

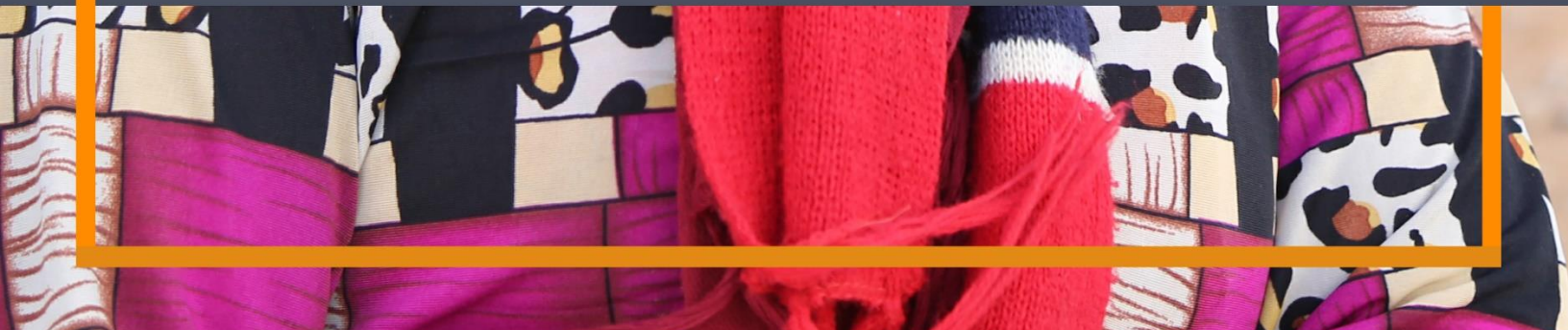


United Nations Population Fund / Syria
صندوق الأمم المتحدة للسكان / سورية



UNFPA SYRIA

Response 2019



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Brief Overview on the situation in Syria

As Syria enters its 09th year of conflict, it struggles with a dire humanitarian situation. Recent reports and estimations¹ indicated that around 11.1 million people are in need (as of end of Jan 2020), around 6.1 million are IDPs (as of July 2019 according to the population task force), around 1.4 million people are IDPs returnees during 2018, and the population task force estimated around 260,000 people IDPs & Refugees-returnees during January-July 2019. Those particularly at risk are pregnant and lactating women, widows, children, people with disabilities, the elderly and other groups or people living with disabilities or diminished coping mechanisms. Multiple displacements and lack of access to basic Sexual and Reproductive Health (SRH) and other health services further exacerbate the needs of individuals and communities, in addition to significantly increasing the risks of gender-based violence (GBV) which also includes desperate measures that further increase the likelihood of protection threats, such as sexual exploitation, forced and early marriage

In 2019, while the dynamics on the ground reflect a reduction in violence in many areas, except in NW & NES, the impact of the protracted crisis is still affecting the individuals, communities and institutions and hindering the access to efficient basic social services. Protracted displacement, the depletion of productive assets and savings, limited economic opportunities and the widespread destruction and contamination of agriculture-related infrastructures have had a profound socio-economic impact on the population. UNFPA Syria realized the importance of adopting a resilience-based approach in the program delivery, especially in the stabilized areas, in order to improve the ability for women, adolescent girls, young people, communities, institutions and systems to absorb, adapt and recover from stresses and shocks of the years of crisis as well as advancing dignity and sexual and reproductive health (SRH). To materialize this, UNFPA Syria was the leading agency that had established a new unit to work on resilience under the UNFPA mandate. This opened opportunity for more a systematic and structured manner in working on developing the resilience concept, the relevant program delivery approaches and advocacy in light of the context and dynamics in Syria.

UNFPA put a keen focus on developing and implementing some program components and approaches aiming to build the youth resilience and capacity, reaching the elderly, people with disabilities, and empowering female-headed households with livelihood opportunities that can sustain them. Furthermore, UNFPA worked on strengthening the institutional capacity for the government and NGOs through providing specialized trainings, supporting the capacity building process in many program areas in addition to providing technical support for identifying result-based national commitments for accelerating the implementation of ICPD25 which were presented by senior government figures and partners in the **Nairobi Summit on ICPD25**. Additionally, UNFPA has effectively engaged in the EU-joint program for building the resilience in Syria. This approach was supported at national level as one of the modalities for developing a resilience-based approach in delivering programs in Syria.

¹ UNFPA Humanitarian Action Overview, 2020- <https://www.unfpa.org/humanitarian-action-2020-overview>

Overall Country Programme Key Achievements

Facilities supported

-  **101** GBV mobile teams
-  **55** WGSS²
-  **93** RH static clinics
-  **93** RH medical mobile teams/clinics
-  **17** Youth friendly spaces
-  **1** Family Protection Unit³
-  **3** Community Wellbeing Centers⁴

People reached with services

- 937.300** accessed RH services
- 822.000** reached with GBV services
- 101.300** young people reached

² A **safe space** is a formal or informal place where women and girls feel physically and emotionally safe. The term 'safe,' in the present context, refers to the absence of trauma, excessive stress, violence (or fear of violence), or abuse². It is a space where women and girls, being the intended beneficiaries, feel comfortable and enjoy the freedom to express themselves without the fear of judgment or harm.

³ A **family Protection Unit** functions as a shelter for women and girl survivors of more serious cases of GBV. The unit is open 24/7 to receive new and urgent cases and sometimes live-saving, services, it also serves as a temporary residence for the women and children who sleep, eat, and receive services.

⁴ A **community wellbeing centre** is a space which offers comprehensive GBV prevention, awareness-raising and care services to women and girls, and general capacity building to enhance their livelihood opportunities and reduce their vulnerabilities. This is in addition to the provision of SRH and GBV services including PSS services to IDPs and host communities including integrating men and involving them in GBV prevention.

People reached with capacity building

- 1641** service providers trained on RH- related topics
- 1454** service providers trained on GBV- related topics
- 544** trained on population and development topics
- 3120** young people's skills developed



Advancing access to sexual and reproductive health (SRH)

UNFPA continuously worked to increase capacity of the health system to deliver quality integrated reproductive health (RH) services, particularly for the people affected by the crisis including host communities and displaced population with a special focus on women and adolescent girls and also including men and boys. RH services provided by UNFPA include: antenatal and postnatal care, emergency obstetric and newborn care, and family planning.



81 trainings, to build capacity of **1837** health workers trained to deliver RH services in **all 14 Syrian governorates** in: basic RH concepts, family planning and nutrition for people with disabilities (PWD), and Emergency Obstetric and Newborn Care (EmONC)



UNFPA supported MoH to improve its data-based system established in 2016, which collects data, analyzes results and reports accurate information. UNFPA supported reactivation of the national reproductive health working group led by Ministry of Health (MoH) and with the participation of Ministry of Higher Education (MoHE), local NGOs, national maternal hospital managers, UNICEF, and WHO representatives.



228 health service providers (Midwives, physicians, managers) trained as trainers during 2019 on the minimum initial service package (MISP) with support from UNFPA covering all the following areas: MISP overview and coordination, sexual and gender-based violence, HIV and STIs, adolescent SRH, maternal health and family planning.




UNFPA partially supported the Ministry of Health (MoH). The support included needed essential list of RH medicines, supplies, family planning commodities and medical accessories.





Advancing dignity and protecting women and girls from GBV


The UNFPA GBV and Gender programs expanded the coverage for GBV services by supporting Women and Girls Safe Spaces (WGSSs), including Community Wellbeing Center (CWC) and a Family Protection Unit (FPU) that also functions as a shelter for women and girl survivors of GBV. Through these facilities, UNFPA provided essential and life-saving integrated GBV/RH services including: GBV case management, PSS, and referral services. In addition, the facilities and mobile teams included GBV/RH awareness sessions on topics such as: domestic violence, women's rights, sexual and reproductive health (SRH), psychological issues of vulnerable women and girls, the importance of early detection of breast cancer, child marriage, menopause, family planning, and economic exploitation of women etc.





 Various types of dignity kits⁵ such as: female dignity kits, winterized and non-winterized protection kits, male dignity Kits, pregnant and lactating women kits, and adolescent girls' kits as well as sanitary napkins were distributed.


 A series of workshops on **CEDAW** were conducted, targeting parliamentarians, young people, police officers, and others from governmental and non-governmental institutions.


 **26** participants, including people with disabilities (PWD) from the beneficiaries of the CWC in Salkhad, Sweida, trained on economic feasibility and small-project management in order to enable them to start and manage their own small-scale projects.


 **59** participants trained on the economic empowerment of women, with the presence of various ministries: agriculture, education and social affairs

 **31** implementing partners trained on GBV principles and case management working in different NGOs in Damascus and Lattakia.

 **140** service providers trained in order to establish a network of qualified and trained and Mental Health and Psychosocial Support (MHPSS) service providers.

 **1** workshop to raise awareness on the FPU, types of services provided, and referral mechanisms to the unit conducted. NGOs and other institutions under the Ministry of Social Affairs and Labor (MoSAL) attended the workshop

 **2** training workshops for officers at reporting points of the national observatory for gender-based violence data conducted.

 An awareness raising campaign titled "Different and Creative Capacities" was conducted in Damascus to raise awareness on people with disabilities. The campaign aimed to raise awareness on the many skills and capacities which people with disabilities (PwDs) possess. The campaign included recreational, artistic, and sports activities targeting **150** people with disabilities.

⁵ [UNFPA dignity kits](#)



Enhancing the livelihood of young people

UNFPA continued to work on enhancing the livelihood of young people, ensuring that **adolescent girls and boys** have equitable access to an inclusive, healthy and conducive learning environment with a focus on reaching vulnerable groups such as IDPs. Adolescents and youth benefitted from equitable access to and active participation in a comprehensive package of learning, services and skills development opportunities which also had a focus on building the resilience and empowerment of youth in Syria.



The Youth programme expanded during 2019 to reach **two new locations**: Rural Aleppo and Deir-ez-zor.



New youth interventions were introduced: the mother to mother initiative focusing on promoting dialogue between mothers and adolescent girls as well as peer mothers to talk about puberty, adolescent reproductive health, family planning and early marriage, psychosocial support (PSS) for young people including individual, group counseling and recreational activities.



The **youth task force** was reactivated in 2019 in recognition of the specific needs of young people between 10-24 years old, who comprise 31% of the population in Syria and to ensure that youth issues are priorities, addressed and flagged particularly in programming in a comprehensive manner. The youth task force is co-chaired by UNFPA and UNICEF. Mapping of youth interventions was initiated to ensure complementarity of provided services and interventions.



Advancing equitable development for present and future populations

UNFPA continued its support enhancing the capacity of national partners in meeting its national priorities within the context of the **ICPD and 2030 Agenda**. UNFPA provided technical support for identifying **result-based national commitments** for accelerating the implementation of ICPD25. Several advocacy meetings were organized with various partners including parliamentarians, academics, youths, executive authorities in addition to NGOs and private sectors.

About 200 people participated in the meetings in support of the Nairobi Summit on ICPD25, as a result, national result based commitments were identified and provided by relevant authorities and partners, including Minister of MOSAL, head of Syrian Commission for Family Affairs and Population (SCFAP), members of Parliament, Ministry of Foreign Affairs, Planning of International Cooperation Commission, NGOs and Young People.

UNFPA developed the skills of **25 statistical professionals** from Central Bureau of Statistics (CBS) on the Census and Survey Processing System (CSPro) software.

2 research studies in support of **evidence-based policy and programmatic interventions** related to gender barriers, social and cultural factors affecting women and youth accessibility to and employability in the labor market, as well as protection needs assessment on elderly people were completed.

UNFPA supported **South-South Cooperation** among statistical systems with Jordanian general statistics office for further enhancing knowledge sharing and experience in the field of census management





Fulfilling the ICPD Promise

Nairobi Summit on the International Conference on Population and Development - ICPD25

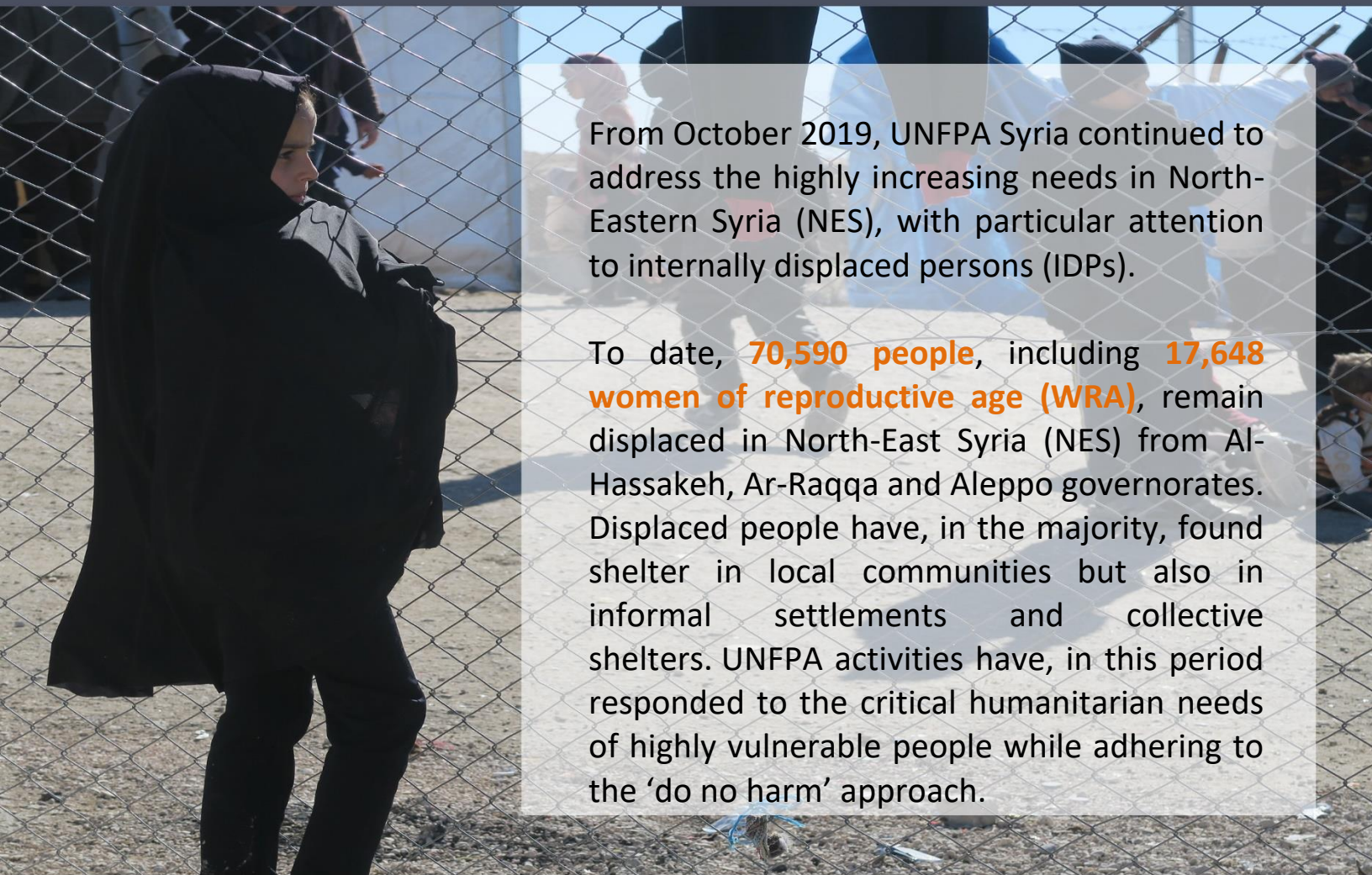


During the Nairobi Summit in 2019, the Syria Government made another commitment to the global community for the **ICPD25**. Syria committed to **reduce the rate of early marriage from 13% to 5%, achieve women's comprehensive access to and reception of family planning methods, reduce children under-five mortality rates from 23 per thousand to below 13 per thousand, reduce maternal mortality rate from 58 per 100 thousand births to below 34 per 100,000 thousand births, and follow up on updating legislations and laws.**

With the support of UNFPA, the Syrian Commission for Family Affairs and Population (SCFAP) exerted huge efforts in mobilizing national counterparts in support of ICPD25 implementation. SCFAP targeted a wide spectrum of national partners, where more than 300 people, representing parliamentarians, concerned ministries, national population committees and sub-committees in the governorates, NGOs, youth, universities management, academicians, and media figures participated in the policy dialogue on ICPD25. The Syrian parliamentarians, who had two workshops in support of the ICPD25, presented their commitments towards accelerating the implementation of the ICPD25. The Syrian Minister of Social Affairs and Labor provided a comprehensive report on the participation of the Syrian delegation in Nairobi Summit to the Parliamentarians with the participation of UNFPA Management. In cooperation with the Syrian Ministry of Social Affairs and Labor and SCFAP, efforts are being made towards building on the momentum of the ICPD25 summit to work on accelerating the promise.



North-East Syria Response



From October 2019, UNFPA Syria continued to address the highly increasing needs in North-Eastern Syria (NES), with particular attention to internally displaced persons (IDPs).

To date, **70,590 people**, including **17,648 women of reproductive age (WRA)**, remain displaced in North-East Syria (NES) from Al-Hassakeh, Ar-Raqqa and Aleppo governorates. Displaced people have, in the majority, found shelter in local communities but also in informal settlements and collective shelters. UNFPA activities have, in this period responded to the critical humanitarian needs of highly vulnerable people while adhering to the 'do no harm' approach.



38,357 people reached with health services



37,051 WRA were reached through RH services



1,051 children were reached through Pediatric services



255 men were reached through PHC services



35,400 were reached with GBV services



5 Women and Girls Safe Spaces (WGSS)



27 RH\GBV integrated Mobile teams



15 RH Static Clinics



36,381 kits distributed



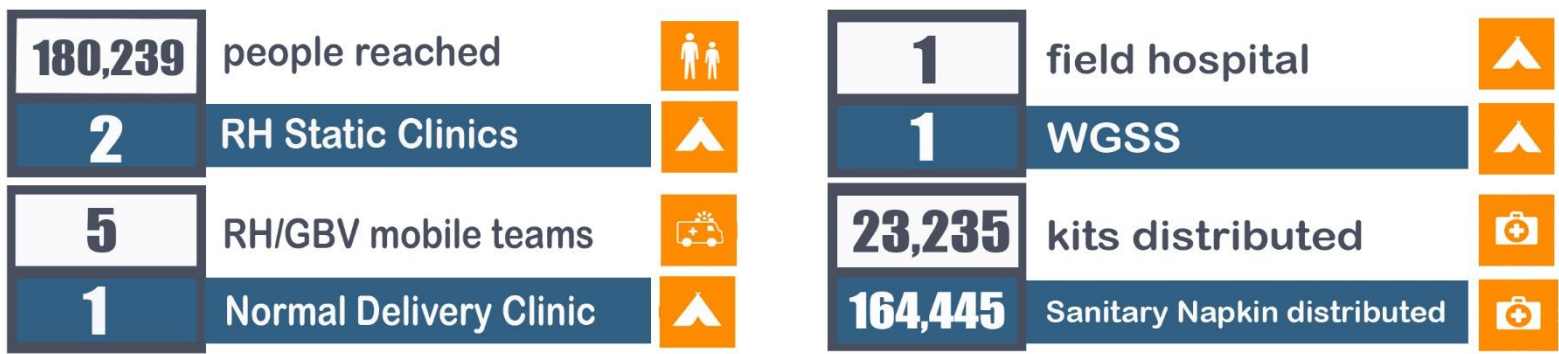
22,686 Sanitary Napkin packs distributed



AI-Hol Response



In AI-Hol camp, needs remain considerable and without a long-term solution. A variety of integrated RH/GBV services are being delivered in AI-Hol, including: antenatal care, family planning, normal delivery services, postnatal care, referrals, treatment of reproductive tract/urinary tract Infections, treatment of trauma, psychosocial support (PSS), GBV awareness raising and distribution of dignity kits. UNFPA provided integrated life-saving RH/GBV services mainly to women and adolescent girls in AI-Hol camp who were living under ISIS-controlled areas for almost 8 years through the establishment of an emergency WGSS and integrated RH/GBV mobile teams, including a *Hospitainer* in AI-Hol camp, static clinics and Mobile teams (MTs). Additionally, UNFPA continues the provision of case management for young mothers in AI-Hol camp, with UNICEF referring to UNFPA-supported WGSS those who have been received in their child-friendly space and need SRH and/or GBV response service. Additionally, literacy classes are provided for women and girls in coordination with UNICEF.



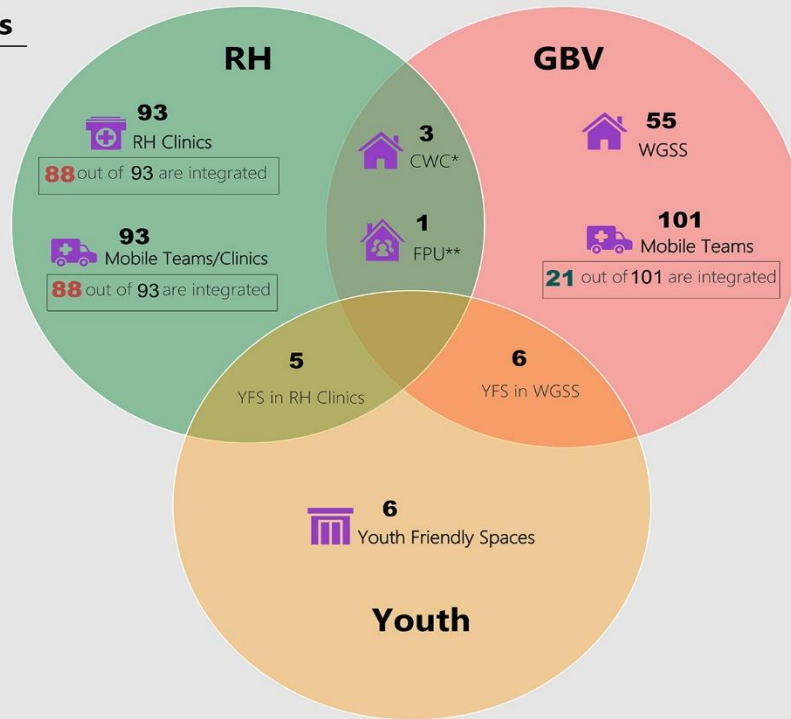
Resources

\$ 57,000,000 Funds utilized for programming as of January – December 2019

UNFPA is grateful for the critical support provided by donors who have contributed to this operation as well as those who have contributed to UNFPA programmes



UNFPA Supported Facilities



Beneficiaries

- 937.3K** Beneficiaries reached with all types of RH services***
- 822K** Beneficiaries reached with all types of GBV services****
- 101.3K** Beneficiaries reached with any kind of youth programming

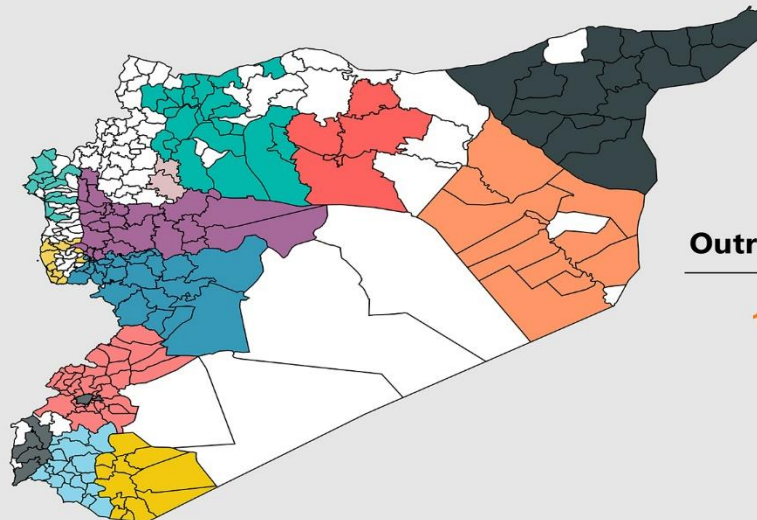
Distributions

- 658** Distributed RH Kits benefiting around **92,631** people
- 149,815** Distributed Dignity Kits
- 278.7K** Distributed Sanitary Napkins Packages

Capacity Building

- 1641** Service Providers trained on RH related topics
- 1454** Service Providers trained on GBV related topics
- 3120** Young people trained on youth related topics
- 544** Persons trained on P&D related topics

- Governorates**
- Aleppo
 - Al-Hasakeh
 - Ar-Raqqa
 - As-Sweida
 - Damascus
 - Dar'a
 - Deir-ez-Zor
 - Hama
 - Homs
 - Idleb
 - Lattakia
 - Quneitra
 - Rural Damascus
 - Tartous



Outreach of UNFPA Syria

- 14** Governorates reached
- 56** Districts reached
- 186** Sub-districts reached
- 1,320** Communities reached

*CWC: Community Well-being Center

**RH Services: Antenatal care - Postnatal care- Family Planning - RH Awareness Sessions - Neonatal care - Infections.

***GBV Services: Empowerment Activities - Awareness Raising - Response Services For Women, girls and Survivors.

"The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the United Nations (and UNFPA) concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries."



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