UNITED NATIONS POPULATION FUND

REGIONAL SITUATION REPORT

FOR THE SYRIA CRISIS

INFP

ISSUE # 68 April 2018

66

Women and girls are particularly vulnerable to violence and discrimination. Gender-based violence, already the most common human rights violation, only increases with disruption and displacement. And far too much evidence shows that child, early and forced marriage increases as well. So I would ask you to bear in mind that the lack of access to sexual and reproductive health services is a major contributing factor to death, disease and disability among displaced women and girls of reproductive age.

UNFPA Executive Director, Dr. Natalia Kanem Statement to the Commission on Population and Development 9 April 2018

MARCH 1-30 2018 OF ISSUE # 67 , **REGIONAL SITUATION REPORT ON THE SYRIA CRISIS** ONTENTS I

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 Syria Response Hub in Amman, Jordan, and spans operations conducted by UNFPA offices in Syria, Jordan, Lebanon, Turkey, Iraq, and Egypt, in addition to operations conducted in Syria through crossborder modalities from Jordan and Turkey.

In addition to providing aggregated quantitative updates for each country, the report also brings stories from the field that highlight the plight of communities inside Syria and in host countries, in addition to underscoring the positive impact of the response services provided by UNFPA in the areas of reproductive health, genderbased violence, youth, and others.

SECTION RESPONSES FROM ALL OPERATIONS SYRIA COUNTRY OFFICE

STRIA COUNTRY OFFICE	0
CROSS-BORDER JORDAN	9
CROSS-BORDER TURKEY	11
EGYPT	13
IRAQ	15
JORDAN	17
LEBANON	19
TURKEY	20
COORDINATION	22
DONORS & PARTNERS	23



PAGE

PSHO⁻

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 Egypt, Iraq, Jordan, Lebanon and Turkey. The crisis continues to devastate the country and shows few signs of letting up in the near future.

Even in these circumstances, UNFPA believes that every Syrian woman, adolescent girl and child has the right to reproductive health and protection from gender-based violence.

UNFPA operations in Syria are run from the Syria Country Office, as well as from the UNFPA hubs in Amman, Jordan and Gaziantep, Turkey for respective crossborder operations.

REPRODUCTIVE HEALTH

INDICATOR

Beneficiaries reached with reproductive health services
Family planning consultations
Normal / assisted vaginal deliveries
C-Sections
Ante-natal care consultations
Post-natal care consultations
People trained on RH-related topics

SINCE JANUARY

649,913
321,836
56,740
46,641
218,720
38,502
974

GENDER-BASED VIOLENCE

INDICATOR

Beneficiaries reached with GBV programming / services Population reached with Dignity Kits Beneficiaries provided with GBV case management Beneficiaries reached with GBV awareness messages People trained on GBV-related topics

YOUTH SERVICES

INDICATOR

Beneficiaries reached with youth programming

SINCE JANUARY

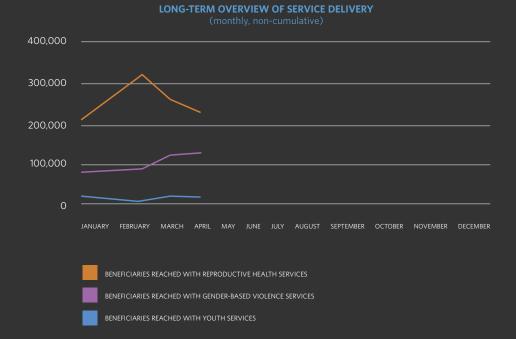
313,545 169,656 8,118 129,573 668

SINCE JANUARY

41,818



* Above figures reflect fully-supported service-delivery points. Inside Syria additional 917 primary healthcare facilities are being partially supported through the Ministry of Health



Issue # 68 / April 2018

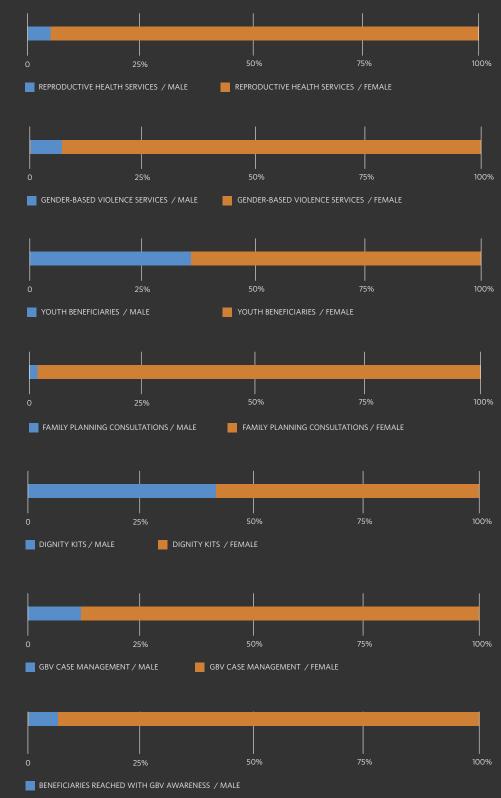
4

PSHO

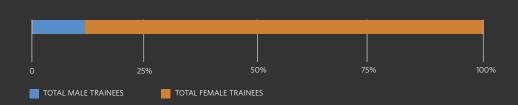
Through its 118 Women and Girls Safe Spaces, 132 primary healthcare facilities, and 26 youth centers, UNFPA continues to provide essential reproductive health and gender-based violence services to women, girls, men and boys impacted by the Syria crisis.

While most beneficiaries reached by RH and GBV services are female, up to 15 percent of beneficiaries are males. Meanwhile, around 70 percent of youth beneficiaries and 60 percent of Dignity Kit recipients are females, while around 85 percent of beneficiaries receiving training services covering RH, GBV and youth topics are females.

KEY INDICATORS DISAGGREGATED BY SEX



BENEFICIARIES REACHED WITH GBV AWARENESS / FEMALE



REPORT UNTRY

In April, UNFPA Syria continued to respond to the aftermath of the hostilities in East Ghouta. With more than 158,000 people displaced, the situation remains alarming for civilians staying in the collective shelters, most of which do not have the capacity or infrastructure to accommodate the large number of people arriving.

UNFPA Syria is on the ground to meet the dire needs and to respond to the rapidly changing situation in the Afrin and East Ghouta area. UNFPA and its partners continue to provide integrated RH and GBV services, including family planning supplies and counselling, gynecological consultations, antenatal care including supplements, post-natal care, psychosocial support and referral for deliveries and comprehensive emergency obstetric and neonatal care.

SYRIA COUNTRY OFFICE

REPRODUCTIVE HEALTH

INDICATOR

Beneficiaries reached with reproductive health services 394.738 245,485 Family planning consultations Normal/assisted vaginal deliveries 49,361 42,763 **C-Sections** 158,425 Ante-natal care consultations Post-natal care consultations 21,820 35 Health facilities that provide Emergency Obstetric Care Primary healthcare facilities 61 Partially-supported primary healthcare facilities 917 65 Mobile clinics

GENDER-BASED VIOLENCE

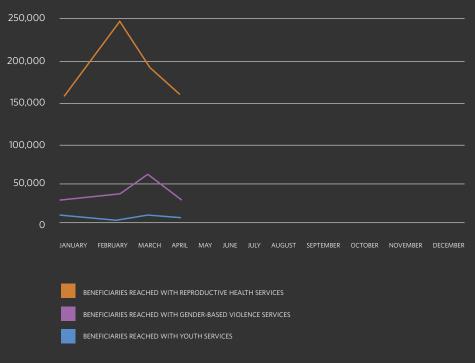
INDICATOR

Functional women and girls safe spaces (WGSS)	35
Beneficiaries reached with GBV programming / services	97,889
Population reached with Dignity Kits	24,441
Beneficiaries provided with GBV case management	3,664
Beneficiaries reached with GBV awareness messages	52,950

YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	16
Beneficiaries reached with youth programming	25,338





SINCE JANUARY

SINCE JANUARY

HIGHLIGHT FINDING HOPE IN THE CHAOS OF DISPLACEMENT WITH HUNDREDS OF THOUSANDS DISPLACED IN NORTHERN SYRIA, ONE DISPLACED MOTHER'S SAFE DELIVERY EMBODIES THE HOPE FOR THE FUTURE OF THE NATION

A surge in violence in Eastern Ghouta since February has forced the evacuation of over 158,000 people, leaving many with serious unmet protection and medical needs.

The evacuees have been sent to a number of locations, with some placed in temporary shelters, schools and warehouses not adequately equipped to house people or keep them safe.

"Shelters are overcrowded and lack suitable latrines, washing facilities and sufficient lighting," said UNFPA Representative Massimo Diana at Adra Shelter after a UNFPA assessment mission. "Many families are restricting the movement of women and girls out of fear for their safety."

Many of the displaced people have unmet reproductive health needs – with many having lost access to medical care even before they were forced to flee.

"Before they left Eastern Ghouta, there was no electricity, no hospitals, no doctors - the doctors escaped also - so no one could serve them," said Dr. Hala AI Khayer, a reproductive health expert for UNFPA who visited the shelters and surrounding areas.

Displacement has only exacerbated the hardship. "We met a lot of pregnant women who safely arrived in the collective shelters but face limited medical services," Dr. Al Khayer added.

Over 132,800 people in the area have been reached with reproductive health services, including gynecological consultations,

family planning, and the distribution of over 115,300 sanitary napkins, as part of 10,000 dignity kits that also contain other key hygiene items for women and girls. More than 7,300 male dignity kits have been distributed as well.

Pregnant women are receiving antenatal care, including supplements and ultrasound diagnostics, referral for deliveries, comprehensive emergency obstetric and neonatal care, and post-natal care.

After she fled her home in Douma, pregnant Om Mehi Eddin was settled in the Fayhaa Al Sham temporary shelter. When the time came, the 36-year-old mother of five gave birth with the help of a UNFPA-supported Syrian Arab Red Crescent (SARC) mobile medical team, who helped her get to a hospital in Damascus.

The SARC general health mobile clinic is one of three mobile clinics serving the shelter's residents. Operated by local partners and deployed with UNFPA support, the clinics address the medical needs of pregnant women as well as other evacuees.

The two other clinics – operated by the Monastery of Saint James the Mutilated and the Syrian Family Planning Associationspecialize in sexual and reproductive health.

"They saved my life and my baby as well," Om Mehi Eddin told UNFPA's communication expert Kinda Katranji.

Om Mehi Eddin named her child Sham — one of the Arabic names for Syria. "I called

her Sham because I love my country very much and hope that peace will prevail soon," she explained.

As part of the ongoing response to the humanitarian emergency in Syria, UNFPA and its partners are providing sexual and reproductive health and protection services to Eastern Ghouta evacuees.

"UNFPA Syria is on the ground to meet the dire needs and to respond to the rapidly changing situation in the Eastern Ghouta area," said Mr. Diana.

UNFPA and its partners have also reached over 86,400 people with services related to gender-based violence, to raise awareness while providing women and girls with psychosocial support and referral to further health, mental health and legal support.

These services fulfil critical needs for health, hygiene and safety among people who have endured violence, displacement and the loss of even the simplest comforts. "Women have barely had a shower for almost one month," said Ms. Katranji, "and children are just dreaming of having a glass of milk and a biscuit."

For Om Mehi Eddin, the support, supplies and care provided by UNFPA and partners are making a difference. Once a week, she takes her baby daughter to the UNFPAsupported mobile clinic for a checkup and to receive vitamins and medicine.

"We left our homes and all our memories; we barely have our own clothes," she said, "but now Sham and I are safe and healthy.



UNFPA's Mission

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

UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive healthcare and be effectively protected from genderbased violence. UNFPA and partners are scaling up efforts to empower and improve the lives of Syrian women and youth and impacted communities inside Syria and in host countries, including by advocating for human rights and gender equality, to better cope with and recover from the crisis. **REPOR**

UNFPA continues to provide services to Syrians located in areas inside Syria that are not controlled by the Syrian government, operating cross-border from Jordan. With primary healthcare facilities and Women and Girls Safe Spaces available to people in need, operations from cross-border Jordan continue to serve as a lifeline to pregnant women, adolescent girls, and survivors of gender-based violence., delivering services to areas where access to aid may be difficult to many.

April registered a significant increase in the number of women and girls coming to the Women and Girls Safe Spaces due to rescheduling and the addition of new group activities. The staff at those spaces continue to adjust programs and activities based on beneficiary feedback in an effort to create a harmonious and personalized environment that is condusive to healing and selfdevelopment.

CROSS-BORDER JORDAN

REPRODUCTIVE HEALTH

INDICATOR

SINCE JANUARY

ARY

Beneficiaries reached with reproductive health services	26,459
Family planning consultations	4,510
Normal/assisted vaginal deliveries	2,820
C-Sections	1,622
Ante-natal care consultations	11,482
Post-natal care consultations	4,365
Health facilities that provide Emergency Obstetric Care	6
Primary healthcare facilities	9

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUA
Functional women and girls safe spaces (WGSS)	16
Beneficiaries reached with GBV programming / services	4,862
Beneficiaries provided with GBV case management	232
Beneficiaries reached with GBV awareness messages	1,594



LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly. non-cumulative)

HIGHLIGHT THE DEADLY STRANGLEHOLD OF FAMILY VIOLENCE AFTER HER HUSBAND HAD TO FLEE THE COUNTRY, SARAH WAS LEFT IN THE CARE OF HER UNCLE AND FOUND HERSELF TRAPPED IN A VICIOUS CYCLE OF ABUSE THAT NEARLY TOOK HER LIFE.

It was not too long after the crisis in Syria began that Sarah's husband had to flee the country, leaving her in the care of her uncle in the hope that he would one day return.

Seven years have passed since then with no prospects for his imminent return, during which time Sarah has slowly became part of a daily nightmare that not only threatened her life but also eclipsed the backdrop of war and violence as it was happening right inside her home.

Sarah's uncle — a quick-tempered and controlling figure in her life — appeared to disintegrate under the pressure of war. As Sarah describes, "he became increasingly violent over the past few years, and I became the most available and easy target."

The abuse had taken both verbal and physical forms, growing in frequency and intensity with each passing day. Its triggers were both random and unwarranted, as Sarah's sole focus over the years had become to make the best of her situation and alleviate the stress she and her family endured due to the protracted conflicts plaguing the country.

"I felt trapped," explains Sarah. "I was unable to reach out to anyone as he was my guardian, and I was afraid people would think I was exaggerating. This was certainly my husband's impression when I finally called to him for help. He told me to stay strong and live with the situation until he is able to return."

One day, her uncle was in the throes of one of his violent episodes, which took a sudden and dangerous turn for the worse.

"He just snapped," Sarah recalls. "He has always been violent, but something was different about the way he looked at me at that moment. Seconds later he was on top of me, strangling me with all his strength. He meant to kill me."

Miraculously, Sarah managed to break free. Bruised and traumatized, she sought help at a clinic supported by UNFPA through cross-border Jordan, where the attending physician immediately recognized the strangulation marks on her neck and the remaining bruises that marked her entire body, each carrying a psychological scar that is much darker and slower to heal.

The physician referred her to a social worker who offered her emergency counseling, allowing her the space to tell her story. She never realized how difficult it had become for her to open up and discuss her situation until she began narrating her experiences to the social worker. She was also surprised by the sense of clarity that began to form the moment she allwoed herself to verbalize her fears and examine her situation.

"It took some time, but the sessions with the social worker allowed me to see my situation more clearly, and the feeling of being trapped began to fade away," explains Sarah.

"We created an action plan, and I began to visit the center regularly for individual sessions and group activities. Recently, I finally made the decision to take legal action against my tormentor, and I'm seeking the help of an external organization," she added.

The first step of the action plan was for Sarah to free herself of the cycle of abuse. After carefully weighing her options, she made the decision to relocate to her mother's house, where her sister also lives. It was there that Sarah began to find some semblance of stability after years of living in fear.

The new sense of empowerment she feels after her ordeal has made her more determined to support other women who may feel trapped in similar situations. As she puts it, "I have made a promise to myself to never again stay silent and to help other women who put up with such abuse and feel as though they have no choice."

⁶⁶ He just snapped. He has always been violent, but something was different about the way he looked at me at that moment. Seconds later he was on top of me, strangling me with all his strength. He meant to kill me.

Sarah from Daraa Governorate, Syria

Sarah has been receiving services at a women and girls safe space operated by UNFPA from cross-border Jordan.

REPORT

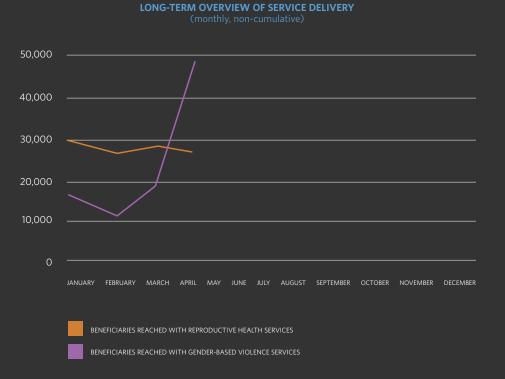
CROSS-BORDER TURKEY

REPRODUCTIVE HEALTH

INDICATOR SINCE JANUARY Beneficiaries reached with reproductive health services 84,276 Family planning consultations 31,241 Normal/assisted vaginal deliveries 3,718 **C-Sections** 1,582 25,213 Ante-natal care consultations 4,581 Post-natal care consultations Health facilities that provide Emergency Obstetric Care 9 Primary healthcare facilities 10 11 Functional mobile clinics 43 People trained on RH-related topics

GENDER-BASED VIOLENCE

INDICATORSINCE JANUARYFunctional women and girls safe spaces (WGSS)11Beneficiaries reached with GBV programming / services47,789Population reached with Dignity Kits16,427Beneficiaries provided with GBV case management302Beneficiaries reached with GBV awareness messages22,377People trained on GBV-related topics170



UNFPA Turkey's Cross-Border Program has continued to support 9 EmOC, 10 PHCs, 11 Mobile clinics and 11 WGSS to deliver comprehensive RH and GBV services in hard to reach areas of Syria.

A large proportion of services provided were done so in the context of emergency response for newly displaced populations arriving in Idleb and Aleppo. An upsurge of armed conflict in the besieged areas of operation was experienced in April, which led to a reduction in the number of beneficiaries accessing services in those areas due to reduced accessibility.

Services for adolescents have also increased this month due to extensive awareness raising, improved physical accessibility as well as training and sensitization of staff at the supported facilities. UNFPA will continue to track progress in this area and work with implementing partners to strengthening services for vulnerable groups.

66

I was two years old when I lost my ability to speak. This had an increasing impact on my happiness and well-being as I grew older.

I wanted to go to school and my mother took me to enroll at the local school where I lived, but the administration would not grant me admission to the school, on the grounds that they did not receive children with special needs.

That incident impacted my self-confidence and identity, I suffered from depression for a long time. One day I was told by a friend about the Center for Women's Creativity in the Hama Governorate but I was afraid of going there, in-case they would reject me as well.

At some point, I summoned the courage to visit the center, and I received a very warm welcome from the team. This gave me a sense of security and optimism that I had not felt before. I have since received trainings in which I've invested considerable time and effort, and which have now given me skills to work. I am more confident and self-sufficient.

So I would like to extend my thanks to the team at the Center for Women's Creativity, and especially to the trainers her their efforts and the special care they have provided me. I now realize that nothing is impossible in life when we are determined to achieving our goals. We should not let depression defeat us, all of us should get an opportunity to discover our strengths. Today I am working towards opening a beauty salon for women and I am an active and productive member of the community.

Roya from Hama Governorate, Syria Roya has been receiving services at a women and girls safe space operated by UNFPA form cross-border Turkey.



REPRODUCTIVE HEALTH

INDICATOR

Beneficiaries reached with reproductive health services

SINCE JANUARY 344

SINCE JANUARY

GENDER-BASED VIOLENCE

INDICATOR

Functional women and girls safe spaces (WGSS)	9
Beneficiaries reached with GBV programming / services	2,641
Beneficiaries provided with GBV case management	389
Beneficiaries reached with GBV awareness messages	1,050

YOUTH SERVICES

INDICATOR

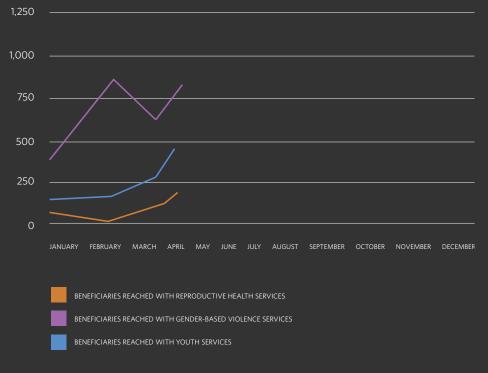
Beneficiaries reached with youth programming

SINCE JANUARY 861

Egypt remains a destination and transit country for refugees and asylum-seekers, most of whom live in urban areas. The country continues to generously host Syrian refugees, despite the absence of a land border with Syria. Currently, there are 127,414 Syrian refugees registered with UNHCR Egypt.

Egypt constitutes a successful model with regards to the social inclusiveness dimension. The country hosts nearly half a million Syrians who live alongside Egyptians in various areas, sharing public services, resources and many of the privileges afforded to local citizens.

Among refugees in Egypt, women and girls, boys, adolescents, and unaccompanied and separated children face disproportionate risks. According to UNHCR, 94 percent of the Syrian population in Egypt have been identified as either highly or severely vulnerable. UNFPA Egypt continnues to provide essential services to Syrians, focusing on prevailing social predicaments associated with forced migration such as various forms of genderbased violence. LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly, non-cumulative)



A PLACE SAFER THAN ONE'S HOME

Rofaa is a 33-year-old gynecologist with 2 children. She was married for about 5 years. Her ex-husband was quite controlling from the moment they met, but the abuse started after she had her first child, and it only got worse. After years of enduring beatings and physical abuse, Rofaa decided to leave her husband.

Rofaa lived with her mother and sister until they escaped the conflict and came to Egypt in 2016. The past two years of living in Egypt were rather challenging, during which time her sister grappled with severe depression before finally being diagnosed with bipolar disorder. After the diagnosis, Rofaa's life became even more complicated. Her sister routinely became violent, physically assaulting Rofaa and her children.

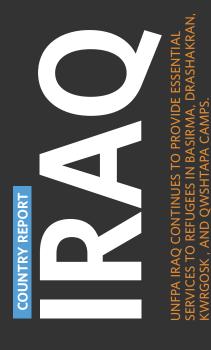
"When the abuse comes from someone so close to you, someone you love and whom you know has little to no control over their outbursts, you feel completely trapped," explains Rofaa. "To escape the torment at home and keep my children safe, I would roam the streets with them all day and only return home during the night."

Eventually, Rofaa learned of the Women and Girls Safe Space operated by UNFPA Egypt, where she sought refuge with her children around four months ago. The center was a warm and friendly place — a secret haven where found the support necessary to express herself. As Rofaa describes it, it is "a place safer than her own home."

The social workers approached Rofaa and allowed her to tell her story. They referred her to a psychologist who worked closely with her on understanding the roots of her situation and examining potential solutions with which she felt comfortable. As her counseling sessions progressed, she began recovering from her many traumatic experiences. Her mother and sister also came to the space a month after her first visit. Her sister was referred to the psychiatrist to receive medication and psychotherapy counselling, while Rofaa was enrolled in psychodrama and yoga sessions that helped her express her feelings and alleviated her stress. She also forged ties with the women who frequented the center.

The case management team at the center developed a plan for her, the primary objective of which was to bolster her self-esteem and sense of empowerment. This was achieved by giving her a chance to lecture at the center about hygiene and the female menstrual cycle after receiving a series of trainings on these topics.

"It is difficult to overstate the benefits this experience has had on my life," explains Rofaa. "My entire self-image has been restored, and my sister is on the road to recovery from depression, which alone has had a massive positive impact on our lives at home."



Currently, some 250,000 Syrian refugees are seeking safety in camps and host communities in Iraq. UNFPA supports eleven women community centres, sixteen health facilities, and five youth centres serving the refugee population in the Kurdistan region of Iraq. UNFPA ensures that antenatal, postnatal, and emergency obstetric referral services are offered. In addition, UNFPA provides reproductive health kits and supports referral services.

Despite the availability of reproductive health (RH) services to all women, some communities continue to refuse all forms of reproductive health services. To address this, the RH unit staff conduct outreach visit to the pregnant women to provide information at the very least.

UNFPA in Iraq continues to coordinate with other gender-based violence (GBV) prevention and response service providers targeting refugees. Staff from the RH Units have been trained on the GBV Standard Operating Procedures for the Kurdistan Region, reporting an increased ability to identify GBV cases, provide information, and make referrals to service providers using a survivor centred approach.

Response activities are targeting refugees in the eight primary camps in Iraq: Basirma, Drashakran, Kwrgosk, and Qwshtapa in Erbil Governorate, Domiz 1, Domiz 2, Gawilan in Dohuk Governorate and Arbat in Suleymania Governorate with programs that span vocational training for women, awareness sessions for women and adolescent girls, lectures on topics related to reproductive health and gender-based violence, and various community engagement activities.

REPRODUCTIVE HEALTH

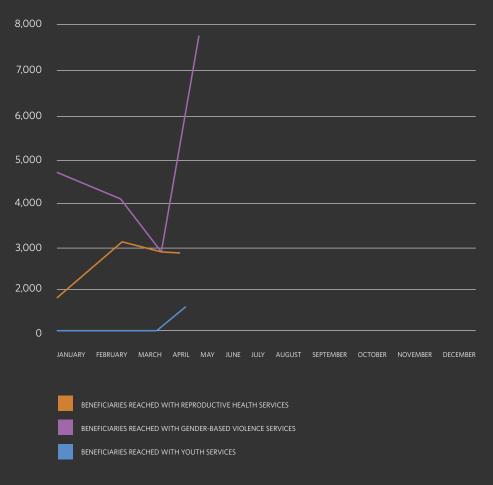
INDICATOR

Beneficiaries reached with reproductive health services	9,831
Family planning consultations	3,225
Normal/assisted vaginal deliveries	271
C-Sections	595
Ante-natal care consultations	1,360
Post-natal care consultations	843
Health facilities that provide Emergency Obstetric Care	16
Primary healthcare facilities	8

GENDER-BASED VIOLENCE

INDICATORSINCE JANUARYFunctional women and girls safe spaces (WGSS)9Beneficiaries reached with GBV programming / services18,726Popuation reached with Dignity Kits64Beneficiaries provided with GBV case management626Beneficiaries reached with GBV awareness messages7,525





SINCE JANUARY

HIGHLIGHT THE COMFORT IN KNOWING YOU ARE NOT ALONE AFTER LOSING HER FAMILY IN THE WAR AND BEING ABANDONED BY HER HUSBAND SHORTLY

AFTER HER MARRIAGE, GHALIA FOUND THE SUPPORT NEEDED TO REGAIN FAITH IN HUMANITY

Ghalia, 33 from Aleppo, is one of the thousands of people who found themselves running for their lives in the wake of the battle of Al-Hasakah, north-east of Syria, in 2016. With her uncle's family, she settled in Donmiz 2 camp, in Duhok Governorate in the Kurdistan region of Iraq.

When her parents and brother were killed during an airstrike in Aleppo a few years ago, she went on to live with her uncle's family in Al-Hasakeh. A few months later, she fell in love with an Iraqi man and, given the security situation in Syria at the time, they proceeded with a customary marriage.

Seven months into the marriage, the man she trusted abandoned her, stealing her belongings which she had inherited from her mother and the little money she had saved from her work at a bakery in Al-Hasakeh.

'I lost everything. My husband not only took my physical belongings but he also took away what little sense of stability, safety, and happiness I had. I couldn't go to court to fight for my rights given that I had no legal document supporting my story. To top it all, I was pregnant when he left me. His actions took a toll on my health and I lost the baby. Everything went downhill," says Ghalia. To add to her misery, the increased fighting in Al-Hasakeh forced her and her uncle's family to flee to Domiz 2 camp. The young lady suffered from a nervous breakdown soon after as displacement led her to attempt suicide on many occasions.

Soon after, her uncle's wife reached out to the UNFPA-supported Women's Centre in the camp seeking their help. The social workers immediately sat with Ghalia and listened to her story.

"It took a while for me to trust the social workers. I only attended the first meeting because my uncle's wife urged me to go," explains Ghalia.

"A few sessions later, I saw empathy and support from the social workers. They started giving me advice on how to act and how to think when I feel like I am heading to a dark place in my mind. They told me that I wasn't the only one who was feeling this way; I didn't believe them at first".

Ghalia began attending the awareness sessions and life skills courses offered by the Women's Centre where she met other women with their own interesting story each: "I started developing a sense of belonging; I no longer felt alone and began enjoying the company of the girls, especially when we opened up and I discovered that they too have stories similar to mine."

Meeting individuals who had gone through the same challenges gave Ghalia the confidence and strength she needed to move forward and stop dwelling on what initially broke her.

"I now work as a volunteer in the Centre. I get to tell my story, talk about my depression to those who are going through a rough patch and share my lessons learnt from this experience, with the hope that it can give them a sense of relief," she says with a proud smile on her face.

Donmiz 2 camp is home to close to 8,700 Syrian refugees who fled the war seeking a safe haven. UNFPA has one maternity unit, a Reproductive Health clinic, a youth center and a women's social centre that is providing counseling, psychosocial support, awareness sessions, recreational activities and life-skills courses to hundreds of women on a monthly basis.

66

I lost everything. My husband not only took my physical belongings but he also took away what little sense of stability, safety, and happiness I had. I couldn't go to court to fight for my rights given that I had no legal document supporting my story.

Ghalia from Aleppo Governorate, Syria

Ghalia has been receiving services at a women and girls safe space operated by UNFPA Iraq.



Jordan is currently hosting more than 1.3 million Syrians, including 655,000 registered refugees, who face increasing vulnerability as their savings, assets and resources are long exhausted. Providing for their needs and ensuring their access to basic reproductive health and genderbased violence services is among the top priorities of UNFPA Jordan.

13.2% of the overall population.

Approximately 79% of Syrian registered refugees, representing 516,000 people, live in host communities in urban and rural areas of Jordan. The remaining 21% is settled in camps, either in Azraq, Emirati Jordanian Camp, or Za'atari. The highest concentration of refugees is found in the northern governorates of Amman, Irbid, Mafraq and Zarqa.

UNFPA Jordan has been providing essential reproductive health and gender-based violence prevention services to Syrian refugees throughout the kingdom, whether in refugee camps or in host communities.

REPRODUCTIVE HEALTH

INDICATOR

Beneficiaries reached with reproductive health services	49,115
Family planning consultations	8,459
Normal/assisted vaginal deliveries	563
Ante-natal care consultations	13,278
Post-natal care consultations provided	3,328
Health facilities that provide Emergency Obstetric Care	3
Primary healthcare facilities	15

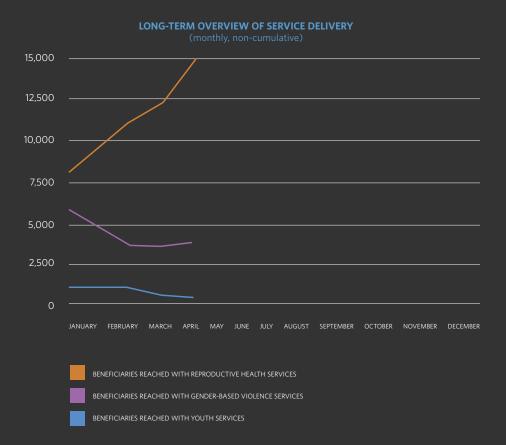
GENDER-BASED VIOLENCE

INDICATOR

Functional women and girls safe spaces (WGSS)	20
Beneficiaries reached with GBV programming / services	12,672
Beneficiaries provided with GBV case management	2,054
Beneficiaries reached with GBV awareness messages	5,017

YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	1
Beneficiaries reached with youth programming	3,623
People trained on youth-related topics	79



SINCE JANUARY

SINCE JANUARY

EMAN'S JOURNEY FINDING THE COURAGE TO FIGHT THE FIGHT

Eman, a Syrian refugee living in Jordan, contacted the hotline of the UNFPA-supported Jordanian Women's Union (JWU) seeking help. The social worker started by assessing her needs and the risks associated with her case. Eman was enduring a life of daily violence at the hands of her husband, who had constantly threatened her that he would take her children away from her if she thinks about leaving him.

"The fear of losing my children was unbearable, and I felt completely powerless and trapped," explains Eman. "I had no choice but to endure the horrible life he has made for us. At some point, that proved to be impossible. I had to reach out to someone who had the power to help."

Eman began by seeking the support of her family, who were not able to offer her a safe haven as they had no means of accommodating her children. Eman visited the JWU center, where a counselor took on her case and began listening to her story. They built an immediate rapport, and she found herself quickly opening up about the many forms of violence to which her husband had subjected her.

The counselor explained to Eman the different options she had and acquired her consent to be referred to an attorney for legal counseling with regards to the custody of her children. After several sessions with the attorney, Eman became more informed of her rights, which someone softened her fear of losing her children. Eman also undertook individual sessions with the counselor, which empowered her and allowed her to tap into her inherent strengths. She became more determined to file for divorce and start a new life.

The counselor contacted Eman's parents upon her consent to explain to them what Eman had been going through and how they can help her to live a life free of violence. Eman's mother was quite supportive, which gave her the push she needed to initiate the legal battle for her freedom.

After a series of mediation hearings, Eman was finally able to divorce her husband, receiving alimony and child support as well as full custody. She is now enrolled in economic empowerment and recreational activities at the center to cultivate the skills required to become financially independent and support her family.

"I feel free," explains Eman. "I am so happy that I summoned the courage to fight this fight for my children, who can enjoy the peace of a loving home. I am closer to my family than ever and will never again allow myself to be trapped again."



Since the onset of the Syria crisis in 2011, Lebanon has continued to be a generous host, welcoming around 1.5 million displaced Syrians — the highest per capita number of refugees in the world.

Given the significant refugee-percapita ratio and the undue strain the crisis has placed on Lebanon's economy and services, UNFPA Lebanon continues to provide a wide array of prgrammes and services to displaced Syrians in Lebanon.

More than 75 percent of refugees in Lebanon are women and girls, making it all the more vital to provide them with essential reproductive health services as well as programmes to respond to and prevent gender-based violence.

Since the beginning of the crisis, UNFPA Lebanon has continually worked on enhancing coordination, expanding partnerships, and assessing needs in close collaboration with key humanitarian actors including pertinent agencies within the United Nations.

REPRODUCTIVE HEALTH

INDICATOR

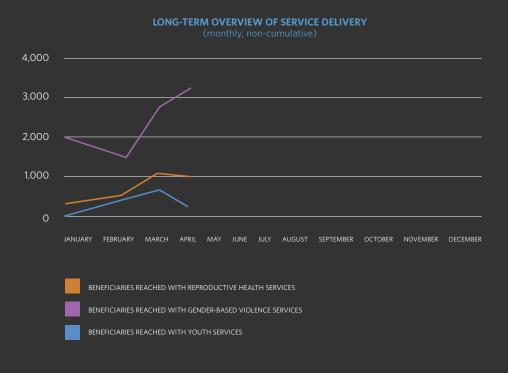
Beneficiaries reached with reproductive health services	3,044
Family planning consultations	881
Normal/assisted vaginal deliveries	7
C-Sections	79
Ante-natal care consultations	830
Post-natal care consultations provided	241
Primary healthcare facilities	3
Mobile clinics	1

GENDER-BASED VIOLENCE

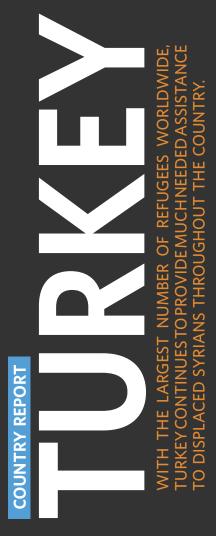
INDICATORSINCE JANUARYFunctional women and girls safe spaces (WGSS)3Beneficiaries reached with GBV programming / services9,530Beneficiaries provided with GBV case management28Beneficiaries reached with GBV awareness messages8,779

YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	1
Beneficiaries reached with youth programming	945



SINCE JANUARY



Turkey hosts the largest number of refugees and asylum-seekers in the world, which includes more than 3.5 million Syrians registered with UNHCR.

Most refugees in Turkey are situated in host communities around the country, which has stretched the absorptive capacities of many host communities and resulted in tensions between refugees and host community members.

As the refugee crisis in Turkey becomes more protracted, delivering support to national and local systems, with a strong focus on supporting women, children and youth, is more vital than ever to reinforce the country's resilience.

UNFPA Turkey continues to provide essential reproductive health and gender-based violence services to Syrian communities in need in Ankara, Gaziantep, and Istanbul, addressing assistance gaps and organizing farreaching programs that serve to protect vulnerable members of the community.

REPRODUCTIVE HEALTH

INDICATOR Beneficiaries reached with reproductive health services Family planning consultations Ante-natal care consultations Post-natal care consultations provided Primary healthcare facilities People trained on RH-related topics

GENDER-BASED VIOLENCE

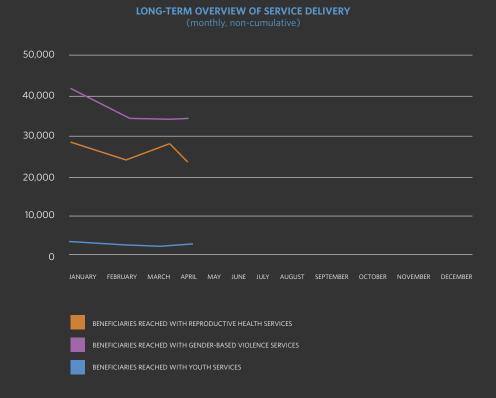
INDICATORSINCE JANUARYFunctional women and girls safe spaces (WGSS)35Beneficiaries reached with GBV programming / services119,436Popuation reached with Dignity Kits128,724Beneficiaries provided with GBV case management823Beneficiaries reached with GBV awareness messages30,281People trained on GBV-related topics82

YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	4
Beneficiaries reached with youth programming	8,427

OTHER

INDICATORSINCE JANUARYRefugee service units5



SINCE JANUARY

82,106

28,035

8,132

3.324

35

325

HIGHLIGHT BUILDING A GOOD LIFE FROM THE ASHES OF WAR WHEN THE WAR IN SYRIA SHATTERED HER SENSE OF STABILITY, NOUR SOUGHT REFUGE IN TURKEY IN THE HOPE OF CARVING A NEW LIFE FOR HERSELF AND HER REMAINING CHILDREN.

Nour is a 50-year-old Syrian woman with six children. She had gotten married in her early twenties while attending college in Syria.

Shortly after her marriage, she became pregnant with her first child, at which point she had to put her education on hold, but she was determined to become a college graduate and returned to complete her degree in computer engineering. She was also an active volunteer at various humanitarian organizations in Syria and was committed to making a positive difference in her community.

"We built a fairly normal and healthy life for ourselves," explains Nour. "My husband and I both had stable jobs, and my children had their entire lives in front of them with what seemed like infinite possibilities. Then the war came and our lives were turned upside down."

One night, during the early years of the conflicts in Syria, a missile landed on Nour's home, which collapsed while she and her family slept, killing her husband and eldest son and trapping the rest of her children in the rubble for days.

It was at that point that she and her surviving children fled to Turkey, with the exception of her middle child who at the time was attending a university in Aleppo.

"Our problems continued after the move to Turkey," explains Nour. "One of my sons travelled to Europe illegally by sea, which left me heartbroken with four children in a strange land and a slew of seemingly impossible challenges. I literally collapsed inside."

Nour struggled with depression for some time following her son's departure. The language barrier had made her life in Turkey beyond difficult, where stable livelihood and community support seemed impossible.

It was then that she decided to seek the help of a UNFPA-supported Women and Girls Safe Space. There, she was interviewed by a social to whom she opened up about her situation; the dire financial straits, her inability to enroll her children in school, and her growing sense of isolation in Turkey. "The social worker was immensely helpful," explains Nour. "I was referred to the Kızılay Community Center to receive financial support, while my children were successfully enrolled at school with the help of the Altındag District National Education Directorate. It felt too good to be true. I was also receiving support by a psychologist to deal with the emotional trauma of the past years, which allowed me to begin the difficult healing process I so desperately needed."

To help her establish roots in the community, Nour was also offered to work as a health mediator in the center, which she has been doing admirably for than a year.

She had undergone a wide array of capacity building programs that allowed her to cultivate the skills needed to excel at her job, which she explains has been a key element in her recovery. As she puts it, "helping others brings me joy, and I cannot be happier now that my children can enjoy the benefits of a stable income."

66 We built a fairly normal and healthy life for ourselves. My husband and I both had stable jobs, and my children had their entire lives in front of them with what seemed like infinite possibilities. Then the war came and our lives were turned upside down.

Nour from Aleppo Governorate, Syria Nour has been receiving services at a women and girls safe space operated by UNFPA Turkey. **EGIONAL SITUATION REPORT ON THE SYRIA CRISIS**

STANDARDS ARE IN PLACE TO PREVENT AND RESPOND TO GENDER-BASED VIOLENCE IN EMERGENCOES NFPA CONTINUES TO LEAD THE GBV AREA OF RESPONSIBILITY (GBV AOR), ENSURING THAT MINIMI

To ensure good coordination when emergencies occur, the Inter-Agency Standing Committee (IASC) has introduced the Cluster Approach. Clusters are groups of humanitarian organizations, both UN and non-UN, in each of the main sectors of humanitarian action such as water, health and logistics. In contexts where the IASC Cluster Approach has been activated, UNFPA is mandated to co-lead the GBV Area of Responsibility (GBV AoR), a body part of the Global Protection Cluster, which is led by UNHCR.

As lead, UNFPA is accountable for working closely with national authorities, partners and communities, to ensure that minimum standards are in place to prevent and respond to gender-based violence in emergencies. In non-clustered and refugee contexts, UNFPA is co-leading with UNHCR.

In the Whole of Syria, UNFPA leads the GBV coordination mechanisms in Syria, in Turkey with Global communities and in Jordan with Relief International. In Iraq, UNFPA and IMC lead the GBV subcluster. In Jordan and Lebanon, UNFPA co -leads the refugee GBV response with UNHCR.

In April 2018, The GBV Sub-Cluster (SC) in cross-border Turkey finalized its Referral Pathways for the 15 districts in areas coordinated though cross-border where GBV response services are available, and shared them with the GBV SC members signatories of the SOPs. The new Referral Pathway template was presented to the large GBV SC during April's meeting, where an exercise on how to use the document was also conducted. Moreover, The GBV SC finalized the 2018 Capacity Building Plan, and organized a training for case workers based in Syria and their supervisors based in Turkey on case management with specific groups: care for child survivors, survivors with disabilities and male survivors. The training, to be completed on May 5 (for 11 days), was organized in Gaziantep and kicked off on 24 April. The first week was attended by 25 participants from 16 organizations.

A Core Group meeting was also held in Gaziantep to establish environment for further discussion of the key issues of Protection and its sub-working groups (SGBV and Child Protection), and to accelerate the decision making of the monthly protection working group in Gaziantep. The meeting was headed by three sectoral leads (Protection, SGBV and Child Protection) and elected 5 members of the Protection Working Group on a rotational base for six months. Moreover, a meeting for the Inter-Sector working group was held in Gaziantep with the participation of sector leads in order to create an environment for further cooperation and coordination within South-East Turkey.

In Lebanon, UNFPA co-led with UNHCR and MoSA (Ministry of Social Affairs) the April monthly SGBV Task Force meeting. The meeting was an opportunity to discuss challenges related to safe referrals of GBV survivors to mental health service providers and to carry out FGDs with lawyers on the gender mapping carried out jointly by UNFPA, UNDP and UN Women.

On the sidelines of the Supporting the Future of Syria and the Region conference in Brussels, UNFPA collaborated with several international agencies to host a side event focusing on women's involvement in leading the humanitarian response and building resilience in Syria. The event featured ten prominent Syrian women who discussed their different individual perspectives on the conflict, offering key insights on how women must continue to play a key role in the response and in rebuilding the future of Syria.



ぶ $\overline{\mathsf{O}}$ ŏ ഷ ō 0 O J SUPPO IJ BEC ഗ ш EROU I Ю GEN \overline{S} ய $\overline{\mathbf{v}}$ 0 כ 0 Т \overline{O} Ľ \mathbf{m} IJ POSSI BEEN O SUPP(**REPORT ON THE SYRIA CRISIS** ш BEEN \geq Т HAVE 0 0 MM 0 0 **REGIONAL SITUATION** ŏ ORK VORK

CURRENT DONORS

Austria, Canada, Denmark, The European Commission, Finland, France, Italy, Japan, Republic of Korea, Norway, Sweden, and the United Kingdom.

Private sector: MBC and Samsung Electronics, and TOMS.

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

IMPLEMENTING PARTNERS

In Syria: Ministry of Health (MoH), Ministry of Higher Education (MOHE), Syrian Arab Red Crescent (SARC), Syrian Family Planning Association (SFPA), Agha Khan Foundation, Masyaf Charitable Association, Al Bir and Social Welfare Hama, Al Bir Charitable and Sociable Qamishly, Pan Armenian Charity Association, Al-Ihsan Charity Association, Al Bir and Al-Ihsan Charitable Association in Ras Alain, Albatoul Charity for Humanitarian Services, Islamic Charity Association – Aoun for Relief and Developments (AOUN), Monastery of Saint James the Mutilated (MSJM), Nour Foundation for Relief and Development, Syrian Catholic Archbishopric – Relief and Development Center (RDC), Syrian Commission for Family Affairs and Population, SCS, SEBC.

In Lebanon: Ministry of Public Health, Ministry of Social A airs, Lebanon Family Planning Association for Development & Family Empowerment (LFPADE), Amel Association, International Medical Corps, KAFA ("Enough Violence and Exploitation"), INTERSOS, Makkased Philanthropic Association of Beirut, Development Action without Borders-Naba'a, RET Liban, NABAD, Heartland Alliance, Relief & Development, Maarouf Saad Social and Cultural Foundation, Danish Refugee Council (DRC).

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 A airs), Questscope.

Jordan Cross-Border: Relief International, Syrian American Medical Society (SAMS).

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

In Egypt: Ministry of Health and Population (MOHP), Ministry of Youth and Sport (MoYS), Arab Medical Union (AMU), Care International.

In Turkey: The Disaster and Emergency Management Presidency (AFAD) of the Prime Ministry of Turkey, Ministry of Foreign A airs (MoFA), and Ministry of Health (MoH), Ministry of Family and Social Polices (MoFSP), ASAM (Association for Solidarity with Asylum Seekers and Migrants), HÜKSAM (Hacettepe University Women's Research and Implementation Center), KAMER (Women's Center Foundation), CVF (Community Volunteers Foundation), Osmangazi University, PYD (Positive Life Association), SPoD (Social Policies, Gender Identity, and Sexual Orientation Studies Association), Bilgi University, Red Umbrella, MUDEM, Harran University.

Turkey Cross-Border: Ihsan RD, Syrian Expatriate Medical Association (SEMA), Syrian American Medical Society (SAMS), CARE International, Shafak.

CONTACT INFORMATION

Jennifer Miquel Head of Regional Syria Response Hub, a.i. miquel@unfpa.org

(962) 79 575 6755

RELEVANT RESOURCES

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

