

Gender-based Violence Sub-sector Annual Report

Syria Humanitarian Country Team (HCT) Coordinated Response



The Women's and Girls' Safe Space (WGSS) managed by Al Yamameh in Al Hol camp, North-east Syria (NES)



January – December 2021

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A message from UNFPA Representative in Syria

2021 marked the end of the 10th year of the Syrian crisis — one of the largest and longest humanitarian and protection crises in the world. Ongoing hostilities, economic collapse, continued displacement, climate-related challenges, and the lasting effects of the COVID-19 pandemic all converged in 2021 to further exacerbate the risks of gender-based violence (GBV) for women and girls. Women and girls reported higher levels

of violence compared with men spending longer periods of time at home, either due to COVID-19 restrictions or unemployment.¹



The lives of Syrian women and girls are marked by mutually reinforcing forms of GBV and gender discrimination that are eroding the resilience of women and girls and can cause severe physical and mental health consequences, including unwanted pregnancies, permanent disabilities, and increased levels of psychological distress, which can sometimes result in suicide. Social stigmatization continues to affect GBV survivors, including women and girls who survive detention, and marginalized women and girls more broadly². Highly unequal gender practices, often exacerbated by discriminatory attitudes based on age, displacement status, disability and/or marital status, create an envi-

roning environment. I am grateful to all GBV actors and donors for their generous contributions and collective accomplishments to strategically address GBV risk and negative social practices in Syria. Despite the last year's constraints and challenges, these actors continued to adapt and provide GBV services amidst increasing GBV needs in Syria. This report presents a summary of the work that GBV actors have undertaken individually, as well as jointly in 2021.

Despite the collective efforts and achievement of the humanitarian community in Syria, 14.6 million people remain in need of humanitarian assistance in 2022, of which 7.3 million of this population are in need of GBV responses in the Whole of Syria³. This year, approximately 46 millions USD is needed to provide GBV services to women and girls at risk of GBV in Syria⁴.

I renew our calls for additional resources, and remind all GBV actors, donors, humanitarian leadership, community and key stakeholders to commit to ending GBV. GBV programming should be supported as a resilience measure, with greater focus on medium and long-term interventions. This is essential to offsetting the trend of normalization of GBV and to help local communities establish healthier, more equitable community networks. We must ensure the gains we have made so far are sustained.

I look forward to your collaboration to prevent, respond and mitigate GBV risk in 2022.

Mr. Karen Daduryan,
UNFPA Representative in Syria - head of GBV Sub-Sector Lead Agency

¹[2022 Gender Based Violence Advocacy Brief](#)

²[Voices from Syria 2022](#)

³[Humanitarian Needs Overview 2022.](#)

⁴[According to the Humanitarian Response Plan](#)

Introduction

This report covers the annual activities and achievements of the GBV Sub-sector for the period January to December 2021. It presents the Sub-sector achievements against the HRP protection strategic objective, the specific output of the GBV Sub-sector work plan 2020-2021 and response modalities during the COVID-19 pandemic.

The GBV area of responsibility (AoR) (Syria HCT-coordinated response) brings together GBV actors in Government of Syria (GoS)-controlled areas and cross-line to NES to ensure an effective prevention, response and mitigation of GBV, by coordinating response activities, preparedness, needs assessments and planning, strengthening capacity to ensure quality of services and by sharing best practices and harmonized approaches to address GBV risks and concerns. The GBV AoR advocates within the HCT and the humanitarian leadership and assists other sectors to mainstream GBV risk mitigation measures in their humanitarian response.

The GBV AoR is supported by the GBV task force composed of nine members (three UN, three INGO and three NGOs) to provide strategic advice and make decisions for the GBV Sub-sector.

In 2021, 56 GBV actors reported to the GBV Sub-sector. The GBV Sub-sector coordinated through the national coordination mechanism and five Sub-national joint protection and GBV standalone working groups located in Homs, NES, Aleppo, Deir ez-Zor and the south governorates, to deliver multi-sectoral GBV prevention, response and risk mitigation measures. The Sub-sector continued to enhance its leadership role through regular coordination, performance surveys, engagement, capacity building and support to partners and stakeholders. In 2021, 49 coordination meetings were held at the national level and at sub-national levels.

Overview on context and GBV risks

The security situation across GoS-controlled and NES areas remained fragile in 2021. In June, violence surged in Dara'a, where tens of thousands of civilians were caught amidst shelling and ground clashes that resulted in civilian casualties. More than 33,000 civilians were estimated to be displaced to host communities and temporary shelters. Following a ceasefire agreement in September, most displaced were able to return to their homes. Shelling from the areas controlled by armed groups in NES intensified at the end of August, resulting in several casualties and large-scale displacements. Thousands took refuge in community centers, camps and nearby urban and rural areas.

Insecurity continued to prevail in Al Hol and in other camps in NES where 122 casualties (74 males and 48 females) were reported amongst Al Hol camp residents in 2021, including 92 people killed and 30 injured. On 12 November armed men launched an attack on Al Hol reception area, during which two men were killed, one woman injured, and several beaten up. People at risk were subsequently relocated to a safer area.

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Armed conflict, economic deterioration, displacement and the COVID-19 pandemic all have a gendered and disproportionate impact on girls and women in Syria. This is manifested primarily through different forms of GBV, especially early/forced marriage, Intimate Partner Violence (IPV), sexual harassment and sexual violence, including rape, denial of resources, emotional/psychological violence and physical abuse, in all walks of life. According to the [Voices from Syria 2022](#), GBV has no geographical limitation and can occur everywhere, including privately at homes or in public spaces such as schools, streets and markets.

Economic deprivation, lack of livelihood opportunities, discrimination, exclusion, and socio-cultural norms have led to the continued normalization of GBV and severely impacted the psychosocial wellbeing and continued erosion of women's and girls' rights, including those with disabilities.

The COVID-19 pandemic compounded this adversity. Restrictions to contain the disease severely affected employment, income, education, availability of and access to services, including specialized GBV services, limited access to basic reproductive health services and hygiene and other essential supplies, and freedom of movement. These worsening conditions were linked to an increase in GBV within the home, including IPV, early/forced marriage and psychological violence against women and children. According to the Multi Sectoral Needs Assessment (MSNA), 71% of communities assessed reported early-forced marriage is an issue for adolescent girls⁵.

Additionally, sudden displacements and shifting lines of control continue to expose women and girls to heightened risk of GBV and to the likely need of emergency interventions. Fifty-seven percent of communities assessed reported widows are at risk of exclusion from receiving humanitarian aid and services⁶. Forty-three percent of female heads of households across Syria consider themselves to have a disability. Women, especially those residing in the areas affected by terrorist groups, have experienced serious curtailment of their basic human rights, and high levels of GBV. Recent formative research on shifting social norms conducted by UNFPA also revealed that the economic challenges are one of the main triggers for different forms of GBV including intimate partner violence and early marriage. 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. Consequences on GBV include: so-called 'honor killings'⁷, which increased in 2021 in NES, numerous requests for virginity testing, and suicides linked to IPV, forced marriage, sexual, physical and psychological abuse, etc.

While GBV interventions successfully reached around 751 communities across Syria⁸, this represented only 19 percent of all communities, highlighting the need for continuous outreach. Despite the challenges, women and girls conrmed that, where GBV services exist, they have a positive impact on their lives. Safe spaces like Women and Girls Safe Spaces (WGSS) and Community Wellbeing Centers (CWC) are places to seek safety and receive life-saving services. The presence of safe spaces was often linked to greater safety of women and girls and a reduction in GBV by respondents. Additionally, knowledge of violence and women's rights were often mentioned as important aspects of WGSS and GBV activities, enabling women and girls to recognise the violence they face and take action to improve their safety. The increased awareness of GBV was connected, in women's and girl's words, to a "stronger personality", improved self-confidence and a greater sense of self efficacy, including the capacity to "reject violence"⁹, highlighting the impact of the GBV sub-Sector supported services in 2021.

⁵2021 MSNA

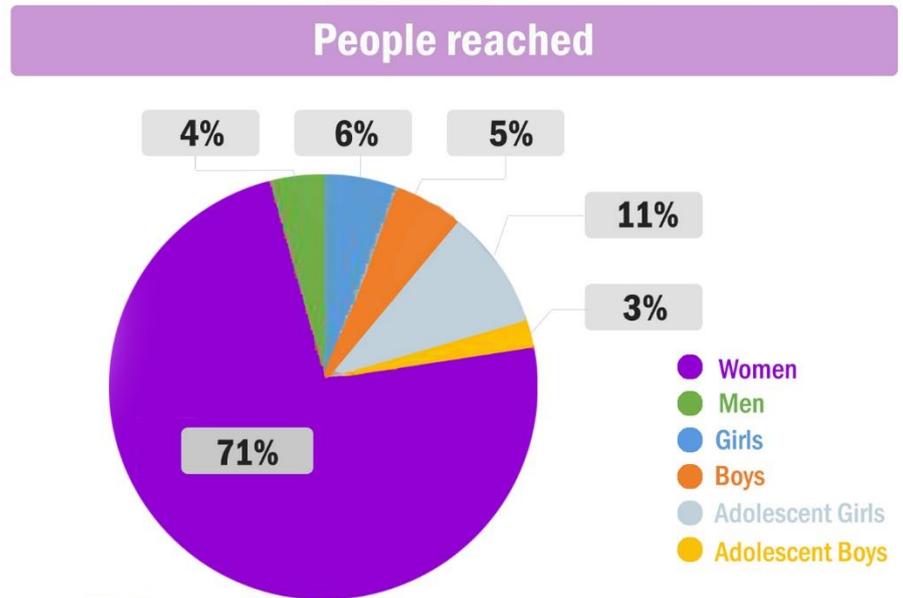
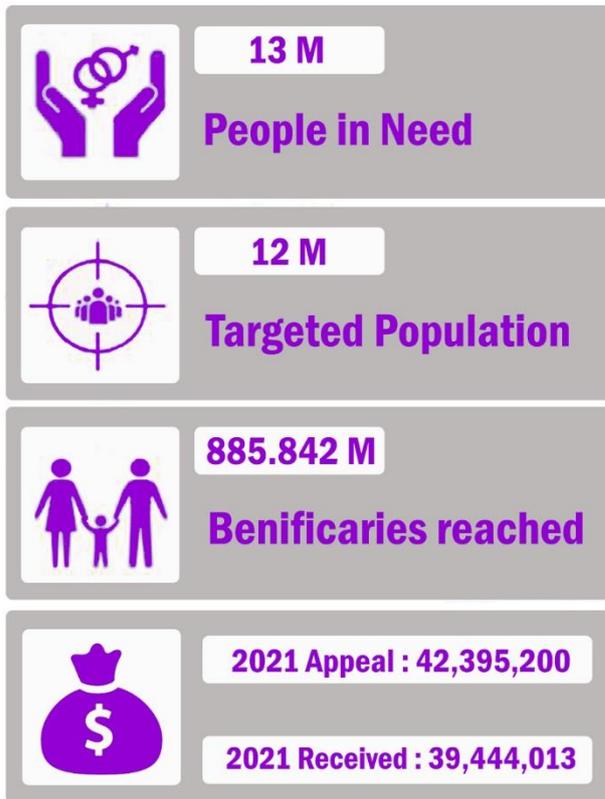
⁶Ibid

⁷"honour killing", or "shame killing" is the murder of an individual, either an outsider or a member of a family, by someone seeking to protect what they see as the dignity and honor of themselves or their family.

⁸According to the 4Ws reports received from GBV actors.

⁹All exerts are extracted from the [Voice from Syria 2022](#)

GBV sub-Sector Achievements and People Reached in 2021¹⁰



The GBV Sub-sector Implementation

Objectives

The GBV Sub-sector has the overall objective to improve access to quality specialized GBV services and measures in place to prevent and mitigate risks of GBV. The specific objectives that relate to the 2021 HRP include:

- Provide quality and life-saving GBV response services, including case management and psychosocial support, enhance vulnerable groups' access to these services with a focus on women and girls with disabilities and adolescent girls, and reinforce referral pathways.
- Enhance strategies to empower women and girls and prevent GBV, with a particular focus on most at-risk groups, e.g., adolescent girls and female-headed households, and divorced and widowed women and girls.
- Promote GBV risk mitigation into all aspects of the humanitarian response.

¹⁰More information and figures about GBV in Syria can be found via the [GBV Dashboard](#)

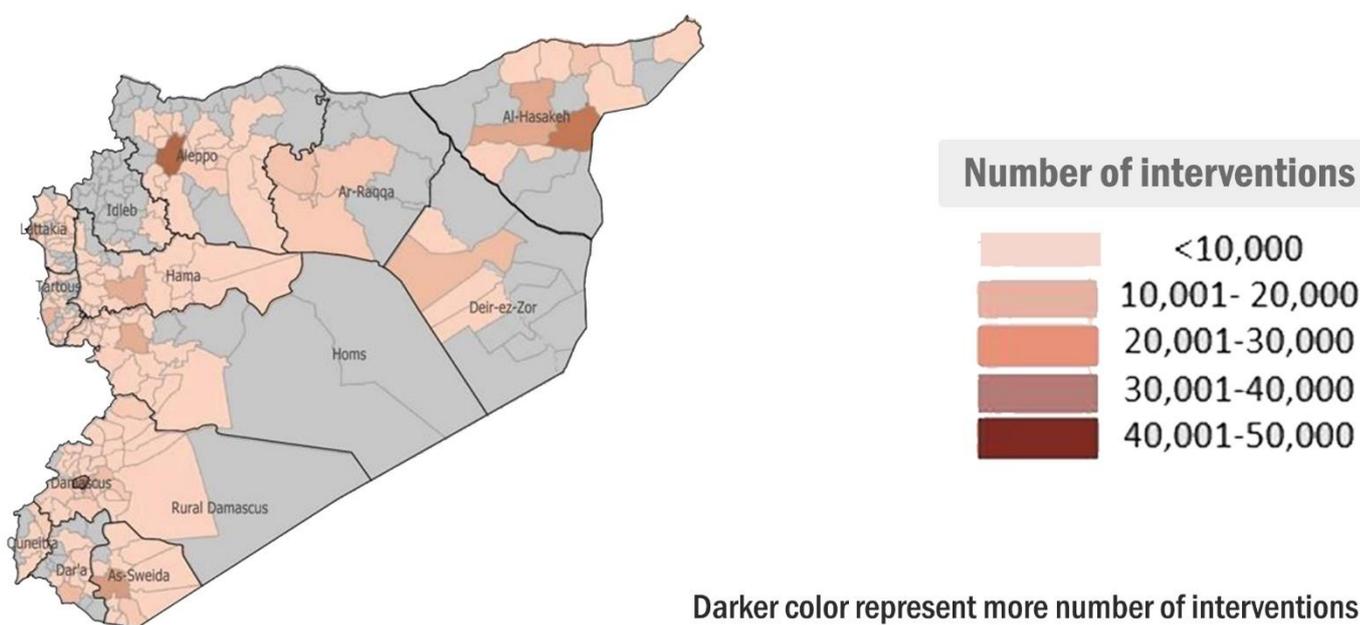
Achievements against the HRP indicators

In line with the three specific objectives reflected in the 2021 HRP plan, the GBV sub-sector partners implemented the following interventions.

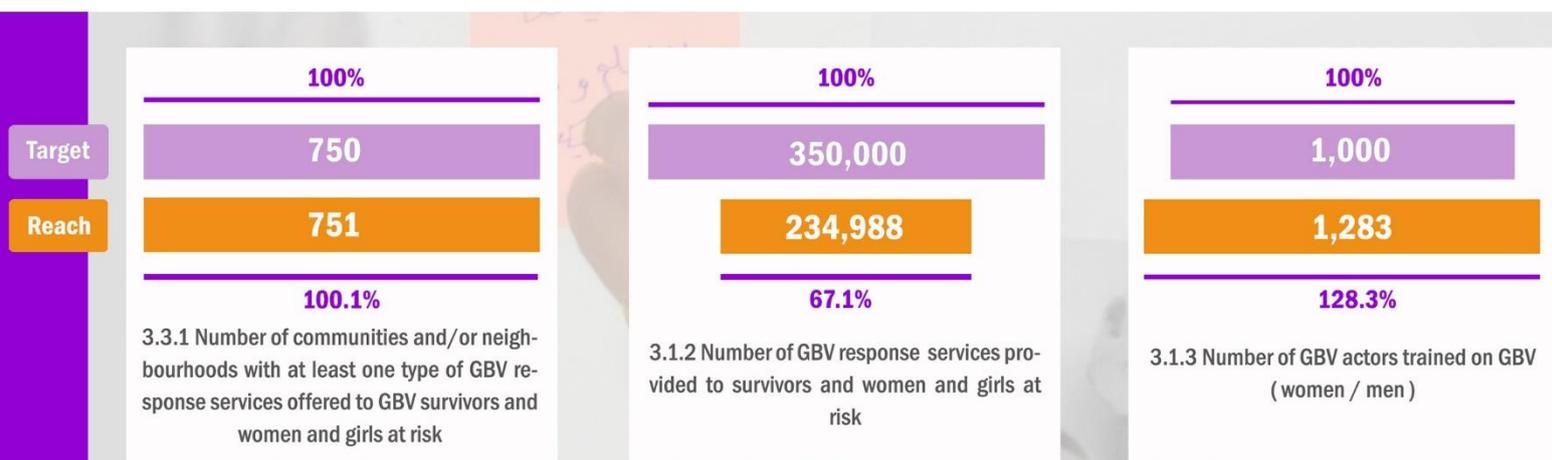
1 Provide quality and lifesaving GBV response services

GBV actors reached 858,848 people with GBV services, an increase of 14% compared to 2020¹¹. Static facilities, including WGSS, community centers and integrated mobile teams (IMTs) continued to provide multi-sectoral life saving response services to collective shelters, internally displaced people (IDPs), camps and in numerous remote and hard to reach communities. Key response services provided to women and girls at risk of GBV and GBV survivors included focused psycho social support (PSS), legal services and Psychosocial first aid, case management, counseling, specialized mental health services and 11,804 health referrals.

Map of interventions coverage for 2021



Based on the [GBV Sub-sector capacity building plan 2021](#), the GBV Sub-sector enhanced the capacity of 1,283 GBV actors to deliver life-saving and multi-sectoral GBV responses in a safe, ethical and dignified manner, following GBV guiding principles of survivors centered approaches. Key training topics delivered include PSS, GBV basic concepts, managing WGSS, 4Ws reporting, safe referrals, GBV coordination, integration of GBV with prevention against sexual exploitation and abuse (PSEA) as well as the provision of remote case management, of particular need during COVID-19 pandemic.



¹¹ More information and figures about GBV in Syria can be found via the [GBV Dashboard](#)

2 Enhance strategies to empower women and girls and prevent GBV

To empower communities, change mindsets and address the root causes of GBV and prevent them, GBV actors engaged communities across Syria with different initiatives as below:

GBV partners established and trained various community-based support structures such as outreach volunteers, community outreach assistance, male engagement groups and the Women's Committees¹² to support GBV response and prevention within their own communities. To date, these groups of community volunteers have been a resource in identification of community needs, referrals of survivors and those at risk of GBV, awareness raising and empowerment of women and girls in their neighborhoods. Community volunteers also represented a strong asset during COVID-19 lockdowns at the beginning of 2021, when protection and GBV activities were suspended due to containment measures. In Qamishli and Aleppo governorates for example, the Women's Committees supported by UNHCR and Syrian Society for Social Development (SSSD) ensured business continuity by conducting awareness raising, distributing flyers and posters on GBV and making face masks, quilts and pillow for elderly people and PWSN during the lockdowns.

Additionally, UNFPA Syria piloted a male engagement strategy to prevent GBV including IPV in partnership with the Syrian Society for Social Development (SSSD) and the Syrian family Planning Association (SFPA) in the WGSS located in Aleppo governorates. The initiative aims at challenging negative social norms and gender stereotypes towards positive community changes in behaviors and mindset that sustain socially ascribed gener norms, gender inequality and perpetuate Violence Against Women and Girls (VAWG).

GBV actors also supported the provision of 124,302 empowerment interventions to beneficiaries spanning from recreational activities, life skills training and vocational training. The interventions resulted in better status, self-esteem and improved confidence among the women, better opportunity and freedom to develop themselves and to participate in their communities.

Due to the deteriorating situation of women and girls in Al Hol camp, GBV sub sector developed [GBV advocacy key messages](#), aiming to draw attention to recent developments particularly affecting women and girls in Al-Hol camp, and supporting humanitarian leadership engaged in bilateral dialogue with authorities and humanitarian actors involved in Al-Hol camp by providing a common set of key messages to inform related advocacy.

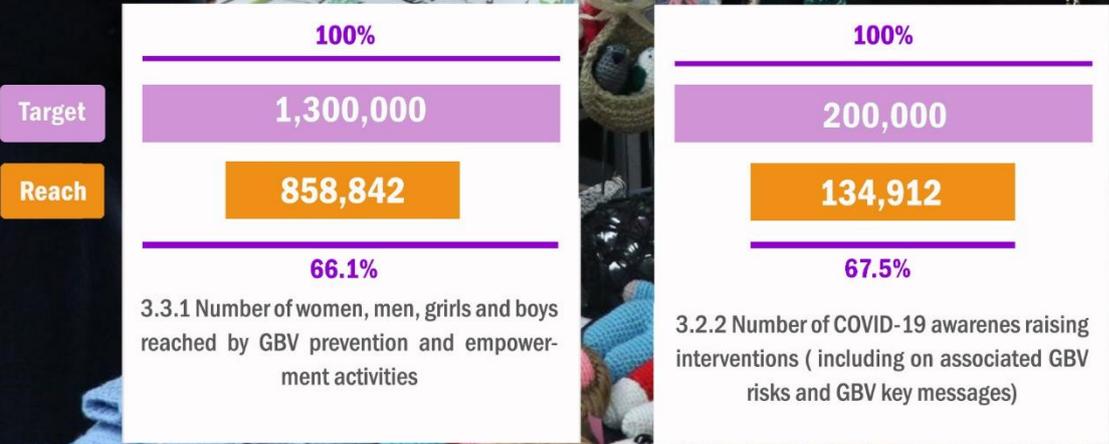
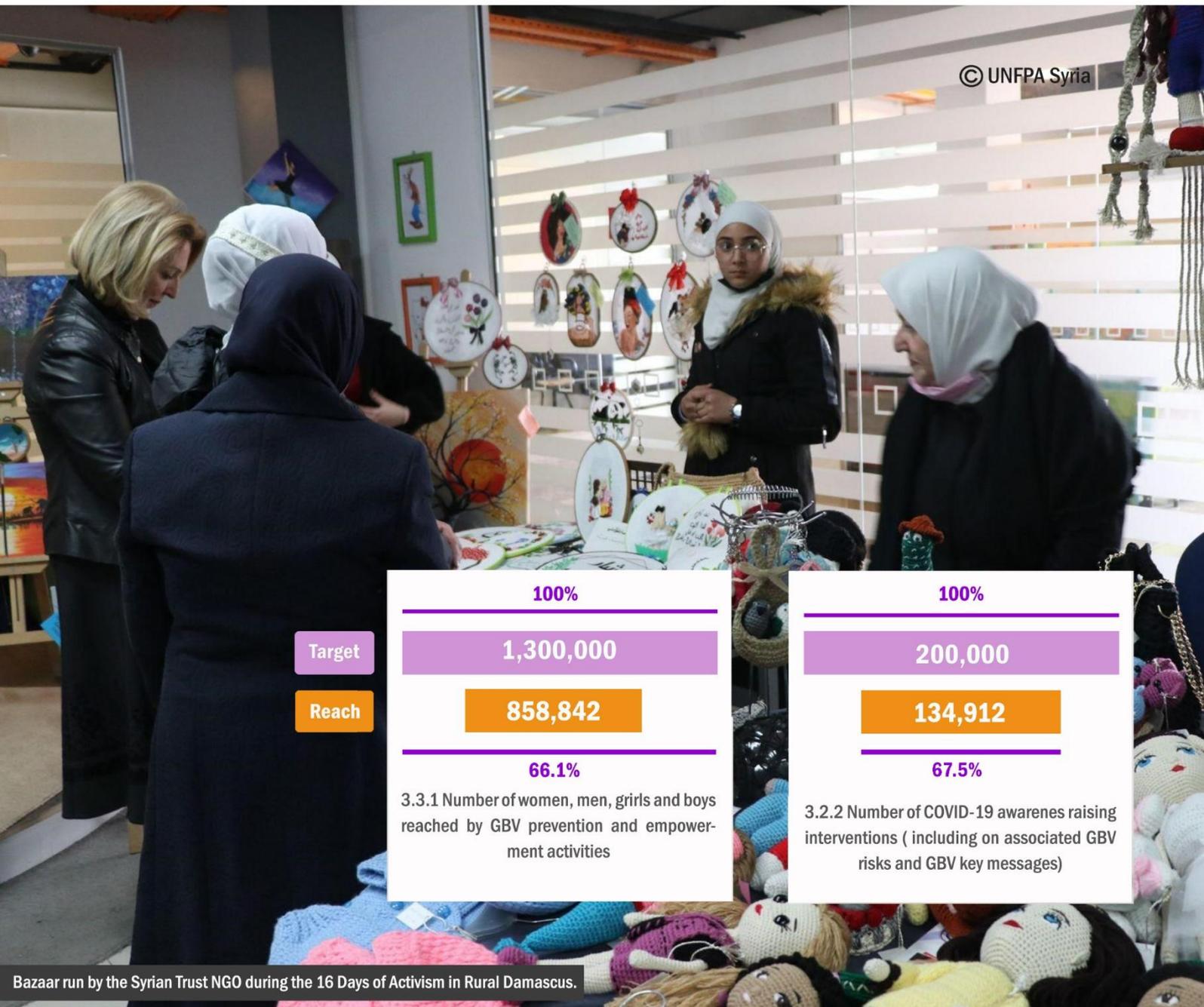


Awareness session for the Male engagement, during the 16 Days of activism in NES

GBV actors also procured, prepositioned and distributed 81,161 dignity kits (DK) at different GBV facilities in 13 Governorates aiming at restoring dignity, psychosocial and physical wellbeing of women and girls and addressing the health and protection needs of women and girls. The distribution of kits was used as an entry point to promote and support further services such as the national exams response with case management, awareness raising, PSS and counseling services and referrals of students in various accommodation centers to other services. Dignity kits were also used to respond to the displaced persons during the escalated hostilities in Dara'a governorates. Furthermore, the GBV working group in NES jointly conducted a dignity kit assessment for camps and urban/rural areas including both Ar-Raqqa and Al-Hasakah Governorates.

¹² Women's committees are groups of women in the communities established to enhance women and girls by identifying community needs and participation in decision-making.

GBV actors maximized awareness raising through contact initiative and mass awareness via media, reaching 1,176,286 people. Key awareness raising events included during the commemoration of international days such as International Women's Day¹³ in March under the national theme: "with my decision I can make a difference", Breast Cancer Month, International Day for Girl Child in October and during the 16 Days of Activism Campaign against GBV from 25 November to 10th December, marking its 30th year anniversary. For the **16 days campaign** the partners adopted a national theme: "Safety for all: GBV is not acceptable!". Key activities included a national opening event in Damascus, a gender sensitivity workshop for judges, prosecutors, governor, police chief, medical examiners and ministries representatives and NGOs, orange lightening of public buildings and squares; games, sports and interactive videos, interactive performances; puppet theater shows; open day events; bazaar¹⁴ on female made local products; empowerment training such as life skills and self-defense, soap making, baking, awareness raising sessions on GBV, legal, health services, early/forced marriage and launching of a new projects in Deir ez-Zor and Dwella, Rural Damascus.



Bazaar run by the Syrian Trust NGO during the 16 Days of Activism in Rural Damascus.

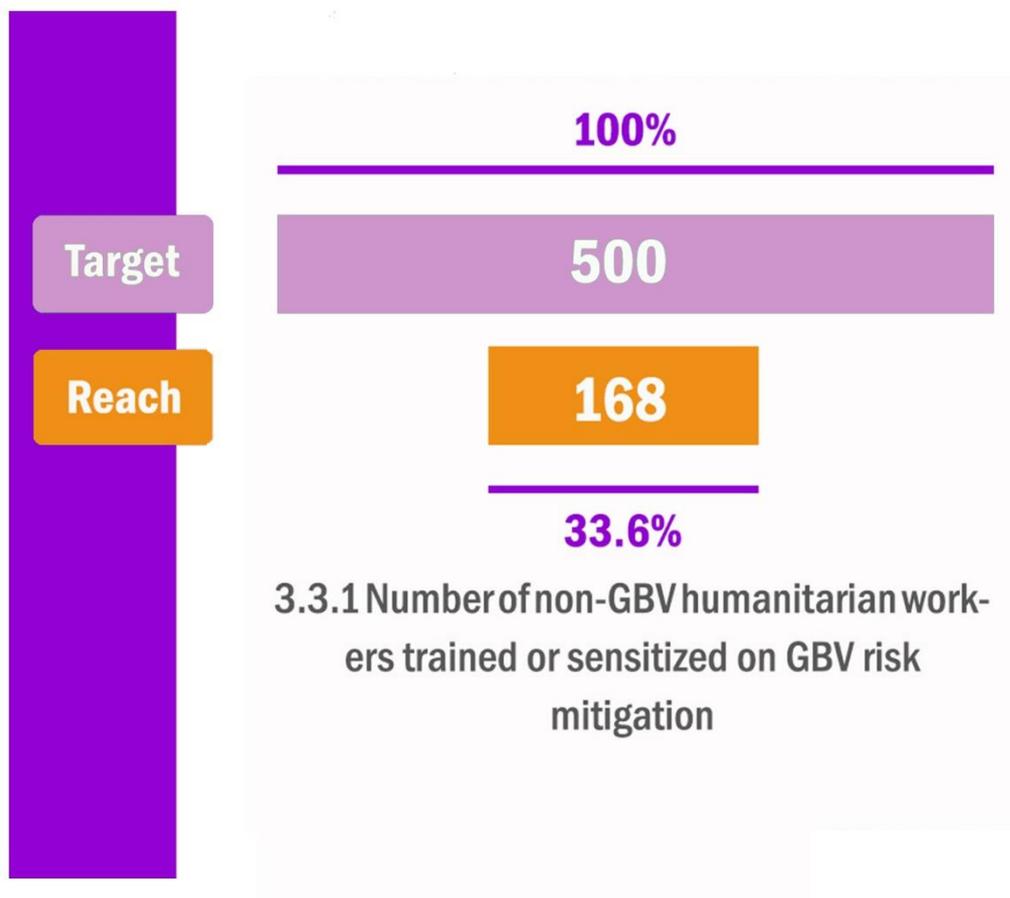
¹³The International Women's Day is a global holiday celebrated annually on March 8 to commemorate the cultural, political, and socioeconomic achievements of women.
¹⁴A bazaar or souk is a marketplace consisting of multiple small stalls or shops.

3 Promote GBV risk mitigation into all aspects of the humanitarian response

In line with the Inter-Agency Standing Committee (IASC) principles endorsed in 2019 which mandate HCT to mainstream GBV in humanitarian responses, GBV AoR supported sectors to develop specific GBV action plans and to integrate GBV risk in their responses. The GBV Sub-sector strengthened GBV risk mitigation measures and strategies across sectors through the training of all sectors on the [Inter-Agency Standing Committee guidelines for integration of GBV](#) in humanitarian actions subsequently WASH, Food Security, shelter, education, Non-Food Items (NFIs), and Nutrition sectors developed/endorsed and implemented GBV action plans with specific and tailored GBV indicators to monitor GBV implementation of GBV risk mitigation action in their respective sectors. Key results include, Food and Agriculture Sector conducted a gender analysis to inform their 2022 programming, NFI/Shelter developed a guiding note for distributions that promoted prevention of sexual harassment experienced during distributions of aid as noted by women and girls. WASH sector partners installed lights, locks and doors for WASH facilities in Al Aresha camp and Rukban that contributed to GBV and SEA risk mitigation, etc.

The Sub-sector updated and localized the referral pathways in 10 governorates and mapped critical GBV services quarterly to ensure a timely and comprehensive service provision to survivors and those at risk and to further encourage identification and referrals among humanitarian partners. This resulted in a total of 4,335 referrals made to non-GBV actors and 2,754 specialized mental health services referrals and 11,804 health referrals made - a three-fold increase from 2020.

GBV actors participated actively in various Inter agency assessments missions, area based planning and other joint response planning in NES, Dara'a and Darayya (Rural Damascus) to ensure that lifesaving GBV services are reflected in the coherent and coordinated humanitarian response to the displacement.



Challenges

- Despite the achievements, the COVID-19 pandemic preventive measures and deteriorating security situation, specially in Al-Hol camp, challenged the implementation of services. Increased killings of camp residents, security threats to female volunteers and humanitarian partners and acts of vandalism against humanitarian infrastructure also affected GBV programming, including follow-up of GBV cases. Partners continue to be present on the ground, engaging camp residents to advocate and mitigate security concerns, integrating COVID-19 response messages in existing GBV and RH messages and interventions, as well as providing services and awareness raising activities online platforms. Focus was also put on strengthening community mobilization to ensure continuous capacity to adjust to the evolving situation.
- Gaps in multi-sectoral GBV response services remain, especially for women and girls in need of life-saving services due to limited or short-term funding to sustain existing GBV facilities or expand to meet the overwhelming increasing GBV needs in Syria. This is further exacerbated by the lack of specialists and GBV partners in some governorates and hard-to-reach areas. There is also a need to increase support in addressing the specific needs of male and child survivors of sexual violence.
- Access constraints, international sanctions and delay in granting travel approvals to monitor support provided to beneficiaries continuous to impact on service provision.
- Restriction on provision of legal aid and support services to only two organizations, other than government bodies. GBV AoR and the protection sector are jointly proposing to advocate with the government to include more actors to provide legal services in 2021.
- Mandatory reporting the Syrian law¹⁵ by medical workers of any incidents of violence continues to be a major hindrance to access to services by GBV survivors.
- Gaps in GBV mainstreaming and risk mitigation actions in other sectors still remain to ensure that humanitarian response is safe and accessible to all. With Support from UNFPA, the GBV sub-sector will continue to provide technical support to all sectors on GBV mainstreaming GBV risk mitigations including training in safe referrals and GBV basics. The GBV sub-sector is also reviewing the finalized e-learning course on GBV mainstreaming that is expected to be launched in the 3rd quarter of 2022.

Outlook for 2022

The need for GBV services remains very high, lifesaving GBV services continue to be essential in the Syria response. In 2022 GBV AoR is appealing for 46,248,745 dollars, building upon the achievements and efforts of the previous years interventions to focus on the following areas:

- Sustain the existing GBV facilities, those within health facilities and expand in remote and hard to reach rural areas. Establish an additional 85 Women's girls' safe spaces and 03 emergency women's safe shelters across Syria.
- Increase linkages for early recovery initiatives, resilience building and activities at community levels for sustainability.
- Procure and distribute dignity kits in NES and other governorates for quarterly cycle distribution for women and girls of reproductive age.
- Expand cash based interventions for GBV case management and to mitigate GBV risks through livelihood support.
- Support sectors to mainstream GBV risk mitigation measures in Syria Humanitarian response.
- Strengthen and operationalize GBV referrals among GBV service providers and non-GBV responders to promote safe referrals of GBV survivors and those at risk of GBV.
- Capacity-development of local service providers, including on gender transformative approaches, on GBV case management and psychosocial support, clinical management of rape, CVA for GBV programming and on new modalities of service provision (remote).
- Continue joint advocacy with the government for removal of mandatory reporting for health workers and increase access to justice and health care services by GBV survivors.
- The prevention of GBV, with a focus on changing harmful social norms, will continue through community engagement including engagement with men and boys.

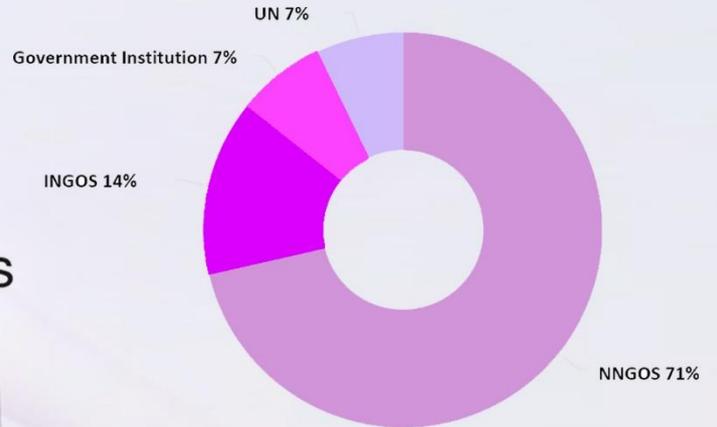
¹⁵ Article 390 of the Penal Code

GBV Sub Sector Coordination Donor

Breakdown of partners



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