

UNFPA has proudly committed to three transformative results by 2030: an end to preventable maternal death, an end to unmet need for family planning, and certainly, an end to the rampant gender-based violence and all harmful practices against women and girls, especially an end to femicidio. All based on a foundation of systematic population data. Data data data, to make the invisible visible.

UNFPA Executive Director, Dr. Natalia Kanem

Regional Conference on Population and Development in Latin America and the Caribbean

August 7, 2018

REGIONAL SITUATION REPORT ON THE SYRIA CRISIS

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 cross-border 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.

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 $^{^{\}star}$ Cross-border operations from Jordan have ceased as of July 2018 due to the intensifying conflicts in Southern Syria.

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	SINCE JANO
Beneficiaries reached with reproductive health services	1,483,537
Family planning consultations	634,644
Normal / assisted vaginal deliveries	42,143
C-Sections	56,766
Ante-natal care consultations	445,659
Post-natal care consultations	19,012
People trained on RH-related topics	2,707

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Beneficiaries reached with GBV programming / services	562,081
Population reached with Dignity Kits	274,801
Beneficiaries provided with GBV case management	13,617
Beneficiaries reached with GBV awareness messages	259,900
People trained on GBV-related topics	2,269

YOUTH SERVICES

INDICATOR

Beneficiaries reached with youth programming Beneficiaries trained on youth-related topics





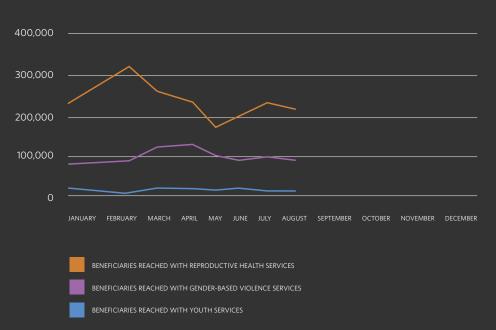


SINCE JANUARY

78,256

1,655

LONG-TERM OVERVIEW OF SERVICE DELIVERY



 $^{^{\}star}$ Cross-border operations from Jordan have ceased as of July 2018 due to the intensifying conflicts in Southern Syria.

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

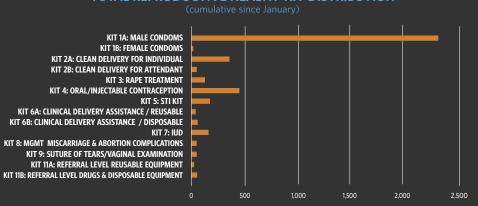
REPRODUCTIVE HEALTH SERVICES / MALE REPRODUCTIVE HEALTH SERVICES / FEMALE GENDER-BASED VIOLENCE SERVICES / MALE GENDER-BASED VIOLENCE SERVICES / FEMALE YOUTH BENEFICIARIES / FEMALE YOUTH BENEFICIARIES / MALE FAMILY PLANNING CONSULTATIONS / MALE FAMILY PLANNING CONSULTATIONS / FEMALE DIGNITY KITS / MALE DIGNITY KITS / FEMALE 75% ■ GBV CASE MANAGEMENT / MALE GBV CASE MANAGEMENT / FEMALE BENEFICIARIES REACHED WITH GBV AWARENESS / MALE BENEFICIARIES REACHED WITH GBV AWARENESS / FEMALE TOTAL MALE TRAINEES TOTAL FEMALE TRAINEES

KEY INDICATORS DISAGGREGATED BY SEX

Through its 124 Women and Girls Safe Spaces, 143 primary healthcare facilities, and 38 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.

TOTAL REPRODUCTIVE HEALTH KIT DISTRIBUTION



UNFPA Syria continues to collaborate with local partners to respond to the needs of IDPs' fleeing their homes in the southwest Syria, including Daraa, Sweida and Quneitra.

With mobile and static established in Izraa, Sanameen, Jbab, as well as in shelters in Daraa and Sweida, efforts are ongoing to ensure that those fleeing the conflict have access to basic and emergency reproductive health services.

UNFPA continued to organize a variety of training programs nationwide, including a youth training program in Homs covering reproductive health and gender-based violence, as well as a women's empowerment training program in Aleppo for gender-basedviolence survivors.

SYRIA COUNTRY OFFICE

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	1,102,572
Family planning consultations	509,143
Normal/assisted vaginal deliveries	44,023
C-Sections	38,108
Ante-natal care consultations	349,716
Post-natal care consultations	52,892
Health facilities that provide Emergency Obstetric Care	27
Primary healthcare facilities	70
Partially-supported primary healthcare facilities	917
Mobile clinics	73
People trained on RH-related topics	1,439

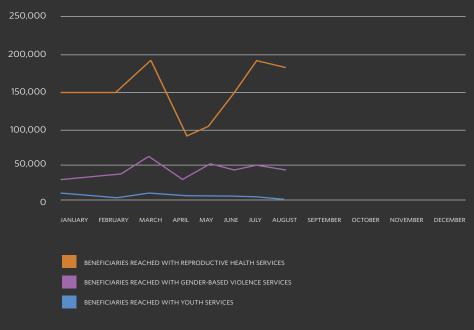
GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	45
Beneficiaries reached with GBV programming / services	239,287
Population reached with Dignity Kits	92,218
Beneficiaries provided with GBV case management	6,350
Beneficiaries reached with GBV awareness messages	125,449
People trained on GBV-related topics	811

YOUTH SERVICES

INDICATOR SINCE JANUARY Functional youth centres Beneficiaries reached with youth programming 57,035

LONG-TERM OVERVIEW OF SERVICE DELIVERY



HIGHLIGHT

STRUGGLES, TEARS AND UNPARALLELED STRENGTH

FOR 15 YEARS, UM ABDULLAH LIVED A LIFE OF DAILY ABUSE AT THE HANDS OF HER HUSBAND, CHOOSING TO BEAR IT IN SILENCE FOR THE SAKE OF HER CHILD. THE DAY FINALLY CAME WHEN SHE DECIDED TO BREAK FREE.

"I feel human again," explained Um Abdullah when she met Zahra, a psychosocial support specialist working at a UNFPA-supported clinic in rural Damascus. "All I needed was someone to help me get my life back."

Um Abdullah's story is filled with struggles, tears and unparalleled strength. She has been a survivor of spousal abuse for more than fifteen years, and it has become apparent that her husband suffers from a psychological disorder that causes irrational bursts of anger and paranoia.

"The violence has been a daily reality for me for many years, but it also became one for my son as well, who suffers from a physical disability that makes him all the more vulnerable," adds Um Abdullah.

"I tried to put up with the suffering and the humiliation for as long as I could. I thought I was doing the right thing for myself and my child, but it became clear that things were going from bad to worse."

When a friend mentioned a nearby clinic supported by UNFPA and advised her to go,

Um Abdullah found the courage to take the step she had avoided for years. She carefully planned her escape, waiting for an ideal opportunity to leave with her son unnoticed.

The violence has been a daily reality for me for many years, but it also became one for my son as well, who suffers from a physical disability that makes him all the more vulnerable.

"Upon arriving, I asked to see a pediatrician and a gynecologist," she explains.

"Even after making the decision to go, I was plagued with fear and doubt. After fifteen long years, even a change for the better can feel overwhelming. As soon as my health checks were done, I felt more at ease, and I asked to see a legal consultant to inquire about divorce proceedings."

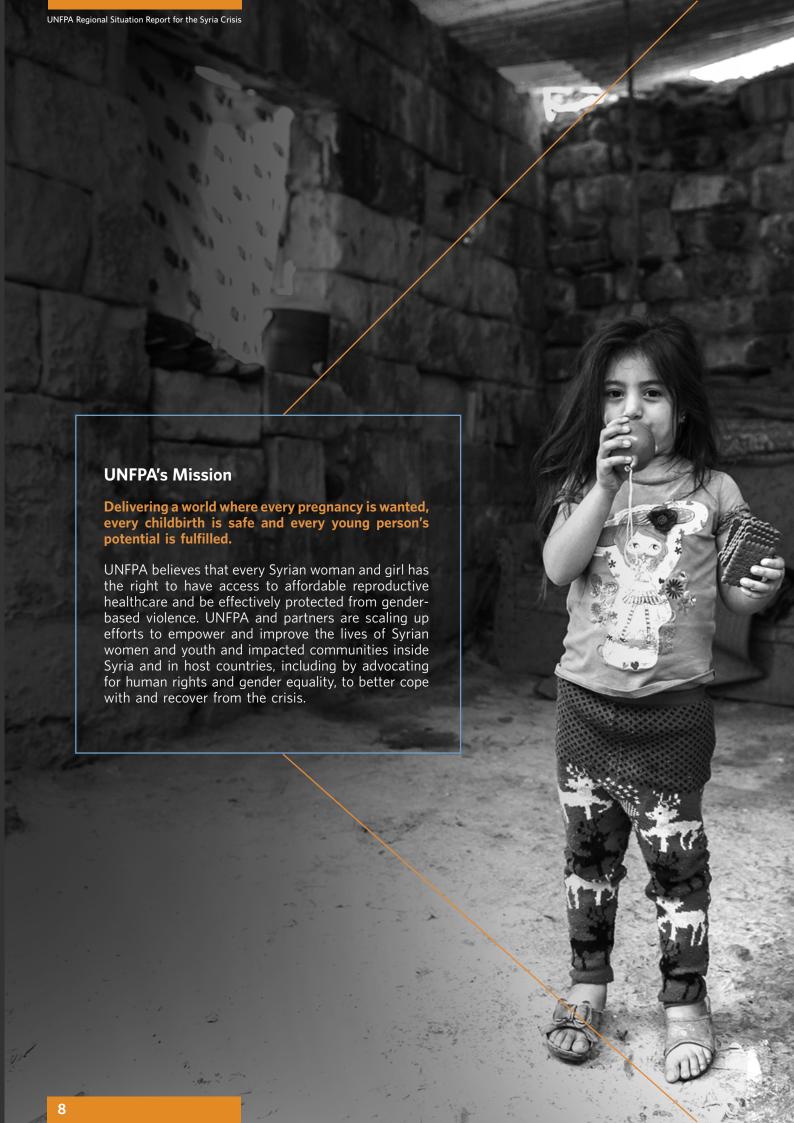
The consultant took Um Abdullah through the legalities of divorce in her case, outlining her options and offering advice on how she can address the challenges she may face throughout the process. His advice proved helpful, as since then she has managed to finalize her divorce and regained control over her life.

"Hard times don't last forever. They must come to an end eventually," she says, noting that her social status and productivity have improved tremendously since her divorce.

She has also become a frequent participant in the center's empowerment and awareness sessions, during which she often shares her story with other women facing similar predicaments.

As she puts it, "No other place offers me this sense of relief. It makes me hope again."





CROSS-BORDER JORDAN

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUAR
Beneficiaries reached with reproductive health services	35,009
Family planning consultations	16,296
Normal/assisted vaginal deliveries	3,757
C-Sections	2,071
Ante-natal care consultations	14,306
Post-natal care consultations	6,129
Health facilities that provide Emergency Obstetric Care	6
Primary healthcare facilities	9
People trained on RH-related topics	107

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUA
Functional women and girls safe spaces (WGSS)	16
Beneficiaries reached with GBV programming / services	10,077
Beneficiaries provided with GBV case management	398
Beneficiaries reached with GBV awareness messages	3,069
People trained on GBV-related topics	59

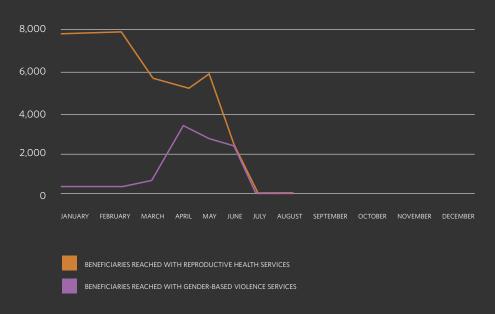
As of July 2018, all UNFPA supported operation through cross-border Jordan have stopped. Because of the intensified operations in Dara, the influx of the IDPs to Quneitra resulted in added pressure on the staff and services, and the women and girls safe spaces were used as shelters by the IDPs. However, partners were able to maintain the continuation of GBV services.

Due to the inevitable communication challenges and the need to protect staff members and the implementing agency, the provision of services was conducted under a "zero paper" policy.

The increased hostilities in Quneitra began to massively affect the provision of services, causing disruptions in communication with staff, the majority of whom became IDPs themselves. Accordingly, no reports were received on the people reached with services in the facilities. Despite the cessation of services, UNFPA has contingency plans in place to deliver necessary shipments once the border-crossing are re-opened.

LONG-TERM OVERVIEW OF SERVICE DELIVERY

(monthly, non-cumulative)



CROSS-BORDER TURKEY

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	133,604
Family planning consultations	60,834
Normal/assisted vaginal deliveries	6,867
C-Sections C-Sections	2,726
Ante-natal care consultations	49,121
Post-natal care consultations	9,539
Health facilities that provide Emergency Obstetric Care	10
Primary healthcare facilities	10
Functional mobile clinics	13
People trained on RH-related topics	125

GENDER-BASED VIOLENCE

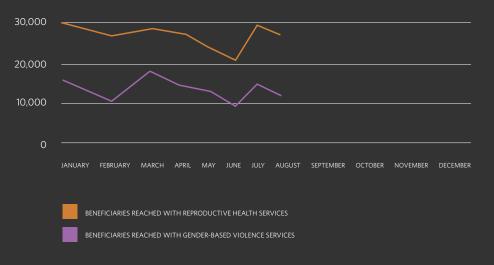
INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	11
Beneficiaries reached with GBV programming / services	78,550
Population reached with Dignity Kits	23,269
Beneficiaries provided with GBV case management	563
Beneficiaries reached with GBV awareness messages	40,647
People trained on GBV-related topics	325

UNFPA's Turkey Cross-Border program has taken significant steps to respond to recent developments in its areas of operation as well as developments within its own programs. Chief among these has been the support for 4 new health facilities in Northern Syria, which brings the total number of supported facilities to 5 CEMONCs, 3 BEMONCs, 10 PHCs, 13 Mobile Clinics and 11 WGSS.

The addition of these new facilities has contributed toward a 36% increase in the number of people receiving RH services from the previous month. Moreover, it has resulted in a larger geographical area of coverage for RH services being provided through the program.

The situation in Northern Syria, particularly Idleb governorate remains tense as security threats in the area continue to pose significant risks to local populations and service providers on the ground. UNFPA is continuing to work with its partners to ensure that all necessary response measures are taken.

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





REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	3,106
Family planning consultations	654
Ante-natal care consultations	133

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	10
Beneficiaries reached with GBV programming / services	9,263
Beneficiaries provided with GBV case management	773
Beneficiaries reached with GBV awareness messages	3,672

YOUTH SERVICES

INDICATOR SINCE JANUARY

Beneficiaries reached with youth programming 1,777

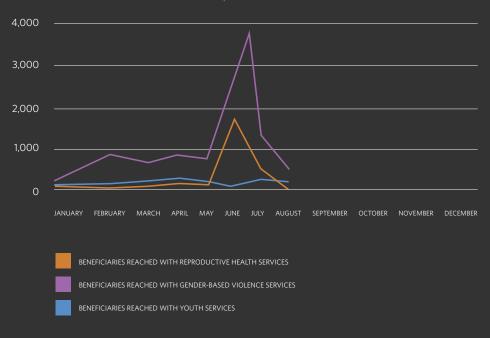
Egypt remains a destination and transit country for refugees and asylum-seekers, most of whom live in urban areas. The country continues to generously host Syrian refugees, despite the absence of a land border with Syria. Currently, there are 127,414 Syrian refugees registered with UNHCR Egypt.

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 gender-based violence.

LONG-TERM OVERVIEW OF SERVICE DELIVERY





THE MOUNTING PRESSURE OF EARLY MARRIAGE

AMAL, A SYRIAN ADOLESCENT GIRL LIVING IN EGYPT, FACED INCREASING PRESSURE FROM HER FAMILY TO MARRY EARLY. AS PRESSURE GAVE WAY TO PHYSICAL VIOLENCE, AMAL FOUND THE HELP SHE NEEDED TO ENSURE HER SAFETY AND FIND THE STRENGTH TO SAY "NO"

"When it comes to marriage, we often find ourselves in a constant battle with our families," explains Amal, a 16-year-old Syrian girl who took refuge in Egypt with her family in 2013. "We are often pressured to marry long before we are ready, and this pressure can quickly turn violent."

Amal has been experiencing mounting physical violence at home due to her refusal to submit to an early marriage. Her parents, like many in their community, have come to see early marriage as a way of ensuring their daughter's safety, particularly given the many socioeconomic challenges that come with living as a refugee.

"This has been going on for a long time. The pressure begins when a girl begins to physically grow into a young woman, and becomes worse with each passing year. They do not understand that we are simply not ready," adds Amal. She had arrived with her twin sister and her mother to a women's center supported by UNFPA, registering for a number of activities that included community theater. Immediately, she became a prominent member of the theater team, building a reputation for being driven, passionate and creative. But the case managers at the center also observed a few disconcerting signs; she consistently exhibited signs of distress and occasional depression, and was seen crying in solitude several times.

"There were days when I simply couldn't help myself," explains Amal. "The sadness would just hit me and I would burst into tears, not knowing what to do or who to turn to. The case managers referred me to one-on-one counseling with a psychologist, and despite my hesitation I agreed."

During the counseling sessions, Amal found a safe outlet for her fears. She explained to the psychologist the pressure she had been under, which eventually turned into physical abuse. The sessions continued for several months with a focus on allowing her to process the trauma and devise positive mechanisms for coping with her situation. She was also enrolled into a teenage support group as well as a series of awareness sessions on early marriage, which only reinforced her views on the subject.

"These sessions have been extremely helpful," adds Amal. "I constantly feel more empowered and able to stand up against the violence I had been experiencing. I also learned how to communicate with my parents more effectively about who I am and what I want in life, which at the moment is to continue my education and explore my passion for theater."

Luckily for Amal, her dedication and impeccable organizational skills resulted in her recruitment as a coordinator for the theater training team, which will serve as a launching pad for what she hopes will be a long and fruitful career.



COUNTRY REPORT UNFPA IRAQ CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES IN BASIRMA, DRASHAKRAN, KWRGOSK, AND QWSHTAPA CAMPS.

Currently, around 250,000 Syrian refugees are seeking safety in camps and host communities in Iraq. UNFPA supports nine women community centres, sixteen health facilities, and four 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 pregnant women to provide essential information.

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	SINCE JANUARY
Beneficiaries reached with reproductive health services	19,213
Family planning consultations	5,802
Normal/assisted vaginal deliveries	4,665
C-Sections	1,200
Ante-natal care consultations	3,872
Post-natal care consultations	1,963
Health facilities that provide Emergency Obstetric Care	16
Primary healthcare facilities	8

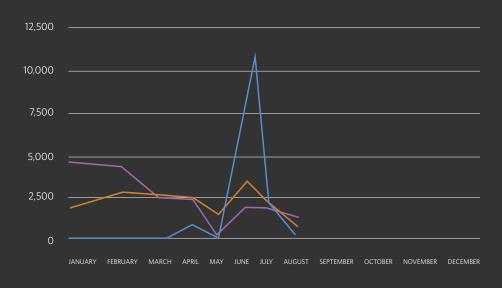
GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	4
Beneficiaries reached with GBV programming / services	24,901
Popuation reached with Dignity Kits	108
Beneficiaries provided with GBV case management	713
Reneficiaries reached with GRV awareness messages	21 170

YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	4
Beneficiaries reached with youth programming	11.032

LONG-TERM OVERVIEW OF SERVICE DELIVERY



BENEFICIARIES REACHED WITH REPRODUCTIVE HEALTH SERVICES

BENEFICIARIES REACHED WITH GENDER-BASED VIOLENCE SERVICES

BENEFICIARIES REACHED WITH YOUTH SERVICES



REPRODUCTIVE HEALTH

INDICATOR	SINCE JANU
Beneficiaries reached with reproductive health services	91,857
Family planning consultations	15,297
Normal/assisted vaginal deliveries	1,187
C-Sections	161
Ante-natal care consultations	27,970
Post-natal care consultations provided	5,824
Health facilities that provide Emergency Obstetric Care	3
Primary healthcare facilities	15
People trained on RH-related topics	214

IARY

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	20
Beneficiaries reached with GBV programming / services	31,821
Beneficiaries reached with Dignity Kits	9,817
Beneficiaries provided with GBV case management	3,313
Beneficiaries reached with GBV awareness messages	10,709
People trained on GBV-related topics	77

YOUTH SERVICES

INDICATOR SINCE JANUARY Functional youth centres 5,766 Beneficiaries reached with youth programming People trained on youth-related topics 290

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.

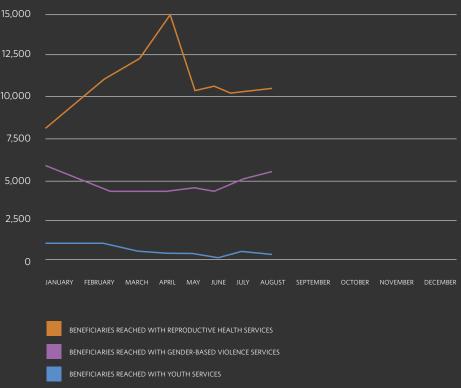
census, the total population of Jordan 1.265 million Syrians, who represent 13.2% of the overall population.

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.

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LONG-TERM OVERVIEW OF SERVICE DELIVERY





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	SINCE JANUARY
Beneficiaries reached with reproductive health services	8,052
Family planning consultations	1,868
Normal/assisted vaginal deliveries	24
C-Sections	109
Ante-natal care consultations	1,896
Post-natal care consultations provided	479
Primary healthcare facilities	5
Mobile clinics	2
People trained on RH-related topics	203

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	9
Beneficiaries reached with GBV programming / services	38,339
Beneficiaries reached with Dignity Kits	4,365
Beneficiaries provided with GBV case management	1,007
Beneficiaries reached with GBV awareness messages	34,376
People trained on GBV-related topics	427

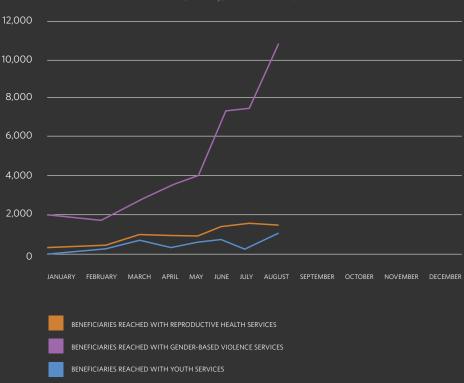
YOUTH SERVICES

INDICATOR SINCE JANUARY

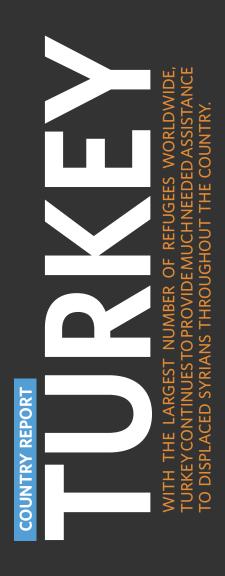
Functional youth centres 12
Beneficiaries reached with youth programming 2,610
People trained on youth-related topics 155

LONG-TERM OVERVIEW OF SERVICE DELIVERY

(monthly, non-cumulative)







REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARI
Beneficiaries reached with reproductive health services	125,133
Family planning consultations	41,046
Ante-natal care consultations	12,951
Post-natal care consultations provided	6,794
Primary healthcare facilities	35
People trained on RH-related topics	726

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARI
Functional women and girls safe spaces (WGSS)	35
Beneficiaries reached with GBV programming / services	164,821
Popuation reached with Dignity Kits	154,949
Beneficiaries provided with GBV case management	1,611
Beneficiaries reached with GBV awareness messages	45,047
People trained on GBV-related topics	579

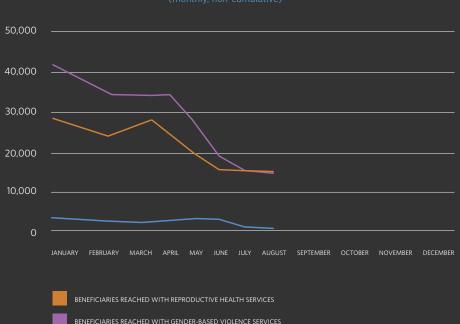
YOUTH SERVICES

١	NDICATOR	SINCE JANUARY
ı	Functional youth centres	4
I	Beneficiaries reached with youth programming	11,068
ı	Number of people trained on youth-related topics	61

OTHER

INDICATOR	SINCE JANUARY
Refugee service units	5

LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly pop-cumulative)



BENEFICIARIES REACHED WITH YOUTH SERVICES

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.

HIGHLIGHT

SWIMMING AGAINST THE ROUGH TIDES

RANDA FACED MUCH STIGMA AFTER FOREGOING MARRIAGE AT A YOUNGER AGE. WHEN SHE FINALLY GOT MARRIED LAST YEAR, SHE FOUND HERSELF TRAPPED IN A CYCLE OF ECONOMIC AND EMOTIONAL ABUSE.

"For a woman to be unmarried at my age is basically unheard of in my community," explains Randa, a 38-year-old Syrian refugee living in Turkey.

Randa was married last year after years of facing constant stigma form her community, many of whom consider it unacceptable for a woman to remain single after a certain age. "It is quite disturbing the way society can coax women and girls into early wedlock. There is a sort of emotional terrorism inflicted upon us, as if by remaining single we are acting as a threat to the community."

Randa's journey so far has been rife with challenges. She had been engaged twice since her arrival on Turkish shores. "I was seeking a long-term commitment that concluded with marriage, and both relationships did not offer me that. When I finally got married last year, I felt a sense of relief, mostly because I finally felt like I found a partner to help me shoulder the challenges I face on a daily basis as a refugee."

Unfortunately, Randa's joy was short-lived. Within months after her marriage, she discovered a darker side to her husband that she had not seen before.

"The first sign of impending disaster was the fact that he constantly withheld money from me and forbade me from leaving the house, which made it difficult for me to have any

semblance of a normal life," explains Randa. "This was followed by frequent verbal and physical abuse. I felt completely trapped."

Eventually, the imprisonment and abuse reached a breaking point, forcing her to escape. She sought the help of a friend, who offered her a temporary shelter away from her husband. "It was clearly a temporary arrangement because my friend is married and lives with her husband. I simply could not stay there for long."

The first sign of impending disaster was the fact that he constantly withheld money from me and forbade me from leaving the house, which made it difficult for me to have f a normal life.

Randa's friend had told her about a Women and Girls Safe Space supported by UNFPA Turkey. Encouraged by the prospect of seeking professional help, she paid the center a visit, and was immediately referred to one-on-one counseling.

"The case manager was gentle and supportive," explains Randa. "I was given extensive information about my legal rights in Turkey and the potential avenues for me to end my marriage. I was also referred to a psychologist who helped me deal with the trauma of my situation. I struggled to open up at first, but the walls eventually came down. I felt much safer as soon as I began sharing my pain and fears."

Randa's intelligence and dedication were immediately noticed by the center. Shortly after her therapy began, she was enrolled in a series of training programs on the health services provided at the center, and today she works at the center full time as a health mediator.

"This job has changed my life," adds Randa. "Something happens to your perception when you go through trauma. You become more aware of the pain of others and you want to reach out to other women in the community to hopefully spare them that pain."

Currently, Randa is undertaking more advanced trainings in Istanbul in the hope of advancing her career as a mediator. She has also embraced a life of activism, participating in awareness sessions to help survivors of gender-based violence break free of the cycle of abuse.



AOR), OF RESPONSIBIL THE GBV AREA TO LEAD

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 coleading 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 August, the GBV Sub-Sector organized a final workshop in Damascus to discuss the GBV Standard Operation Procedures in the presence of different authorities, such as SCFAP, MOSAL, MOFA, Ministry of Interior, the GBV sub sector Technical Working Group, and various GBV partners. With a total of 50 participants, the fruitful dialogue led to additional revision of the document by relevant authorities prior to the final approval and endorsement.

In Cross-Border Turkey, the GBV Sub-Cluster (SC) took the lead in updating the Protection Service Mapping. This showed an increase in total number of organizations mapped (34 to 30) compared to the one conducted in the first half of 2018. GBV services made up 46% of total services mapped. The number of GBV services also increased from 345 of the first half of 2018 to 565 of the second half. The GBV SC also continued to disseminate the new systems to ease the request for referral pathways by non-GBV actors with a presentation of these in a PSEA focused World Food Programme (WFP) workshop and in a OCHA training for field staff. Following each presentation, the GBV SC shared the relevant material via email.

Meanwhile, a South East Turkey Protection Working Group meeting was held in Gaziantep with the objective of working with communities to facilitate coordination mechanisms. Co-chaired by UNFPA, the discussion centered on best practices and challenges of working on the community level.

In Lebanon, a coordination meeting took place that brought together 25 participants from different local and international organizations. The meeting tackled a variety of key focus areas, including the finalization of a joint referral system for the livelihoods sector that will allow GBV service providers to provide full information about the livelihoods services as well as the eligibility criteria that will enable survivors to make an informed decision, whether they would like to access livelihoods services or not. Other topics disucssed include the situation analysis and design of the SGBV sector strategy for 2019, and a thematic presentation on early marriage in which IRC presented the findings of a desk review of the consultancy to develop an early marriage prevention and response toolkit.



EGIONAL SITUATION REPORT ON THE SYRIA CRISIS

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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 Irag: 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), 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.

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RELEVANT RESOURCES

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