING FOR PROTECTION. THE ANXIETY HAD REACHED SUCH DEEP LEVELS THAT IT MADE ME FEEL OVERWHELMED.

– SALMA, who recently received gender-based violence support at a UNFPA-supported facility in Jordan

IRAQ COUNTRY OFFICE

IN IRAQ, UNFPA CONTINUES TO PROVIDE ESSENTIAL SUPPORT TO MORE THAN 316,000 SYRIAN REFUGEES AS 1.2 MILLION PEOPLE REMAIN DISPLACED NATIONWIDE.

4,080

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

69

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

96% FEMALE

761

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

100% FEMALE

135

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

60

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

48% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	2,358	100%
Normal and assisted vaginal deliveries	114	100%
C-Sections	53	100%
Ante-natal care consultations	3,168	100%
Post-natal care consultations	778	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	343	100%
People provided with GBV case management	31	100%



9

PRIMARY HEALTHCARE FACILITIES *



9

WOMEN AND GIRLS SAFE SPACES



1

EMERGENCY OBSTETRIC CARE FACILITY



1

YOUTH CENTRE



1

GBV MOBILE TEAM



OF COURSE, I SEE THEM ALL THE TIME. GIRLS AS YOUNG AS 14 AND 15 GIVING BIRTH, OFTEN MANY TIMES BY THE TIME THEY'RE WOMEN. MANY OF THEM BECOME SERIOUSLY ILL OR EVEN DIE.

– RUQAYYA, a Syrian midwife living in Duhok

IN IRAQ, UNFPA IS PRIORITISING LIVELIHOODS AND CASH AND VOUCHER ASSISTANCE FOR VULNERABLE POPULATIONS

Following a difficult journey with COVID-19 and ongoing security challenges, Iraq's displaced populations continue to face mounting challenges

Almost 1.2 million Iraqis continue to live in protracted situations of internal displacement, and the country hosts over a quarter of a million refugees. These displaced populations are often more vulnerable to protection risks – such as arbitrary arrest and detention, trauma and psychological stress, threat of eviction from their homes, and lack of access to essential services – at a higher rate than the population at large.

For example, almost one-fifth of the out-of-camp IDPs report psychological distress, and just half have access to safe and adequate housing. Nearly one-in-five Syrian refugees rely on charity and cash assistance for food, and more than half report experiencing difficulties accessing healthcare services.

While returns of displaced Iraqis to their home governorates consistently outnumber new displacements, many of those still in displacement are unable to go back for a range of reasons, including destroyed property, lack of livelihood opportunities, insecurity, fear and trauma, and perceived affiliation with extremist groups. As many as 90 percent have been displaced for more than three years and 70 percent for more than five years.

Additionally, many Iraqis who have been able to return to their homes continue to live in substandard conditions, struggle to reintegrate, lack livelihood opportunities, and require support and assistance to access services and meet their basic needs.

While significant humanitarian support is still crucial for many, efforts in the country are gradually transitioning from humanitarian interventions and placing more focus on development through access to public services and socio-economic integration. At the same time, Iraq's overall political, economic, and security environment remains largely volatile, foreshadowing a difficult year ahead.

Aysha's journey of self-discovery

Aysha, a 31-year-old mother of two from Syria, was working as a school teacher when she discovered her husband was cheating on her. Despite the violation of her trust, she made the choice to flee with him and her children to the Kurdistan Region of Iraq to escape the war in her hometown.

"The war was devastating, and the situation in Qamishli was getting dangerous, so I agreed to go with him to a camp in Duhok to save our lives and work on our marriage," she explains. "However, a year into it, he returns to Syria to marry the other woman, leaving me a single mother with two children to look out for. I haven't heard from him since then, and that's how my journey of self-discovery and self-reliance began."

"He returns to Syria to marry the other woman, leaving me a single mother with two children to look out for"

Aysha struggled as she was not prepared to be the sole breadwinner for her family. She was unemployed, away from people she trusted, living in a camp in a foreign land, and alone with small children relying on her for their survival. Being a single mother meant that she had additional responsibilities, including house finances, clothing, school, and feeding, among other things.

All this additional work took its toll on Aysha, who suffered from severe depression. Yet, she wouldn't give up.

"My education has equipped me to be a responsible adult and face all challenges in my life. I started to look for jobs and ways to improve myself. I came across the UNFPA-supported Women Social Centre, where I found more than one of the services I was looking for," she recalls.

"I encourage all women to seek help when they need it because it is only then they can deal with the pain and gain the confidence to move on"

Aysha received several services from the women's centre, starting with psychosocial support, sewing and cooking sessions. She also attended recreational activities to help her vent the pressure of running a household alone. As she continued, she became confident and boldly spoke out about the injustice she had faced with her husband.

"I came to this centre for help, and I received it. I encourage all women to seek help when they need it because it is only then they can deal with the pain and gain the confidence to move on," she adds, hoping to inspire other women.

Today, Aysha owns a small shop where she sells homemade Syrian food. She makes a good living and is proud to support her children without having to rely on someone else.



EGYPT COUNTRY OFFICE

UNFPA EGYPT CONTINUES TO PROVIDE ASSISTANCE TO SYRIAN REFUGEES IN THE COUNTRY.

85,019

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

2,778

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

97% FEMALE

12

PEOPLE WITH DISABILITIES REACHED WITH SPECIALISED SERVICES

83% FEMALE

493

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	174,949	100%
People trained on SRH-related topics	484	91%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People provided with GBV case management	595	96%
People reached with GBV awareness messages	662	98%



10
WOMEN AND GIRLS
SAFE SPACES



120
PRIMARY HEALTHCARE
FACILITIES

UNFPA continues to tailor its programmes in Egypt to respond to the needs of women and girls caught in the crisis

As of early 2022, more than 135,000 Syrian UNFPA and its partners are providing humanitarian interventions to tackle different forms of violence and abuse against refugees in Egypt. In 2021, UNFPA-supported facilities served 14,261 women including 11,187 refugees through the UNFPA supported Safe Spaces, where women and girls receive GBV case management services as well as MHPSS services.



COORDINATION UPDATES

UNFPA CONTINUES TO LEAD THE GBV AREA OF RESPONSIBILITY, ENSURING THAT MINIMUM STANDARDS ARE IN PLACE TO PREVENT AND RESPOND TO GENDER-BASED VIOLENCE IN EMERGENCIES.

The Whole of Syria GBV AoR HRP sector priorities and figures were presented during the HRP sector defence meeting. The GBV HRP 2022 appeal of US\$ 84 million targeting 1.7 million people was accepted and confirmed.

The AoR also finalised the analysis of the Coordination Survey, with findings presented and shared with Hub coordinators for their consideration. Currently, hub coordinators are sharing the survey's results with the membership to identify operational and quality improvements. Around 63 percent of survey responses across hubs stated that coordination does not need improvement, while 37 percent identified space for improvement mainly linked to capacity-building opportunities. Meanwhile, 92 percent of informants shared that information received through the GBV AoR helped program implementation.

In March, the Hub initiated the development of a knowledge product on the added value of Women and Girls' Safe Spaces (final title to be determined). The objective of this knowledge product is to answer frequently asked questions to clarify the value of Safe Spaces within the framework of GBV emergency programming in the Arab Region. The draft is currently being reviewed by GBV specialists at the regional level.

The Whole of Syria GBV AoR is committed to sharing and exporting best practices and technical resources developed within the Syria response to other countries in the region. Jordan and Iraq started the rollout process of their adapted GBV M&E Toolkits, with two workshops designed to

develop training materials and a two-day training in Jordan (a training will be held in Iraq in June). The rollout targets GBV and M&E staff of the GBV Subcluster in the two countries. Discussions were also initiated to start the replication process in Palestine.

Through cross-border Turkey, the Sexual and Reproductive Health Technical Working Group (SRH TWG) organised a one-day face-to-face workshop on the Robson Classification. In line with WHO recommendations, the Robson Classification would enable the standardisation of the classification system for pregnant women who undergo childbirth, both through normal deliveries and C-section services. The workshop, held in Gaziantep, targeted 24 Reproductive Health coordinators and managers representing 21 organisations and the health directorates. During the workshop, participants discussed the feasibility of applying the classification in north-western Syria. Participants agreed to pilot this globally recognised approach at their health facilities. This workshop will be followed by a training targeting health professionals (e.g. obstetricians, nurses, midwives), as well as hospital managers. This capacity building activity will contribute to strengthening their technical knowledge on Robson Classification, as well as their ability to apply this methodology to their delivery points.

In Turkey, as the co-chair of the SET GBV sub-Working Group, UNFPA delivered a presentation on PSEA that focused on the broad concept and definitions of PSEA, its Six Core Principles, origins, and assessment and capacity development processes for service providers.

UNFPA also co-chaired the SET Region Thematic Coordination Group meeting, during which coordination group achievements, lessons learned, and the priorities for 2022 were presented. Coordination Group partners noted that the group emerged to fill in the gap caused by the lack of a coordination mechanism and a capacity building platform on LGBTQI+ issues. Furthermore, the high staff turnover rate in the protection sector requires more effective coordination in terms of case management along with continuous capacity strengthening activities for service providers.

UNFPA also co-chaired the monthly PSEA Network meeting, with key topics including the planning the PSEA training targeting 3RP partners that will be organised with the support of UNFPA experts and presenting of the SOP on referrals and domestication of the Victim's Assistance Protocol.



I'VE SPENT MY LIFE TRYING TO FIND THE KIND OF SUPPORT AND UNDERSTANDING THAT I FOUND IN THIS SAFE SPACE, AMONG THESE REMARKABLE WOMEN WHO REFUSE TO SURRENDER TO CIRCUMSTANCES.

— RAYA, who received protection services at a UNFPA-supported facility



DONORS & PARTNERS

CURRENT DONORS

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United Nations: OCHA/CERF, UNDP, SCHF, and UNFPA Emergency Funds.

IMPLEMENTING PARTNERS

In Syria: (MOH) Ministry of Health, (MOHE) Ministry of Higher Education, (Mosaic) Mosaic for Human Relief & Dev., (ICDA) Ihsan Charity Development Association, (NFRD) Nour Foundation for Relief and Development, (SSSD) Syrian Society for Social Development, (Al Tamayouz) Altamayouz for Orphan Sponsorship, (SFPA) Syrian Family Planning Association, (Yamama) Syria Al-Yamama, (Agha Khan) Agha Khan Foundation, (ASSLS) Amelioration of Sanitary and Social Level Society, (CCA) Circassian Charity Association, (Ghiras) Ghiras Ass. for Development, (PACA) Pan Arminian Charity Association, (Sham) Al-Sham Association for Health, (BSWH) Al Bir & Social Welfare Hama, (SARC) Syrian Arab Red Crescent, (SCFAP) Syrian Commission for Family Affairs and Population, (MAC) Mar Asia, (PRCS) The Palestine Red Crescent Society, (IECD) European Institute of Cooperation and Development, (Sanad) Sanad team for development, UNDP, UNICEF, FAO, and WFP.

In Lebanon: Ministry of Public Health, Ministry of Social Affairs, Amel Association, Al Mithaq, Akkarouna, and ABAAD.

In Jordan: Institute for Family Health (IFH), Ministry of Health (MOH), Society Aid Health Jordanian (JHAS), Jordanian Women's Union (JWU), the National Council for Family Affairs (NCFA), National Women's Health Care Centre (NWHCC), Questscope, Higher Population Council (HPC), Generations for Peace (GFP), Health Care Accreditation Counsel (HCAC), International Rescue Committee (IRC), Royal Health Awareness Society (RHAS), the Jordanian National Commission for Women (JNCW), and Save the Children Jordan.

In Iraq: AL Massela, Harika, Zhian and Civil Development Organisation.

In Egypt: UNHCR, Ministry of Health and Population (MOHP), Ministry of Youth and Sports (MoYS), Etijah, and Care International.

In Turkey: ASAM (Association for Solidarity with Asylum Seekers and Migrants); KAMER (Women's Centre Foundation); Eskisehir Osmangazi University; Harran University; YAHA (Youth Approaches to Health Association); PLA (Positive Living Association); Red Umbrella Sexual Health and Human Rights Association. For the service units that are under direct implementation, UNFPA is collaborating with Ankara Municipality, Sanliurfa Municipality and RASAS (Refugees and Asylum Seekers Assistance and Solidarity Association).

Turkey Cross-Border: International Rescue Committee (IRC), Relief International (RI), Shafak, Syrian American Medical Society (SAMS), Ihsan for Relief and Development (IhsanRD), and their sub-implementing partners Masrart (IhsanRD), Women Support Association (IhsanRD), Hope Revival Organization (IRC) and Relief Experts Association- UDER (IRC).

DEVELOPED BY THE
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SYRIA & THE ARAB STATES



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RELEVANT RESOURCES

www.unfpa.org
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<http://Syria.humanitarianresponse.info>

