

# ESCALATION OF HOSTILITIES IN NORTH-WEST SYRIA

## UPDATE ON SRH & GBV CONCERNS

18 October 2023

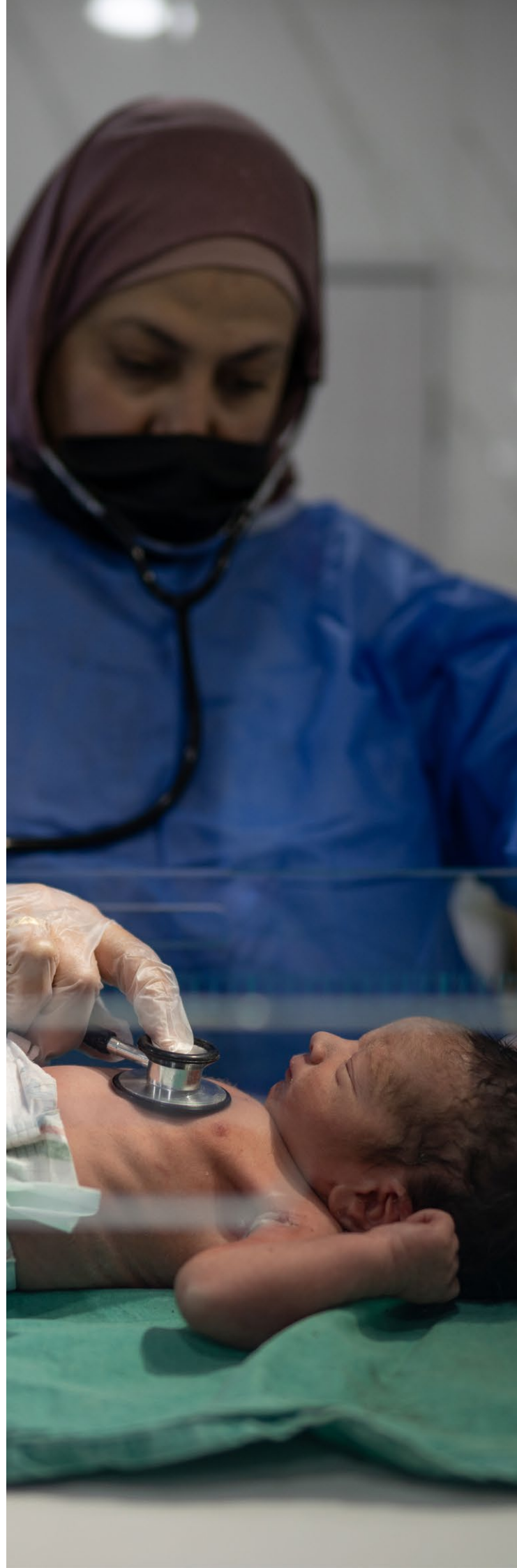
**68,100** individuals displaced  
**17,025** women and girls of reproductive age  
**8,172** adolescent girls between 10 and 19  
**1,532** women currently pregnant

## OVERVIEW

Hostilities between the Government of Syria and Armed Groups in northwest Syria rapidly escalated on October 5th, 2023, and resulted in one of the largest clashes since 2019. Shelling and airstrikes have resulted in death, injuries, and displacement of civilians across at least 50 villages, towns, and populated cities including Idleb City, Kafe Amma, Termanin, Al Dana, Ariha, and Jisr al-Shughour. Around 276 attacks have been recorded in the escalation of hostilities which have resulted in at least 53 casualties, including 11 women and 15 children, and 303 people injured, including 38 women and 48 children.

According to the North-West Syria Camp Coordination and Camp Management (CCCM) Cluster, the escalation of shelling displaced more than 68,100 individuals, most of whom were from Sarmin, Jisr-Ash-Shugur, Idleb, and Daret Azza sub-districts of Idleb and Aleppo governorates. Although numerous families have reached newly established reception centres, the majority of those displaced are still residing with their relatives. According to United Nations Office for the Coordination of Humanitarian Affairs (OCHA), a total of 23 reception centres at least have been opened by local authorities in various locations across Idleb, including Sarmada, Qah, Kafr Lusin, Mashhad Ruhin, Ma'arrat Tamasrin, Kelly, and Salqin communities.

The attacks have severely affected critical civilian infrastructures, such as health facilities and schools, in addition to damaging five camps, three offices of non-governmental organisations (NGOs), markets, and mosques. The main power station in Idleb has also been attacked, which has resulted in electricity cuts. Health facilities have been able to continue their operations through the use of generators but a fuel shortage is





expected to impact critical service provision. In the greater Idlib area, there are 142 static health care facilities including 23 Comprehensive Emergency Obstetric and Newborn Care (CEmONC) units and 16 Basic Emergency Obstetric and Newborn Care (BEmONC) units in addition to 41 mobile clinics, providing SRH services. However, almost all Emergency Obstetric and Newborn Care (EmONC) facilities temporarily suspended their outpatient services and focused solely on delivering emergency medical care from 5 to 9 October 2023.

As has been the case throughout this protracted crisis, the risks of gender-based violence escalate significantly during hostilities, particularly in light of the mass displacement. The escalation of hostilities is further exacerbating the critical needs of women and girls living in north-west Syria, who have been grappling both with the consequences of 12 years of conflict and the devastating earthquakes that hit the region in February 2023. Women and girls, including pregnant and lactating women, urgently need tailored interventions to respond to their reproductive health needs and address protection risks.

The Gender-based Violence Area of Responsibility's partners are currently running 15 safe spaces for women and girls in the affected area, providing psychosocial support, case management services, distribution of dignity kits, and referral to other specialised services. Additionally, 20 mobile teams are now operating in the accessible communities. However, 24 safe spaces have temporarily suspended their regular operations due to the deteriorating security situation.

## HUMANITARIAN NEEDS

- Displaced women and girls, particularly those residing in the newly established reception centres, are in urgent need of dignity kits, psychosocial support, and cash assistance.
- 183 health facilities are in urgent need of medicines, medical equipment, and reproductive health (RH) supplies, including generators, fuel, tents, Inter-Agency Emergency Health Kits (IARH) to continue essential and lifesaving sexual and reproductive health (SRH) service provision. EmONC facilities need to be supported to be able to manage pregnant women in need of safe obstetric care.
- Safety audits conducted in 6 newly established reception centres have outlined the: a) lack of basic and essential hygiene items, such as menstrual pads; b) lack of gender-segregated latrines; c) lack of privacy due to shared tents by multiple families; and d) lack of beddings, food and drinking water. The critical gaps, if not addressed in the long run, potentially lead to negative coping mechanisms setting grounds for exploitation especially among women and girls.

## UNFPA'S RESPONSE

**8** health facilities supported  
**7** women and girls' safe spaces supported  
**2,939** people reached with GBV services  
**5,487** people reached with SRH services  
**20** safety audits conducted at reception centres and camps

UNFPA's Emergency Response started immediately after the escalation of hostilities. UNFPA's partners have provided psychosocial support to 820 newly displaced people.

UNFPA is currently supporting seven Women and Girls Safe Spaces (WGSSs) located in Maaret Tamsrin, Armanaz, Kafr Karmin, and Atareb. However, five of them have been temporarily closed because of the deteriorating security situation during the spike of hostilities. Last week all of them resumed operations. Consequently, UNFPA and partners are upscaling service provision through mobile teams to ensure continuation and access to psychosocial support services, information dissemination on available services, and referral to specialised service providers.

Additionally, UNFPA is currently supporting, both operationally and programmatically, eight health facilities in Idlib Governorate, including five CEmONC facilities, one BEmONC facility, and two mobile clinics. UNFPA is promoting access to SRH services by establishing integrated mobile clinics next to the newly established reception centres.

Six safety audits have so far been conducted by UNFPA and its partners at the reception centres and camps to identify emerging gender-based violence (GBV) risks and advocate with the relevant clusters for GBV risk mitigation measures and efforts. UNFPA plans to ensure continuous safety audits across all the newly established reception centres.

Over the coming period, UNFPA Response will be focused on:

- Addressing the urgent emergency, obstetric, and newborn care needs** ensures safe pregnancy and delivery in the context of displacement. Manage pregnancy complications contributing to reducing mortality and morbidity of women in affected communities. Deployment of additional health staff to UNFPA-supported health facilities to respond to the increase in caseload and to ensure the continuation of critical SRH service provision.
- Supporting the current referral system for pregnant women**, considering the partial suspension of many health facilities that deliver BEmONC and CEmONC services in Idlib and western Aleppo. Such a system would guarantee that pregnant women, especially those with complications or nearing labour, are promptly directed to fully equipped maternity hospitals.
- Provision of RH supplies and commodities** for more than 183 health facilities in greater Idlib and preparedness



for new waves of internally displaced people (IDPs). Procurement and distribution of customised dignity kits to enhance timely distribution to women and girls of reproductive age arriving in the reception centres and camps.

- **Scaling up integrated GBV and SRH mobile teams** to promote access to GBV and SRH services, information provision, legal counselling, psychological first aid, and referral to specialised service providers for women and girls on the move and living in newly established reception centres, informal settlements, among others. Support health facilities in the integration of GBV services, ensuring effective access to comprehensive care for GBV survivors, and women and girls at risk of GBV.
- **Establishing confidential spaces** through temporary women and girls safe spaces (tents) for the provision of case management and psychosocial services. These temporary safe spaces will be located within the reception centres, camps, health facilities, and other locations where the IDPs are currently seeking refuge. Flexible modalities for service provision through upscaling cash in the framework of GBV case management to support GBV survivors including women and girls at risk to enable timely access to GBV-related services including through support for transportation.
- **Supporting existing hotlines** currently being used as avenues for remote psychological first aid, information sharing, and coordination of evacuation for vulnerable groups such as the older men and women, and widows. UNFPA seeks to strengthen access to GBV and SRH services for women and girls in need of urgent and immediate assistance who have no access to static or mobile service delivery points.

## COORDINATION

### Gender-Based Violence Area of Responsibility (GBV AoR)

Since the rapid escalation of hostilities in the Idlib area, the GBV Area of Responsibility (AoR) for north-west Syria, led by UNFPA, set up a coordinated response mechanism among GBV actors. A Safe Space mapping tool was launched on 8 October to assess the current GBV operational capacity in northwest Syria and the impact of the recent escalation of hostilities on the GBV service provision.

The GBV AoR in conjunction with the protection cluster and the Child Protection AoR has also disseminated a tool to map the newly established and existing mobile teams and hotlines in order to ensure an effective and coordinated response. The AoR has also disseminated the most updated referral pathways to ensure the continuation of services for GBV survivors and women and girls at risk within the areas affected by the hostilities.

To support GBV partners in identifying potential GBV and prevention of sexual exploitation and abuse (PSEA) risks within the newly established reception centres, the GBV AoR has disseminated an observational Safety Audit tool. Findings

from the observations will be shared with the relevant authorities and clusters to ensure risk mitigation measures are streamlined in newly established reception centres, and camps affected by the displacements, among others.

### Sexual Reproductive Health - Technical Working Group (SRH TWG)

The SRH Technical Working Group led by UNFPA, activated the emergency coordination mechanism immediately after the situation escalated in Idlib Governorate. In coordination with 30 SRH partners, an initial SRH service mapping was conducted to assess the level of service interruption and availability of services in static and mobile clinics. In addition, the SRH TWG coordinated the mapping of available RH supplies and commodities. The SRH TWG continues to monitor closely the availability of SRH services in Idlib in collaboration with the health cluster.

## FUNDING NEEDS

**\$3 million is needed to fund UNFPA's response over the coming 3-6 months.**

UNFPA seeks additional funding to scale up our emergency response to this crisis, specifically by strengthening lifesaving SRH services. expanding outreach efforts, including mobile SRH clinics/teams, Providing essential medical, IARH kits, and nonmedical equipment and supplies establishing temporary safe spaces, providing dignity kits to women and girls on the move, increasing cash assistance through case management; and enhancing GBV risk reduction and risk mitigation through the provision of in-kind support to women and girls, such as provision of transportation services and other emergency supplies/ services;

## FOR MORE INFORMATION

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