When a girl has had to flee her home, to be availed of soap, a useful cloth and monthly menstrual supplies upholds her dignity in her time of need. We deploy midwives, who provide care with caring, and psychosocial counseling, to a woman or girl who may have been subjected to the indignity of sexual violence, as has been happening all too often even now.

**UNFPA Executive Director, Dr. Natalia Kanem**
Annual High-Level Pledging Conference for the United Nations Central Emergency Response Fund

December 7, 2018
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, gender-based violence, youth, and others.

* Cross-border operations from Jordan have ceased as of July 2018 due to the change in control of the area.
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.

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 cross-border operations.

* Cross-border operations from Jordan have ceased as of July 2018 due to the intensifying conflicts in Southern Syria.

### REPRODUCTIVE HEALTH

**INDICATOR**

- Beneficiaries reached with reproductive health services: 2,341,980
- Family planning consultations: 973,487
- Normal / assisted vaginal deliveries: 63,305
- C-Sections: 86,573
- Ante-natal care consultations: 714,773
- Post-natal care consultations: 24,726
- People trained on RH-related topics: 4,768

### GENDER-BASED VIOLENCE

**INDICATOR**

- Beneficiaries reached with GBV programming / services: 1,048,135
- Population reached with Dignity Kits: 376,815
- Beneficiaries provided with GBV case management: 21,938
- Beneficiaries reached with GBV awareness messages: 663,560
- People trained on GBV-related topics: 5,302

### YOUTH SERVICES

**INDICATOR**

- Beneficiaries reached with youth programming: 253,600
- Beneficiaries trained on youth-related topics: 3,241

---

**SNAPSHOT**

- **133** Woman and Girls Safe Spaces
- **46** Youth Centres
- **55** Emergency Obstetric Care Facilities
- **138** Primary Healthcare Facilities *
- **90** Mobile Clinics

---

**LONG-TERM OVERVIEW OF SERVICE DELIVERY**

(monthly, non-cumulative)

---

* Above figures reflect fully-supported service-delivery points. Inside Syria additional 917 primary healthcare facilities are being partially supported through the Ministry of Health.
Through its 133 Women and Girls Safe Spaces, 138 primary healthcare facilities, and 46 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.

Note on kit distribution: UNFPA remains the largest provider of reproductive kits in the region. The kits listed above contain essential drugs, supplies and equipment to be used for a limited period of time and a specific number of people, and are procured based on estimates related to population data. For example, kits 11 and 12 serve the needs of a population of 150,000 over the period of three months.
WHEN CAGED BIRDS SING

STORIES OF SYRIAN ADOLESCENT GIRLS

In December, the UNFPA Regional Syria Response Hub launched When Caged Birds Sing, a publication that attempts to highlight the plight of adolescent girls who are surviving what is arguably the worst humanitarian crisis of our time.

As the crisis in Syria approaches its ninth year, the humanitarian situation is continually evolving, and the needs remain high. Even as some parts of Syria appear to be stabilizing, the crisis has long since passed a tipping point in terms of generational change, and its effects will undoubtedly continue for many years to come. This is particularly true in the case of women and girls due to the deep-rooted complexity of the issues they continue to face on a daily basis.

While women and girls alike bear the brunt of the crisis, girls — particularly adolescent girls — face increasingly complex challenges that stand to alter the course of their development for the rest of their lives. Violation of privacy, movement restrictions, forced and early marriage, and sexual and physical violence continue to be part of their daily reality, creating a web of violence that can transcend generations. Many adolescent girls in 2018 were in the 5-to-11 year-old age category when the crisis began in 2011. The experiences they have gone through over the past eight years have defined and indelibly shaped a significant portion of their formative years.

The information, stories and quotations provided in this publication will not only shed light on the challenges they face on a day-to-day basis, but will also highlight their hopes, aspirations and courageous efforts to find their place amid the chaos of conflict.

A digital version of When Caged Birds Sing can be found here.
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 clinics 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-based-violence survivors.
Kawthar, a 27-year-old woman and mother of two, was forced into an early marriage when she was only 15 years old. Her first child was born two years into the marriage, at which time she was beginning to comprehend the complex nature of her situation — an awareness that had completely eluded her prior to her marriage.

Six years ago, Kawthar and her family experienced their first displacement — the first in a series of unfortunate incidents that led to a life of economic hardship, instability and mounting violence. Like many families on the move, Kawthar’s family faced dire financial conditions and could not secure even the most basic of needs. “At the time, I didn’t know what I could do to support,” she explains.

Before the crisis in Syria, her husband ran a fairly successful carpentry workshop that provided adequate income for the family. Both she and her husband are now uncertain about the state of the workshop, if it even still exists. “In war, you lose everything, and this war does not discriminate between rich or poor,” says Kawthar, her eyes welling up in tears.

What the Syria crisis has also done is redefine many of the gender dynamics in the country. Over the past years, trends have seen the numbers of female-headed households increasing significantly, with women becoming the main — and sometimes only — breadwinners in the family. However, these additional responsibilities do not necessarily lead to greater empowerment or freedom for women, but invariably lead to an increase in workload and sometimes to additional abuse as men resist a perceived threat to their dominance.

Since the onset of the crisis, UNFPA has been attempting to respond to these changing dynamics by supporting extended vocational training programs that empower women socially and economically. These programs have been tailored to help women in need cultivate the skills, knowledge and strength necessary to generate sufficient income for themselves as well as their families.

Kawthar is one of the women whose life was notably changed for the better after joining a UNFPA-supported hairdressing vocational training, which took place at a Women and Girls Safe Space in Damascus. Upon completing the training, she was also provided with a hairdressing kit in order to help her leverage the skills she has learned and turn them into a viable business. Since then, she has successfully struck a balance between her previous role as a stay-at-home mother and what has become a growing career as a hairdresser and an income generator.

“I wanted to prove to myself that I’m a productive individual and that I’m capable of supporting my husband during these difficult times,” explains Kawthar. “While I have to spend long hours at work and often find it difficult to manage, I have a clear goal and that is to become a professional hairdresser capable of standing on her own.”

Kawthar recalls the harrowing journey that led her to this new life. “When the crisis intensified in my hometown of Babila, it became impossible to live a decent life. People were either dying or living in abject fear every day, and so my husband decided that it was time for us to leave everything behind and escape. We were forced to flee to locations where we barely knew anyone. It was scary and frustrating, but we had each other.”

“A few months later, I was walking through one of the streets in our new neighborhood and saw the banner of the Women and Girls Safe Space, at which point I decided to go inside and ask about their services. I remember feeling a sense of hope and excitement when I learned that the center prioritizes women’s needs and provides various services specifically tailored for women. I signed up for hairdressing courses and it was the best decision I’ve ever made. The life I had lived during displacement was horrifying and taking a simple walk down the street was considered a major accomplishment back then. Yet, I knew that things could change and that pain cannot last forever. That gave me hope.”

Kawthar said that her primarily motivator in life is the growing need to support her family in any way possible. “When your loved ones are suffering, you simply cannot stand to sit still and expect good fortune to come to you. I had to take action and I’m glad I did.”
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 gender-based 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.
As of July 2018, all UNFPA supported operation through cross-border Jordan have stopped due to the shift in the control of the area.

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

Meanwhile, UNFPA has worked closely with implementing partners to ensure a smooth closure of operations by the end of September 2018. Despite the cessation of services, UNFPA has contingency plans in place to deliver necessary shipments once the border crossings are re-opened.

**CROSS-BORDER JORDAN**

**REPRODUCTIVE HEALTH**

**INDICATOR**

<table>
<thead>
<tr>
<th>Service</th>
<th>Since January</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficiaries reached with reproductive health services</td>
<td>35,009</td>
</tr>
<tr>
<td>Family planning consultations</td>
<td>16,296</td>
</tr>
<tr>
<td>Normal/assisted vaginal deliveries</td>
<td>3,757</td>
</tr>
<tr>
<td>C-Sections</td>
<td>2,071</td>
</tr>
<tr>
<td>Ante-natal care consultations</td>
<td>14,306</td>
</tr>
<tr>
<td>Post-natal care consultations</td>
<td>6,129</td>
</tr>
<tr>
<td>Health facilities that provide Emergency Obstetric Care</td>
<td>6</td>
</tr>
<tr>
<td>Primary healthcare facilities</td>
<td>9</td>
</tr>
<tr>
<td>People trained on RH-related topics</td>
<td>107</td>
</tr>
</tbody>
</table>

**GENDER-BASED VIOLENCE**

**INDICATOR**

<table>
<thead>
<tr>
<th>Service</th>
<th>Since January</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional women and girls safe spaces (WGSS)</td>
<td>16</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV programming / services</td>
<td>10,077</td>
</tr>
<tr>
<td>Beneficiaries provided with GBV case management</td>
<td>398</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV awareness messages</td>
<td>3,069</td>
</tr>
<tr>
<td>People trained on GBV-related topics</td>
<td>59</td>
</tr>
</tbody>
</table>

**LONG-TERM OVERVIEW OF SERVICE DELIVERY**

(monthly, non-cumulative)
In December, 6,079 IDP families living in sites were affected by the flood that hit different parts of Northwest Syria. A total of 4,983 tents were completely damaged or partially affected. UNFPA and implementing partners provide affected households with dignity kits, new born kits, clean delivery kits as well as some winter clothes/products produced by UNFPA-supported Women and Girl Safe Spaces.

UNFPA in its capacity as the GBV Subcluster lead was in close coordination with OCHA and other cluster leads through the ICCG throughout the emergency response and contributed to the development of an inter-sector assessment to have a comprehensive understanding of the situation following the influx.

**CROSS-BORDER TURKEY**

**REPRODUCTIVE HEALTH**

**INDICATOR**
- Beneficiaries reached with reproductive health services: 335,324
- Family planning consultations: 97,203
- Normal/assisted vaginal deliveries: 11,000
- C-Sections: 4,259
- Ante-natal care consultations: 83,104
- Post-natal care consultations: 14,988
- Health facilities that provide Emergency Obstetric Care: 11
- Primary healthcare facilities: 10
- Functional mobile clinics: 11
- People trained on RH-related topics: 253

**GENDER-BASED VIOLENCE**

**INDICATOR**
- Functional women and girls safe spaces (WGSS): 12
- Beneficiaries reached with GBV programming / services: 166,349
- Population reached with Dignity Kits: 35,444
- Beneficiaries provided with GBV case management: 1,671
- Beneficiaries reached with GBV awareness messages: 89,196
- People trained on GBV-related topics: 603
“Some wars you manage to escape, and those eventually come to an end,” explains Huda, a 25-year-old mother of five, currently lives with her family in an IDP camp in Northern Aleppo. “But there are other wars that you have to fight in your own home, and there are much harder to escape. These can make you feel as though you are a prisoner for life.”

Huda is a survivor of domestic violence — a reality she and her children face on a daily basis. Her husband frequently subjects them to physical and emotional violence, all the while failing to attend to the family. In order to provide for her children, Huda decided to look for a job and eventually began working as a production operator at a pharmaceutical factory.

“I was the sole breadwinner in the family. He left all major responsibilities to me, and his only job was to destroy what little peace we manage to find in life,” explains Huda. “Somehow, he was able to take a second wife, and now he only comes by every once in a while.” Even during these occasional visits, his abuse continues. “He still beats me and the children almost every time he is here. Over time, I became so desperate that I entered a severe state of depression. I tried to commit suicide three times. Luckily, all three attempts failed.”

Following her third suicide attempt, Huda learned of a UNFPA-supported health facility, where she was hoping to learn more about family planning. On her first visit, the medical staff at the facility immediately took note of her mental state and the clear signs of abuse on her body. She was referred to a GBV case manager based in the facility.

“When I came to know Sirin, my case manager, I was in the most desperate state imaginable,” recalls Huda. “I was depressed, I had been in isolation from the outside world for so long, and I had almost long all hope in life.”

Sirin’s first priority was to give Huda a positive outlook. She reassured her that she will stand by her side as she works through the issues she is facing, and worked with her to develop a plan to help her cope with her suicidal thoughts. The first step in the plan was referring Huda to a psychologist, as she was in serious need of intensive therapy and counseling. “I was in direct contact with the doctor who supervised Huda, and kept following up on the developments of her mental health,” explains Sirin.

Huda continued to visit Sirin frequently. When her psychological wellbeing began improving noticeably, she was referred by Sirin to a nearby Women and Girls Safe Space supported by UNFPA where she was able to engage in empowerment activities and connect with the wider community.

“I have come a long way,” explains Huda. “These activities are immensely helpful. I feel stronger and more able to deal with my situation. I will find my way out.”
EGYPT COUNTRY REPORT

With nearly half a million Syrians living alongside Egyptians, UNFPA continues to provide assistance to Syrian refugees in the country, focusing on issues related to gender-based violence.

EGYPT

COUNTRY REPORT

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 continues to provide essential services to Syrians, focusing on prevailing social predicaments associated with forced migration such as various forms of gender-based violence.

REPRODUCTIVE HEALTH

INDICATOR

Beneficiaries reached with reproductive health services
Family planning consultations
Ante-natal care consultations
People trained on RH-related topics

SINCE JANUARY

6,921
1,634
615
220

GENDER-BASED VIOLENCE

INDICATOR

Functional women and girls safe spaces (WGSS)
Beneficiaries reached with GBV programming / services
Population reached with Dignity Kits
Beneficiaries provided with GBV case management
Beneficiaries reached with GBV awareness messages
Beneficiaries trained on GBV-related topics

SINCE JANUARY

10
14,033
471
1,325
6,115
189

YOUTH SERVICES

INDICATOR

Beneficiaries reached with youth programming

SINCE JANUARY

3,770

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

UNFPA IRAQ CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES IN BASIRMA, DRAHAKRAN, KWIRGOSK, AND QWSHTAPA CAMPS.

COUNTRY REPORT

UNFPA IRAQ CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES IN BASIRMA, DRAHAKRAN, KWIRGOSK, 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 visits 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, Kwirgosk, and Qwshpta 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
36,057
Family planning consultations
8,061
Normal/assisted vaginal deliveries
7,425
C-Sections
1,832
Ante-natal care consultations
8,823
Post-natal care consultations
2,568
Health facilities that provide Emergency Obstetric Care
17
Primary healthcare facilities
5
People trained on RH-related topics
199

GENDER-BASED VIOLENCE

INDICATOR

Functional women and girls safe spaces (WGSS)
4
Beneficiaries reached with GBV programming / services
45,269
Population reached with Dignity Kits
145
Beneficiaries provided with GBV case management
787
Beneficiaries reached with GBV awareness messages
50,474
People trained on GBV-related topics
1,038

YOUTH SERVICES

INDICATOR

Functional youth centres
5
Beneficiaries reached with youth programming
75,900
People trained on youth-related topics
2,526

LONG-TERM OVERVIEW OF SERVICE DELIVERY
(monthly, non-cumulative)
My family and I first took refuge in Iraq. It was there that my mother and I sought the help of a doctor to continue my treatment, as my body had still not fully healed from my supposed suicide attempt. At the clinic, I was taken into a private room so that the doctor would examine my injuries. In the room, after he looked at the injuries, he began touching parts of my body affectionately and telling me how beautiful I am. Both my mind and my body froze; I simply didn’t know how to respond.

Suha, an adolescent girl from Aleppo, Syria

Suha has experienced more than her fair share of struggles on the way to adulthood. A survivor of forced marriage at the age of 14, she experienced frequent family and domestic violence as well as harassment and exploitation, before receiving support from a UNFPA-supported Women’s Centre.
UNFPA JORDAN CONTINUES TO PROVIDE MUCH NEEDED SERVICES TO SYRIAN REFUGEES NATIONWIDE.

JORDAN

UNFPA JORDAN CONTINUES TO PROVIDE MUCH NEEDED SERVICES TO SYRIAN REFUGEES NATIONWIDE.

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 gender-based violence services is among the top priorities of UNFPA Jordan.

According to the Jordanian Department of Statistics, the total population of Jordan was estimated at 9.5 million, including 1.265 million Syrians, who represent 13.3% 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, Ma’arqa 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

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficiaries reached with reproductive health services</td>
<td>125,719</td>
</tr>
<tr>
<td>Family planning consultations</td>
<td>21,753</td>
</tr>
<tr>
<td>Normal/assisted vaginal deliveries</td>
<td>1,741</td>
</tr>
<tr>
<td>C-Sections</td>
<td>3,745</td>
</tr>
<tr>
<td>Ante-natal care consultations</td>
<td>38,925</td>
</tr>
<tr>
<td>Post-natal care consultations provided</td>
<td>7,548</td>
</tr>
<tr>
<td>Health facilities that provide Emergency Obstetric Care</td>
<td>3</td>
</tr>
<tr>
<td>Primary healthcare facilities</td>
<td>15</td>
</tr>
<tr>
<td>People trained on RH-related topics</td>
<td>257</td>
</tr>
</tbody>
</table>

### GENDER-BASED VIOLENCE

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional women and girls safe spaces (WGSS)</td>
<td>20</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV programming / services</td>
<td>45,296</td>
</tr>
<tr>
<td>Beneficiaries reached with Dignity Kits</td>
<td>9,817</td>
</tr>
<tr>
<td>Beneficiaries provided with GBV case management</td>
<td>4,219</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV awareness messages</td>
<td>14,399</td>
</tr>
<tr>
<td>People trained on GBV-related topics</td>
<td>289</td>
</tr>
</tbody>
</table>

### YOUTH SERVICES

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional youth centres</td>
<td>1</td>
</tr>
<tr>
<td>Beneficiaries reached with youth programming</td>
<td>8,839</td>
</tr>
<tr>
<td>People trained on youth-related topics</td>
<td>361</td>
</tr>
</tbody>
</table>

### LONG-TERM OVERVIEW OF SERVICE DELIVERY

- **BENEFICIARIES REACHED WITH REPRODUCTIVE HEALTH SERVICES**
- **BENEFICIARIES REACHED WITH GENDER-BASED VIOLENCE SERVICES**
- **BENEFICIARIES REACHED WITH YOUTH SERVICES**

- **JANUARY**
- **FEBRUARY**
- **MARCH**
- **APRIL**
- **MAY**
- **JUNE**
- **JULY**
- **AUGUST**
- **SEPTEMBER**
- **OCTOBER**
- **NOVEMBER**
- **DECEMBER**

**0**

<table>
<thead>
<tr>
<th>JANUARY</th>
<th>FEBRUARY</th>
<th>MARCH</th>
<th>APRIL</th>
<th>MAY</th>
<th>JUNE</th>
<th>JULY</th>
<th>AUGUST</th>
<th>SEPTEMBER</th>
<th>OCTOBER</th>
<th>NOVEMBER</th>
<th>DECEMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
LEBANON
COUNTRY REPORT

WITH THE HIGHEST PER CAPITA NUMBER OF REFUGEES IN THE WORLD, UNFPA CONTINUES TO PROVIDE VITAL SERVICES TO SYRIANS NATIONWIDE.

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-per-capita ratio and the undue strain the crisis has placed on Lebanon’s economy and services, UNFPA Lebanon continues to provide a wide array of programmes 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

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficiaries reached with reproductive health services</td>
<td>16,618</td>
</tr>
<tr>
<td>Family planning consultations</td>
<td>2,874</td>
</tr>
<tr>
<td>Normal/assisted vaginal deliveries</td>
<td>51</td>
</tr>
<tr>
<td>C-Sections</td>
<td>151</td>
</tr>
<tr>
<td>Ante-natal care consultations</td>
<td>2,889</td>
</tr>
<tr>
<td>Post-natal care consultations provided</td>
<td>699</td>
</tr>
<tr>
<td>Primary healthcare facilities</td>
<td>6</td>
</tr>
<tr>
<td>Mobile clinics</td>
<td>2</td>
</tr>
<tr>
<td>People trained on RH-related topics</td>
<td>264</td>
</tr>
</tbody>
</table>

GENDER-BASED VIOLENCE

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional women and girls safe spaces (WGSS)</td>
<td>15</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV programming / services</td>
<td>90,563</td>
</tr>
<tr>
<td>Beneficiaries reached with Dignity Kits</td>
<td>43,089</td>
</tr>
<tr>
<td>Beneficiaries provided with GBV case management</td>
<td>1,309</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV awareness messages</td>
<td>109,405</td>
</tr>
<tr>
<td>People trained on GBV-related topics</td>
<td>811</td>
</tr>
</tbody>
</table>

YOUTH SERVICES

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional youth centres</td>
<td>24</td>
</tr>
<tr>
<td>Beneficiaries reached with youth programming</td>
<td>15,817</td>
</tr>
<tr>
<td>People trained on youth-related topics</td>
<td>268</td>
</tr>
</tbody>
</table>

LONG-TERM OVERVIEW OF SERVICE DELIVERY
(monthly, non-cumulative)
Following a series of information sessions, men and women have reported increased awareness on gender-based issues and have shown a solid grasp of messages on gender-based violence. This has enabled them to interact more freely with their partners and children.

During her last session, one beneficiary said: “Before attending the sessions I was always obeying my husband’s requests without consideration, now I have found ways to discuss with him sensitive topics and to voice my opinion.”

Another female beneficiary said that after learning about the topics discussed during the sessions, she changed the way she interacted with her 13-year-old son by replacing violent and high-pitched discussions with conversations governed by understanding and compromise. She also added that she has become more confident when discussing sensitive topics surrounding sex with her adolescent children.

Female and male beneficiaries have also formed solid friendships throughout the sessions and continue to meet and interact as families, reinforcing community-level relationships and cohesion. One female beneficiary said, “We knew each other before attending the sessions, we are from the same area, but we didn’t have direct contact like we do now. After participating we know each other more than before, we share stories and problems, we take advice and support each other.”
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 far-reaching programs that serve to protect vulnerable members of the community.

**REPRODUCTIVE HEALTH**

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficiaries reached with reproductive health services</td>
<td>165,028</td>
</tr>
<tr>
<td>Family planning consultations</td>
<td>49,372</td>
</tr>
<tr>
<td>Ante-natal care consultations</td>
<td>18,086</td>
</tr>
<tr>
<td>Post-natal care consultations provided</td>
<td>9,571</td>
</tr>
<tr>
<td>Primary healthcare facilities</td>
<td>35</td>
</tr>
<tr>
<td>People trained on RH-related topics</td>
<td>1,136</td>
</tr>
</tbody>
</table>

**GENDER-BASED VIOLENCE**

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional women and girls safe spaces (WGSS)</td>
<td>35</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV programming / services</td>
<td>238,598</td>
</tr>
<tr>
<td>Population reached with Dignity Kits</td>
<td>174,455</td>
</tr>
<tr>
<td>Beneficiaries provided with GBV case management</td>
<td>1,967</td>
</tr>
<tr>
<td>Beneficiaries reached with GBV awareness messages</td>
<td>69,066</td>
</tr>
<tr>
<td>People trained on GBV-related topics</td>
<td>1,061</td>
</tr>
</tbody>
</table>

**YOUTH SERVICES**

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional youth centres</td>
<td>4</td>
</tr>
<tr>
<td>Beneficiaries reached with youth programming</td>
<td>13,304</td>
</tr>
<tr>
<td>Number of people trained on youth-related topics</td>
<td>86</td>
</tr>
</tbody>
</table>

**OTHER**

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>SINCE JANUARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refugee service units</td>
<td>5</td>
</tr>
</tbody>
</table>
At age 16, Rania donned her wedding dress and entered a life she knew very little about. A primary school graduate who was taken out of school five years earlier, her experiences in life were limited to the confines of her home, where she spent most of her time before moving in with her husband.

“At that age, you never really know what’s waiting for you,” explains Rania. “You resist, but ultimately you give in the way so many women before have done.”

Thirteen years have passed since Rania’s wedding; years filled with struggles, abuses and forgotten dreams. Rania’s husband, who is several years her senior, began revealing his abusive side about two years into their marriage. “He would call me names and beat me, even in front of our children.”

Throughout those years, Rania had struggled with frequent and strong bouts of depression. “I spent entire days crying uncontrollably. I couldn’t stop. Some days, I couldn’t find the energy to stand up. My confidence was also completely destroyed and I barely had the strength to look others in the eye.”

Luckily, Rania found her way to a Women and Girls Safe Space supported by UNFPA, where she was immediately referred to a case manager for psychosocial support. Despite her depression, Rania immediately felt safe enough to open up about the struggles she has been enduring at home. Initially, she was enrolled in one-on-one counselling to help her process the traumas she has experienced over the years. After a successful few sessions, she was provided with legal counseling to inform her of her choices at that point, which included divorce and a request for full custody.

Rania, however, hoped to give her children a chance to remain with their father. “I wanted to give him a chance to change, for the sake of the family. I felt much stronger at that moment as I understood my options, so I decided to confront him, and I did. I made it clear that he needs to change before he loses us forever.”

Today, Rania continues to play an active role at the center, participating in a wide variety of collaborative activities that have immensely improved her mental state. In her latest sessions with her case manager, she reported that her relationship with her husband has improved substantially. “I have learned the hard way that staying silent and accepting abuse is not an option. Now, I speak up, and I make it clear that any violence against me or my children will not be tolerated.”
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.

UNFPA leads the GBV coordination mechanisms in all of its GBV response interventions. Through its Damascus based operation UNFPA is the main lead, while in its Turkey Cross Border operation UNFPA co-leads with Global Communities. In its refugee response in Turkey and Iraq, UNFPA co-leads with the Government of Turkey and International Medical Corps (IMC) respectively. In Jordan and Lebanon, UNFPA co-leads the refugee GBV response with UNHCR.

In December, a GBV sub sector meeting was conducted in Damascus with the objective of sharing best practices and lessons learned from the 16 Days of Activism campaign. The meeting focused on tackling the most successful strategies employed during 2018 when it comes to raising awareness on GBV and empowering women and girls. The campaign reached over 600,000 people out of 14 Governorates. Meanwhile, a joint GP/CP/GBV meeting was conducted with to discuss the status of the HNO 2018/HRP 2019 and the main protection concerns related to northern Syria, in addition to evaluating access to and potential expansion of regular programming.

Meanwhile, UNFPA conducted two trainings that focused on GBV risk mitigation and integrating GBV mainstreaming across sectors. The first was a two-day workshop that took place in Al-Hasakah, targeting the protection, education, health, shelter, nutrition, WASH, and the Shelter and Non-Food Items (NFI) sectors. This was followed by a similar one-day comprehensive training in Damascus aimed at the food and nutrition sector.

In Turkey, the Key Refugee Group meeting was held in Istanbul focusing on the work plan for 2019. The Istanbul SGBV Sub-working group meeting was conducted on 19 December with a similar agenda — to review the 2018 Work Plan progress, discuss current activities and best practices, and incorporate those into the 2019 work plan. Meanwhile, the SGBV SWG meeting took place in Gaziantep on 12 December, co-chaired by a national GBV expert. Updates on current SGBV activities, review of 2018 work plan and the 3RP, and feedback on the activity categories on the sector 4W table were key topics covered. Lastly, the SGBV Working Group held a meeting in Ankara with the participation of Ministry of Family and Social Policies, UNHCR, UNFPA, UNICEF and UNWomen, during which the action points from the previous meeting were reviewed and objectives, outcomes and activities for 2019 were finalized.

In Cross-Border Turkey, the Standard Operating Procedures (SoPs) of the GBV Sub-cluster have been revised, signed by the senior management and disseminated to Syria-based staff. These procedures aim to facilitate joint action by all actors to respond to, prevent and mitigate GBV within the Syrian humanitarian response, and to improve services offered to GBV survivors and all individuals exposed to GBV. The Sub-cluster also finalized and shared an updated version of Referral Pathways to signatories of the new SoPs. In Damascus, the GBV sub sector received comments on SoPs from the relevant authorities, which in turn will be submitted again to the sector Task force in order to accelerate the endorsement.

In line with the Sub-cluster’s approach to capacity building that supports organizations according to their on-going programmes and focus of intervention, a two-day training on GBV basics and GBV risk mitigation was organized in December for 12 food, security and livelihood actors. Lastly, the GBV Sub-cluster celebrated the 16 Days Campaign Against GBV in both Turkey and Syria. The theme for this year was “End GBV in All Places: we all have a role.”

UNFPA also led a meeting addressing GBV Risk Mitigation and way forward on the 2019 HNO and HRP with Whole of Syria humanitarian sector coordinators in its capacity as lead of the WoS GBV AoR. Moreover, the UNFPA Regional Syria Response Hub hosted a workshop on 2018 achievements and challenges and next steps for 2019 on its regional Adolescent Girl Strategy.
DONORS & PARTNERS

THE WORK WE DO WOULD NOT HAVE BEEN POSSIBLE WITHOUT THE GENEROUS SUPPORT OF OUR DONORS & PARTNERS, MANY OF WHOOM HAVE BEEN SUPPORTING OUR OPERATIONS SINCE THE BEGINNING OF THE SYRIA CRISIS.

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 (RDEC), Syrian Commission for Family Affairs and Population, SCS, SEBC.


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.


In Iraq: AL Massela, Harikar, Zhan 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: Ministry of Health (MoH), 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), HUKSAM (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.
CONTACT INFORMATION

Jennifer Miquel
Head of Regional Syria Response Hub
miquel@unfpa.org
(962) 79 575 6755

RELEVANT RESOURCES

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