

UNITED NATIONS POPULATION FUND

REGIONAL SITUATION REPORT

FOR THE SYRIA CRISIS

ISSUE# 118

JUNE 2022

“ IF I HAD THE POWER, I WOULD CREATE A WORLD WITHOUT VIOLENCE, WHERE EVERY WOMAN AND GIRL CAN HAVE THE FREEDOM TO LIVE THE LIFE SHE WANTS.

– SAMAR, a young woman from Aleppo

SNAPSHOT

As of June 2022, Syrians and host communities throughout the region continue to face the escalating impact of a protracted humanitarian crisis, further complicated by a deteriorating economy, continuing hostilities, and an unrelenting pandemic.

The crisis region, which spans the Whole of Syria, Türkiye, Lebanon, Jordan, Iraq, and Egypt, continues to face a multitude of challenges, particularly in light of the recurrent waves of COVID-19 infections that continue to exacerbate existing needs. A decade into this protracted crisis, people in need continue to endure the cumulative effects of years of instability, the risks of which are even higher now due to the impacts of a far-reaching economic meltdown.

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 Humanitarian Hub for Syria and the Arab States in Amman, Jordan, and spans operations conducted by UNFPA offices in Türkiye, Lebanon, Jordan, Iraq, and Egypt, in addition to operations conducted inside Syria from Damascus and cross-border via Türkiye.

In addition to providing aggregated quantitative results for each country involved in UNFPA's regional Syria response, this report also brings stories from the field that highlight the plight of communities inside Syria and in host countries, underscoring the positive impact of the response delivered by UNFPA in the areas of sexual and reproductive health, gender-based violence, youth engagement, and others. The report also covers UNFPA's efforts to ensure continuity of operations throughout the Syria crisis region during the COVID-19 pandemic.



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VIOLENCE AGAINST WOMEN AND GIRLS HAS BECOME A SERIOUS PROBLEM AFTER THE WAR. WE SIMPLY DO NOT FEEL SAFE ANYMORE.

– YUSRA, a Syrian woman from Qamishli

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All photos shown in this issue, unless otherwise stated, are courtesy of the UNFPA Regional Humanitarian Hub for Syria and the Arab States (The Hub). Moreover, unless otherwise stated, photos do not directly correlate to the stories next to which they appear. Real names of survivors have been changed for confidentiality.

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REGIONAL HUMANITARIAN HUB
FOR SYRIA & THE ARAB STATES

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

THE SITUATION / 2022

11 YEARS ON, SYRIAN WOMEN AND GIRLS FEEL LEFT BEHIND

The year 2022 marked another grim milestone for Syrians throughout the region as the crisis entered its 12th year. For women and girls, the cumulative impact has been catastrophic, upending decades of progress on women's issues and bringing unprecedented risks that have fundamentally altered their realities.

Despite the continuing efforts of humanitarian actors, the situation in Syria remains dire, further complicated by a worsening economy, waves of hostilities and mass displacement, and the lingering aftermath of the COVID-19 pandemic. The crisis remains one of the world's most complex humanitarian and protection emergencies, with 14.6 million estimated in need of assistance, among them 7.2 million women and girls. This reflects a steep increase from the number of people in need reported in 2021 (13.4 million) and in 2020 (11.7 million).

When the crisis passed the decade mark in 2021, the world was already a year into the COVID-19 pandemic, and an array of other humanitarian situations were emerging. Among the millions of Syrians who have spent the last 11 years surviving conflict, displacement, economic collapse, and mounting risks to their safety, many feel their calls for help have been increasingly drowned out.

Women and girls pay the steepest price

The crisis has created a daunting array of challenges for women and girls, who are paying the steepest price of ongoing hostilities, economic collapse, climate-related challenges, among others. The lives of Syrian women and girls are marked by mutually reinforcing forms of gender-based violence and gender discrimination. 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.

"Violence against women and girls has become so common after the crisis," explains Shaza, an adolescent girl from Qamishli. "Many women in my family are struggling and cannot find the right support. I see more women being beaten by men in their families, and sometimes in public."

Moreover, these risks are further compounded by the deteriorating economy and widespread poverty, lack and loss of livelihoods, destruction and loss of housing and property, protracted and multiple cycles of displacement, substandard living conditions (even for people in areas of relative stability), and shortage of natural resources. This is further increasing reliance on negative coping mechanisms such as early and forced marriage and sexual exploitation and abuse.

Even more alarming are the reports by women and girls stating that the violence against them has become normalised as a result of years of instabilities. Harassment, intimate partner and family violence, child and forced marriage and subsequent pregnancies, and sexual violence and exploitation are consistently reported, while new trends, such as various forms of technology-facilitated violence, have also been observed in recent years.

And yet, despite the enormous challenges levelled against them, Syrians throughout the region refuse to give up. People of different ages and backgrounds, including women and girls who have survived gender-based violence, continue to demonstrate remarkable resilience and determination. Many rise above their challenges and traumas to provide better prospects and opportunities for their children and loved ones, while others defy circumstances to become artists, activists, innovators and influential voices in their communities.

UNFPA continues to show up

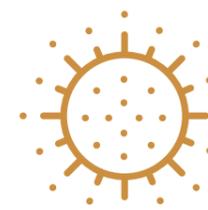
UNFPA and humanitarian actors will continue to advocate for the rights and well-being of women and girls.

Between January and June 2022, as part of its regional response to the crisis, UNFPA delivered SRH services to more than 793,000 people, while around 390,000 were reached with services designed to prevent and respond to gender-based violence, including more than 134,000 adolescent girls. Around 104,000 women were provided with cash assistance, and more than 9,000 LGBTQI+ individuals were served.

In 2022, UNFPA is appealing for a total of USD 144.3 million to fund its regional Syria crisis response, which spans the Whole of Syria, Türkiye, Lebanon, Jordan, Iraq, and Egypt.



THE IMPACT OF THIS CRISIS STRETCHES FAR BEYOND SYRIA TO INCLUDE TÜRKIYE, LEBANON, JORDAN, IRAQ, AND EGYPT.



TOTAL CONFIRMED CASES OF COVID-19
SINCE THE START OF THE PANDEMIC
As of June 30, 2022

SYRIA	TÜRKIYE	LEBANON
56,009	15,123,331	1,105,959
JORDAN	IRAQ	EGYPT
1,700,526	2,348,662	515,654



14.6 MILLION
Estimated people in need in Syria



3.7 MILLION
Women and girls of reproductive age in need in Syria



7.1 MILLION
Refugees, asylum seekers, or stateless people in the region



500,000
Estimated pregnant women and girls in the crisis region

RESPONSES FROM ALL OPERATIONS

OPERATIONS IMPLEMENTED THROUGHOUT THE REGION, INCLUDING THE WHOLE OF SYRIA, TÜRKIYE, LEBANON, JORDAN, IRAQ, AND EGYPT.

793,360

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

92% FEMALE

13,591

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

77% FEMALE

389,819

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

92% FEMALE

134,707

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

30,822

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

71% FEMALE

4,454

LGBTQI+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

104,087

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

99% FEMALE

9,083

PEOPLE TRAINED ON VARIOUS TOPICS

81% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	551,605	99%
Normal and assisted vaginal deliveries	13,748	100%
C-Sections	7,141	100%
Ante-natal care consultations	284,537	100%
Post-natal care consultations	60,463	100%
People trained on SRH-related topics	3,495	86%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	50,646	97%
People provided with GBV case management	17,682	94%
People reached with GBV awareness messages	291,579	92%
People trained on GBV-related topics	4,086	78%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	1,502	78%



131

PRIMARY HEALTHCARE FACILITIES*



104

WOMEN AND GIRLS SAFE SPACES



28

EMERGENCY OBSTETRIC CARE FACILITIES



21

YOUTH CENTRES



112

MOBILE CLINICS



76

OTHER SERVICE DELIVERY POINTS

* Above figures reflect fully-supported service-delivery points. Inside Syria, an additional 638 primary healthcare facilities are being partially supported through the Ministry of Health.

AS THE CHALLENGES WORSEN, WOMEN AND GIRLS CONTINUE TO PAY THE PRICE.

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 Türkiye, Lebanon, Jordan, Iraq, and Egypt. The crisis has permanently altered the fabric of society in Syria itself, with far-reaching ramifications for its future resilience.

Assessments and interviews conducted by UNFPA since 2016 have also been able to illustrate the profound effect that years of instability have had on women and girls, particularly adolescent girls, who face a variety of unique risks. Lack of individual autonomy, movement restrictions, forced and early marriage, denial of resources and opportunities, and sexual and physical violence continue to be part of their daily reality, creating a web of violence that can transcend generations.

Despite testing their limits, however, the crisis has also revealed the remarkable resilience of women and girls, many of whom defy enormous odds to become artists, activists, innovators, and other influential voices in their communities.

#ThisIsNotNormal

Rejecting the normalisation of violence against women and girls

[Watch](#) the launch video by UNFPA Executive Director, Natalia Kanem.

Globally, women and girls continue to bear the brunt of the worst impacts of natural and human-made disasters, and this includes the escalating risks of multiple forms of gender-based violence and harmful practices.

In the Arab region, converging crises are affecting the lives and well-being of women and girls, including protracted humanitarian crises, armed conflicts, forced internal and external displacement, food insecurity and water scarcity, the worsening impacts of climate change, and countless other serious challenges. Meanwhile, the continuing impacts of the COVID-19 pandemic, and high food and fuel prices driven by the ongoing war in Ukraine, are exacerbating the challenges women and girls face in communities across the region and beyond.

In the wake of these unprecedented challenges, more women and girls report to UNFPA that violence against them is becoming increasingly normalized, particularly in humanitarian settings.

Harassment, intimate partner and domestic violence, child and forced marriage, and sexual violence and exploitation are consistently reported, while new trends, such as various forms of cyber violence, have also been observed in recent years. Women and girls also report that this sense of normalization is eroding their resilience, particularly for those living in humanitarian settings.

The normalisation of violence against women and girls poses a serious risk to sustainable peace and security and could derail progress towards the United Nation's 2030 Agenda for Sustainable Development. The international community must act with urgency and in solidarity to reject the risk of the normalization of violence against women and girls, and ensure that programmes designed to respond to this trend are at the front and centre of humanitarian responses.

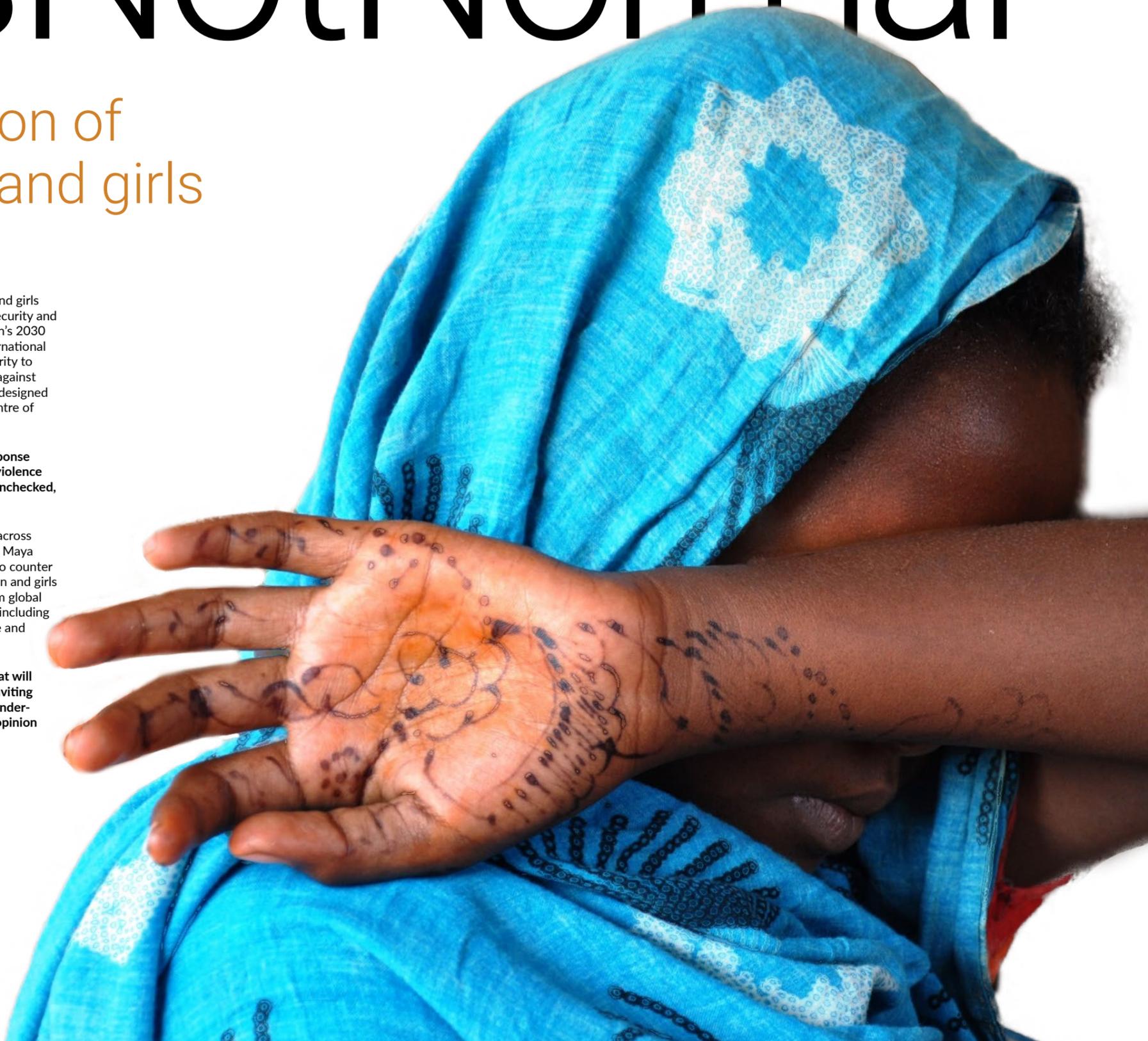
The #ThisIsNotNormal campaign comes in response to increasing reports by women and girls that violence against them is becoming so widespread and unchecked, that it is normalized in some communities.

Featuring the voices of [artists and influencers](#), across Arab region, such as Ghada Saba, Joanna Arida, Maya Ammar, and Alaa Hamdan, the campaign aims to counter this alarming trend, amplify the voices of women and girls survivors of gender-based violence, and reaffirm global commitment to ending gender-based violence, including sexual violence in conflict, and providing justice and support services to all those affected.

#ThisIsNotNormal is an extended campaign that will continue over the coming months. UNFPA is inviting donor countries, UN and partner agencies, gender-based violence experts, journalists, and other opinion influencers to participate.

🗨️ **WOMEN AND GIRLS EXPERIENCE VIOLENCE AND OFTEN ACCEPT IT, NOT KNOWING THAT IT IS NOT NORMAL.**

— SERENA, a young woman from Lebanon



ACROSS THE WHOLE OF SYRIA

ENSURING THAT ALL COMMUNITIES INSIDE SYRIA HAVE ACCESS TO LIFE-SAVING ASSISTANCE AND QUALITY SERVICES, EVEN IN LOCATIONS THAT ARE HARD TO REACH.

505,264

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

89% FEMALE

5,621

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

93% FEMALE

296,805

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

94% FEMALE

115,149

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

14,483

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

62% FEMALE

2,697

PEOPLE TRAINED ON VARIOUS TOPICS

80% FEMALE

102,945

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

99% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	192,615	99%
Normal and assisted vaginal deliveries	12,838	100%
C-Sections	7,067	100%
Ante-natal care consultations	247,948	100%
Post-natal care consultations	46,090	100%
People trained on SRH-related topics	1,082	89%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	15,889	100%
People provided with GBV case management	13,997	97%
People reached with GBV awareness messages	235,907	94%
People trained on GBV-related topics	1,533	74%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	82	57%



100

PRIMARY HEALTHCARE FACILITIES*



51

WOMEN AND GIRLS SAFE SPACES



26

EMERGENCY OBSTETRIC CARE FACILITIES



15

YOUTH CENTRES



100

MOBILE CLINICS



61

OTHER SERVICE DELIVERY POINTS

* Above figures reflect fully-supported service-delivery points. Inside Syria, an additional 638 primary healthcare facilities are being partially supported through the Ministry of Health.

In 2014, the Whole of Syria (WoS) approach was introduced across the United Nations, authorised initially by UN Security Council Resolution (UNSCR) 2165 in 2014. This allowed cross-border humanitarian assistance from Iraq, Jordan, and Türkiye. Successive UNSCRs extended and adapted this, eventually reducing to cross-border assistance from Türkiye exclusively. On July 11, 2021, the resolution was extended for an additional six months, with the proposed extension of a further six months subject to the Secretary General's report. The continuation of this large, UN-led humanitarian operation is vital to reach those most in need. In addition to the Whole of Syria approach under the Humanitarian Response Plan (HRP), there has been a succession of comprehensive Regional Refugee and Resilience Plans (3RPs) since 2014, which aim to coordinate and align responses to Syrian refugees and affected host communities across Türkiye, Lebanon, Jordan, Iraq, and Türkiye.



WHEN I FINALLY FOUND MY WAY TO THE SAFE SPACE, I WAS SURPRISED AT HOW QUICKLY I BEGAN TO FEEL A CHANGE. THE KIND PEOPLE THERE GAVE ME THE HOPE I THOUGHT I'D NEVER GET BACK.

– RULA, a Syrian woman from Damascus

SYRIA COUNTRY OFFICE

DELIVERING EMERGENCY AND LONG-TERM ASSISTANCE TO SYRIAN COMMUNITIES IN NEED THROUGHOUT THE COUNTRY, WITH A FOCUS ON WOMEN AND GIRLS.

445,293

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

99% FEMALE

3,382

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

94% FEMALE

244,694

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

98% FEMALE

92,653

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

14,483

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

62% FEMALE

1,493

PEOPLE TRAINED ON VARIOUS TOPICS

81% FEMALE

99,535

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	185,968	99%
Normal and assisted vaginal deliveries	5,140	100%
C-Sections	4,656	100%
Ante-natal care consultations	216,311	100%
Post-natal care consultations	30,857	100%
People trained on SRH-related topics	908	90%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	15,889	100%
People provided with GBV case management	12,881	97%
People reached with GBV awareness messages	198,770	99%
People trained on GBV-related topics	503	69%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	82	57%



93

PRIMARY HEALTHCARE FACILITIES*



36

WOMEN AND GIRLS SAFE SPACES



19

EMERGENCY OBSTETRIC CARE FACILITIES



15

YOUTH CENTRES



99

MOBILE CLINICS



61

OTHER SERVICE DELIVERY POINTS

* Above figures reflect fully-supported service-delivery points. Inside Syria, an additional 638 primary healthcare facilities are being partially supported through the Ministry of Health.

“ WE HAVE TO SHOW COMMITMENT TO EDUCATION AND MAKE EVERY EFFORT TO KEEP LEARNING BECAUSE IT IS THE ONLY WAY TO MAKE OUR DREAMS COME TRUE.

– HANIN, a young woman from Deir-ez-Zor

IN SYRIA, UNFPA CONTINUES TO PROVIDE SUPPORT TO THOSE MOST MARGINALISED, WITH A FOCUS ON WOMEN AND GIRLS.

HALFWAY THROUGH 2022, THE SITUATION IN SYRIA REMAINS VOLATILE. WOMEN AND GIRLS ARE PAYING THE STEEPEST PRICE.

"After such a long time in crisis, it becomes harder to cling to hope every year," explains Samar, a young woman from Aleppo, Syria. "If I had the power, I would create a world without violence, where every woman and girl can have the freedom to live the life she wants."

Like many other Syrians — particularly women and girls — living throughout the Arab region and beyond, Samar feels left alone as she faces her fate. When the crisis passed the decade mark in 2021, the world was already a year into the COVID-19 pandemic, and an array of other humanitarian situations were emerging. Among the millions of Syrians who have spent the last 11 years surviving conflict, displacement, economic collapse, and mounting risks to their safety, many feel their calls for help have increasingly been drowned out.

In 2022, around 14.6 million people are estimated to be in need throughout Syria, including 3.7 million women and girls of reproductive age. Meanwhile 7.1 million refugees, asylum seekers, or stateless people require humanitarian assistance region-wide, including an estimated half a million pregnant women and adolescent girls who urgently need access to health care.

The ongoing conflict has caused tremendous stress, anxiety, and suffering, which has spilled over into private life. Women and girls tell UNFPA that gender-based violence has become so widespread and unchecked that many feel it has become normalised.

UNFPA and its partners remain committed to providing life-saving services to women and girls in Syria and in camps and host communities throughout the region. Providing Syrian communities with the services and support they need in 2022 requires a concerted and committed effort by the international community. UNFPA will continue to amplify the voices of women and girls affected by this crisis, and coordinate with partners as we strive to leave no one behind.

The pleasure of seeing mothers and their babies in good health

On a daily basis, Dr. Alaa spends six hours helping women and girls safeguard their sexual and reproductive health and rights. A gynaecologist at a UNFPA-supported facility in Deir-ez-Zor city, the services she provides can often serve as the only available lifeline to women and girls in need in the area.

"This is why I agreed to join this project two years ago," explains Dr. Alaa. "The large number of people seeking services doesn't frustrate me. On the contrary; it motivates me to work hard and improve."

Dr. Alaa's high spirits don't come from nothing. She attributes her positive attitude to being part of a dedicated, cohesive team of more than 20 people, all of whom bring a sense of dedication and purpose to the work they do. In addition to Dr. Alaa, the team includes a nurse and a professional midwife who provide immediate support, in addition to a case manager, a pharmacist, an outreach assistance, and a psychosocial support expert. Together, they provide an integrated service package that not only helps meet the sexual and reproductive health needs of those being served but also ensures that adequate referral pathways are always present when needed. The integrated structure also guarantees that awareness messages are consistently being delivered to women and girls being served.

'The large number of people seeking services doesn't frustrate me. On the contrary; it motivates me to work hard and improve'

"Working with this team is fantastic and the members are all cooperative," adds Dr. Alaa. Since she joined the clinic, she and the team have helped hundreds of women to get pregnant, deliver their babies safely, recover from infertility, and improve their infants' health as well as their own.

"It brings me great joy and satisfaction to help guide these women through the various stages of pregnancy and to consistently follow up on their condition regularly," explains Dr. Alaa with a smile. Her positive and self-assured attitude seems to pervade the entire facility, be it among her team or the many women coming and going to receive the services being offered free of charge. Given the dire economic situation in the country following the crisis, quality healthcare has become out of reach for many families in Syria, rendering facilities like this one all the more essential.

'It brings me great joy and satisfaction to help guide these women through the various stages of pregnancy'

As she carries on with her work, Dr. Alaa recalls the experience of a woman who came to the facility a year ago asking for help — one of the many success stories at the facility: "She had received medical treatment for seven years trying to get pregnant but to no avail. We gave her a thorough examination and put together an active treatment plan for her that lasted a few months. The plan was quite effective; she is now in the fourth month of her pregnancy."

As she narrates the story, Dr. Alaa brims with joy. "These small victories mean a lot to Syrian families, particularly those who simply cannot afford this kind of treatment. They mean a lot to me as well, particularly when I see these women healthy, happy, and empowered."

Since January 2022, UNFPA Syria has provided more than 445,000 individuals with vital SRH services such as those being delivered by Dr. Alaa. In Deir-ez-Zor, UNFPA continues to deliver an array of vital services that include antenatal and postnatal care, obstetric care, psychosocial support, and case management services through nine mobile teams, three static clinics, and three Safe Spaces throughout the governorate.



TÜRKIYE CROSS-BORDER

ENSURING THAT ALL COMMUNITIES INSIDE SYRIA HAVE ACCESS TO QUALITY SEXUAL AND REPRODUCTIVE HEALTH AND GENDER-BASED VIOLENCE SERVICES.

61,250

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

96% FEMALE

2,340

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

91% FEMALE

53,854

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

76% FEMALE

15,105

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

3,410

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

78% FEMALE

1,215

PEOPLE TRAINED ON VARIOUS TOPICS

77% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	7,298	100%
Normal and assisted vaginal deliveries	7,766	100%
C-Sections	2,411	100%
Ante-natal care consultations	32,691	100%
Post-natal care consultations	15,377	100%
People trained on SRH-related topics	174	86%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People provided with GBV case management	1,098	97%
People reached with GBV awareness messages	39,320	70%
People trained on GBV-related topics	1,041	75%



7

PRIMARY HEALTHCARE FACILITIES *



15

WOMEN AND GIRLS SAFE SPACES



7

EMERGENCY OBSTETRIC CARE FACILITIES



1

MOBILE CLINIC

“ MY LIFE CHANGED WHEN MY VILLAGE WAS BOMBED ... THAT DAY, I LOST EVERYTHING – MY HOME, MY WORK, AND HOPE FOR THE FUTURE.

– FATIMA, a woman from north-western Syria

IN NORTH-WESTERN SYRIA, UNFPA CONTINUES TO RESPOND TO ONGOING DISPLACEMENTS, HOSTILITIES, AND EXTREME CONDITIONS

HALFWAY INTO 2022, MASS DISPLACEMENTS CONTINUE TO PLACE LIVES AT RISK. UNFPA IS FOCUSING ON EMPOWERING WOMEN AND GIRLS THROUGH VARIOUS PROGRAMMES DESIGNED TO COMBAT AND RESPOND TO GENDER-BASED VIOLENCE.

A far-reaching humanitarian crisis continues to unfold in north-western Syria. In June, UNFPA continued to advocate for the renewal of the UN Security Council Resolution, authorizing cross-border assistance to north-west Syria. UNFPA conducted a series of high-level missions and meetings, including one at Bab-Al-Hawa crossing-point, to advocate for maintaining access through cross-border operations and continued provision of life-sustaining protection and health services to women and girls in the region.

Of the area's population of 4.4 million, 4.1 million people are in urgent need of humanitarian aid, 2.8 million are internally displaced, 3.1 million are food insecure and 3.1 million are in need of health assistance. UNFPA estimates that 1,250,000 women in northwest Syria are of reproductive age and in need of lifesaving and life-sustaining protection and reproductive health services in addition to 1,770,257 that are in need of GBV services.

In north-western Syria, there are at least 47 "widow's camps" that host widowed, divorced, and single women with children. The sites host an estimated population of 12,715 women and children (4,120 women, 4,449 girls, and 4,146 boys). Women and children living in these sites face aggravated risks, including family separation, restriction of movement, high risks of forced and child marriages, high incidents of exploitation, among others.

The GBV Sub Cluster will be leading on the implementation of an Inter-Cluster Action Plan to respond to the needs of widowed and divorced women and their families. Key features of the Action Plan will include the systematic collection of information on protection and multisectoral needs at each of the known 47 widows' camps to inform the plan's priorities, in addition to scaling up GBV programming to focus on female-headed households and separated families. Moreover, in addition to prioritising education services in widows' camps as well as for children leaving the sites, the plan will also serve to deliver mobile health services, MHPSS support, and awareness raising on substance abuse and addiction, among other key services.

BEFORE COMING TO THIS SPACE I FELT HOPELESS AND I COULD NOT EVEN IMAGINE HOW TO GET OUT OF THIS TERRIBLE SITUATION

– FATIMA, a displaced person from north-western Syria

In the words of Fatima, a woman from north-western Syria, who is among the millions currently displaced

My life changed when my village was bombed, and I had to flee to a camp with my husband and my three children. That day, I lost everything – my home, my work, and hope for the future.

In retrospect, my life has never been easy. My grandfather forced me to get married when I was 15-year-old – a marriage during which I experienced all manner of violence, from psychological torment to physical abuse. But everything became worse after the bombing.

'That day, I lost everything – my home, my work, and hope for the future.'

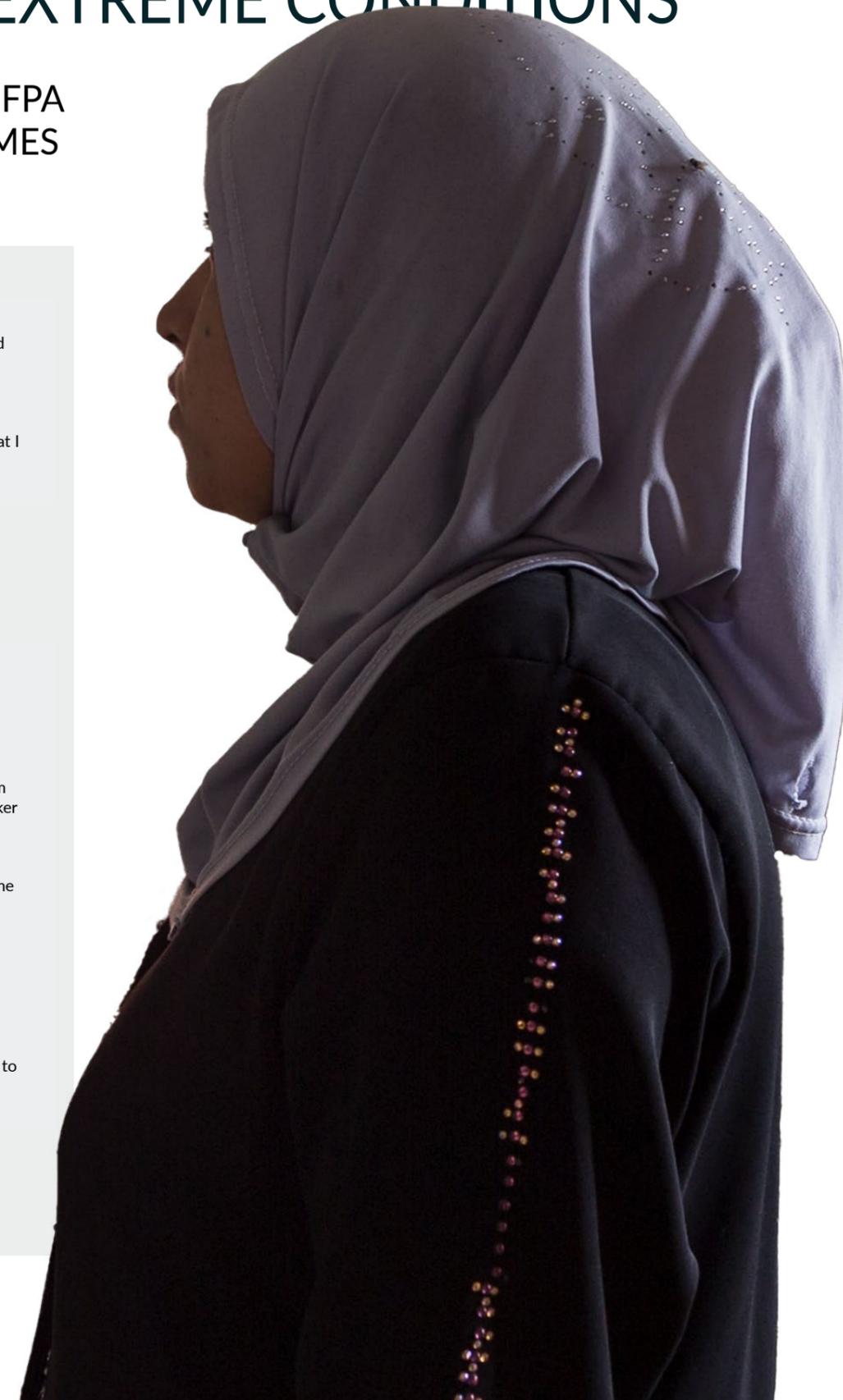
My husband was injured and became disabled, which only worsened his need to humiliate me. Our financial situation also became very difficult. Before, I was working as a hairdresser, but that day I lost all my equipment. I did not know what to do and, given my husband's condition, we were forced to pull our children out of school to reduce our expenses. We had no other choice.

A few months back, as we were preparing for Eid al-Fitr, my children asked for new clothes. My heart ached, because I simply could not afford them. Tears would often pour out of my eyes just thinking of their situation. It was only at the UNFPA-supported Safe Space near the camp that I found the courage to ask for help.

'It was only at the UNFPA-supported Safe Space near the camp that I found the courage to ask for help.'

At the Safe Space, the case manager listened to my story and together we prepared an action plan. During our regular consultation meetings, she shared with me some relaxation techniques to release pressure and use healthy coping mechanisms. We decided that I may benefit from individual counselling sessions and the caseworker referred me to an organisation providing micro-grants, which I used to buy new hairdressing equipment and restart my own business. The caseworker and her colleagues also gave me some clothes for my children and helped me to enrol them back to school.

Before coming to this space I felt hopeless and I could not even imagine how to get out of this terrible situation. Now, I feel empowered, and I can earn my own income again. This year's Eid celebration was uniquely cheerful for my family. Our life has changed and the smile has returned to my children's faces.



TÜRKIYE COUNTRY OFFICE

WITH THE HIGHEST NUMBER OF SYRIAN REFUGEES IN THE CRISIS REGION, TÜRKIYE CONTINUES TO PROVIDE MUCH-NEEDED ASSISTANCE TO DISPLACED SYRIANS THROUGHOUT THE COUNTRY.

57,237

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

78% FEMALE

5,996

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

55% FEMALE

35,199

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

78% FEMALE

7,260

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

11,852

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

84% FEMALE

3,558

LGBTQI+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

550

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

49% FEMALE

3,500

PEOPLE TRAINED ON VARIOUS TOPICS

71% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	19,741	90%
Ante-natal care consultations	10,864	100%
Post-natal care consultations	7,313	100%
People trained on SRH-related topics	838	65%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	16,115	92%
People provided with GBV case management	1,480	61%
People reached with GBV awareness messages	24,308	82%
People trained on GBV-related topics	1,424	65%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	1,238	84%



4

WOMEN AND GIRLS SAFE SPACES*



14

OTHER SERVICE DELIVERY POINTS



10

MOBILE CLINICS



4

YOUTH CENTRES

* Safe Spaces in Türkiye are providing an integrated response to refugees in need, including both gender-based violence and sexual and reproductive health services in the same facility.

“ THESE DAYS WHEN I FEEL THE LOSS OF MY MOTHER, I FEEL THE SUPPORT OF THE WOMEN HERE, AND I FEEL BETTER.

– RIMA, a Syrian woman from Raqqa, who accessed services at a UNFPA-supported Safe Space in Türkiye

IN TÜRKIYE, UNFPA CONTINUES TO CHAMPION THE RIGHTS AND WELL-BEING OF THOSE MOST MARGINALISED.

AS TÜRKIYE CONTINUES TO FACE A MOUNTING ECONOMIC CRISIS, UNFPA IS COMMITTED TO WORKING WITH GOVERNMENT AND LOCAL PARTNERS TO ENSURE THAT WOMEN AND GIRLS ARE NOT LEFT BEHIND.

Halfway through 2022, the well-being of the Syrian refugees in Türkiye continues to deteriorate. A report published by the Community-Based Protection and Social Cohesion Task Force revealed a number of stark findings, including the fact that Syrian nationals are increasingly feeling a shift in the local community's perception of them following the economic downturn and marked inflation Türkiye is experiencing. Many participants shared their hesitation of speaking Arabic in public due to hostile reactions by the host community, indicating that the negative discourse on Turkish media does not only affect their psychological well-being but is increasingly reinforcing their fears due to discriminatory statements and attitudes. Peer bullying cases are increasing among school students, while almost half of participants stated that they do not feel secure in their neighbourhoods.

Moreover, findings from other studies on social cohesion, highlighted that these tensions are being fuelled by a multitude of factors which, in addition to economics, include the growing politicisation of refugees, misinformation, and poor planning by service providers (such as aid programmes that exclusively target refugees). Meanwhile, language barriers and geographical divisions due to "Ghettoization" are also contributing to the divide, further exacerbated by an overall lack of interest by members of both communities to take part in joint events.

In an effort to respond to these alarming challenges, UNFPA continues to provide SRH and protection services, including those designed to prevent and respond to GBV, accompanied by dignity kits and reproductive health materials. In addition, UNFPA provides social

cohesion activities and economic and social empowerment activities, including literacy courses, language courses, vocational training, outdoor sport activities, visits to historical sites and museums, and other socio-cultural events.

In June, in order to strengthen the capacity of implementing partner staff on provision of SRH and GBV services, UNFPA conducted a series of self-care training sessions for health service providers and outreach workers; supervision and monitoring visits were conducted to the service units on GBV case management and protection service provision. In addition, the Istanbul Shelter staff benefited from capacity building training on standard operating procedures and the Key Refugee Group service units staff attended the Hotline training to strengthen their capacity in providing services via the Hotline, that can be freely accessed by refugees around the clock.

UNFPA also continues to expand partnerships with local municipalities. In June, a new memorandum of understanding was signed with Çankaya Municipality from Ankara. The MoU includes activities on the empowerment (vocational) of refugee women. The agreement brings a series of capacity building sessions for staff were planned on refugee rights, working with the vulnerable groups, gender equality and gender based violence. More sessions will be provided in the coming months.

Lastly, to strengthen referral pathways, UNFPA provided a training for the Izmir Bar Association on key refugee groups (i.e. LGBTQI+, refugees living with HIV, and sex workers) to raise awareness of service providers on the group specific needs and gaps in accessing legal services.

The lasting scars of war and discrimination

Mohammed experienced severe trauma during his military service in Syria in 2011. To this day, he often experiences many sleepless nights as he recalls some of those experiences.

A former resident of Daraa, Syria, Mohammed's story reveals the scars that discrimination and marginalization can cause. In addition to experiencing the unimaginable violence of armed conflict, Mohammed experienced serious discrimination in the army due to his religious background, and his years of service at the military were marked by consistent abuse and marginalisation.

'I still relive that experience over and over in my nightmares'

"They would often force us to go outside and crawl on our knees wearing nothing but shorts in sub-zero temperatures," recalls Mohammed. "I was once forced to stay in a prison cell without a toilet for nine days. I still relive that experience over and over in my nightmares."

Then there was the violence that inevitably accompanies armed conflicts such as those that regularly took place

in Syria. Mohammed saw women being brutally attacked and raped. He was kidnapped by a terrorist organisation for six months, during which time he was subjected to torture and witnessed physical and sexual violence against children. "I was almost executed for trying to help a child. The thing that I resent most was that my hands were tied while all this was happening."

'The thing that I resent most was that my hands were tied while all this was happening'

Mohammed, who migrated to Türkiye in 2012, is 30 years old today. Even after leaving his old life behind, he could never share these experiences with anyone, including his spouse and father. The weight of these experiences had nearly broken him by the time he crossed paths with a UNFPA-supported facility in Izmir.

Mohammed initially asked to receive legal counselling to address some of the civil and legal issues he was dealing with. He then asked to see the health counsellor and the psychologist at the

facility and began receiving psychosocial support. He says that he feels more relaxed now and is able to see ahead better.

"It feels good to be finally able to share the things that I have not been able to talk about with anyone," reflects Mohammad. "Before coming to this facility, I would always question the value of talking to someone about these things. Here, I experienced a different kind of care, and I have noticed that talking about these things makes me feel better. My message to survivors is to never lose hope."

'Before coming to this facility, I would always question the value of talking to someone about these things. Here, I experienced a different kind of care'



LEBANON COUNTRY OFFICE

UNFPA CONTINUES TO ADAPT ITS PROGRAMMES TO PROVIDE LIFE-SAVING SERVICES TO PEOPLE IN NEED, WITH A FOCUS ON WOMEN AND GIRLS.

37,965

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

6,535

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

22,159

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

90% FEMALE

894

LGBTQI+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

516

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

1,731

PEOPLE TRAINED ON VARIOUS TOPICS

99% FEMALE

1,138

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

100% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	5,007	100%
Ante-natal care consultations	273	100%
Post-natal care consultations	2,902	100%
People trained on SRH-related topics	637	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	16,814	100%
People provided with GBV case management	235	97%
People reached with GBV awareness messages	4,928	77%
People trained on GBV-related topics	1,072	98%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	22	100%



6

PRIMARY HEALTHCARE FACILITIES



11

WOMEN AND GIRLS SAFE SPACES



2

MOBILE CLINICS



MANY COMMUNITIES DO NOT REALISE THAT WAY THEY TREAT US WOMEN IS UNFAIR AND HARMFUL. THIS IS WHY I AM COMMITTED TO THESE AWARENESS SESSIONS. THEY ARE HELPING WOMEN UNDERSTAND THEIR RIGHTS.

– NARJIS, a Syrian refugee living in Lebanon

DESPITE A COLLAPSING ECONOMY AND MOUNTING CHALLENGES, UNFPA LEBANON CONTINUES TO TARGET THOSE MOST IN NEED

UNFPA is targeting marginalised communities as Lebanon experiences another difficult year.

Lebanon continues to be assailed by compounding crises that span ongoing economic collapse, recurrent waves of COVID-19, and a growing food security crisis exacerbated by the ongoing war in Ukraine and the lingering effects of the 2020 Beirut Port blast. The Lebanese Lira continues to deteriorate massively accompanied with a disastrous inflation. The deleterious situation is worsening the hardships faced by all population groups, but women and girls continue to face greater risks of gender-based violence and discrimination.

According to OCHA, around 2.5 million people are currently in need of humanitarian assistance in Lebanon, including vulnerable Lebanese, migrants, and Palestinian refugees in Lebanon, in addition to 1.5 million Syrian refugees. During meetings with the Lebanese Government, the Humanitarian Coordinator for Lebanon Najat Rochdi announced that Lebanon Humanitarian Fund (LHF) has allocated US\$16 million to scale up humanitarian response in the country through a collaborative, inclusive, and transparent approach to address the most urgent needs. Around 65 per cent of the allocated funding is targeting Lebanese, 31 per cent for Syrian refugees, and the remaining amount for migrants and Palestine refugees.

During June, Interior Minister Bassam Mawlawi ordered security forces to stop gatherings of the LGBTQI+ community in Lebanon as part of the Pride month celebrations, following pressure from religious leaders. In response, the UN and international community issued a joint statement condemning this act which violates the people's rights and reinforces discrimination.

Meanwhile, public administration employees in Lebanon called for an open strike as of June 13 to protest the impact of the economic crisis and called for adjusting their salaries and compensation to match escalating prices. Public administration employees and retired police officers also held a sit-in, blocking the road outside the Serail in Tripoli to demand similar adjustments to their salaries and retirement pensions. Protesters denounced the sharp decrease in the purchasing power of most Lebanese as the local currency (LBP) has lost more than 90 percent of its value since the beginning of the economic crisis in October 2019. Hundreds of people and several lawmakers protested during the same week in southern Lebanon against Israel moving a gas production vessel into an offshore field partly claimed by Beirut, signalling an extended dispute.

As Lebanon continues to grapple with rising COVID-19 infections, the network of midwives established in partnership between the Lebanese Order of Midwives

(LOM) and UNFPA continues its interventions to promote COVID-19 vaccination among pregnant and lactating women and ensure provision of information on Infection Prevention and Control (IPC) measures through awareness sessions. Around 30 percent of women reached were not convinced to take the COVID-19 vaccine, citing fears of complications experienced by their relatives/ neighbours as well as the decreasing number of COVID-19 infections. Outreach and awareness sessions along with home visits are conducted to address and reverse the high percentage.

Also on the occasion of the Midwifery Day, the LOM with the support of UNFPA conducted a workshop for midwives about the challenges in midwifery practice and the opportunities for midwife's empowerment. Among the key recommendations were the need for continuous education to support the professional development of midwives and the adoption of the midwifery-led model to enhance access to care for the most vulnerable women. UNFPA also continues its support for the provision of SRH services and awareness sessions through its partners, offering medical consultations, family planning counselling, and various RH interventions such as IUD insertion/removal, PAP Smear test, mammography and lab tests, ultrasound, and imagery tests. Dignity kits are being distributed to vulnerable women and girls during the awareness sessions.

Meanwhile, UNFPA continues to provide comprehensive GBV services in Akkar, North, Bekaa, Mount-Lebanon, and Beirut. UNFPA managed to reach people with specialised services such as case management and referrals, in addition to implementing empowerment, prevention, and risk-mitigation activities, including community psychosocial support activities, vocational training, life-skills sessions, and counselling to vulnerable populations. It is worth noting that UNFPA has been providing a range of GBV services to the LGBTQI+ community through a partnership with a local NGO.

Lastly, UNFPA continues to provide cash and voucher assistance to those most in need. CVA has proven to be a powerful instrument that can save lives, alleviate risks, and help women and girls escape abusive environments. UNFPA has also observed that CVA is directly contributing to the realisation of UNFPA's Three Transformative Results of zero unmet need for contraception, zero preventable maternal deaths, and zero gender-based violence and harmful practices, which UNFPA is committed to achieving by the year 2030.

'Sometimes they just need someone to talk to'

Over the past two years, 30-year-old Amal has been working as a nurse at the primary healthcare centre at Caritas, one of UNFPA Lebanon's implementing partners.

"I used to work at a private hospital, but my job primarily consisted of technical tasks; there was no room for further humanitarian interaction," explains Amal. "This is what I like about my current work. I get to talk to people, to interact with the community."

'Everyone here, including both host and refugee communities, has the right to benefit from a wide range of reproductive services'

This interaction, adds Amal, is vital for healthcare workers and humanitarian actors to understand the struggles of the people. "How are we supposed to know what's wrong with them? Sometimes they just need someone to talk to."

As part of the collaboration between Caritas and UNFPA Lebanon, Amal provides medical consultations and diagnostic tests, in addition to awareness sessions on reproductive health related topics such as family planning. The team also distributes dignity kits to women and adolescent girls who need them.

"The support is provided by a team of specialists, including gynaecologists and nurses," says Amal. "Everyone here, including both host and refugee communities, has the right to benefit from a wide range of reproductive services. The interaction we have with people is also

allowing us to identify new issues that we're not necessarily aware of."

During her assignment, Amal has encountered many cases in which the services she provides proved life-saving. "Part of the outreach sessions I do is encouraging women to go for regular check-ups. Following one of these sessions, a woman came to me and asked for a medical consultation. That day, a pelvic ultrasound showed that she had a tumour in her uterus. Women don't know that regular consultations and examinations are important – they need to be reminded."

'The interaction we have with people is also allowing us to identify new issues that we're not aware of'

The same goes for early marriages, explains Amal. "Everyone must be aware of the repercussions, and this is why we try our best to reach out to more women and adolescent girls to prevent early marriages and thus pregnancies that might contribute to maternal mortalities."

For Amal, the work being done has proven personally fulfilling, particularly when she is able to make a difference in the lives of a woman or girl in need. "There is no greater sense of reward than when someone tells you that you have changed their lives for the better."



JORDAN COUNTRY OFFICE

WITH 1.3 MILLION SYRIANS NATIONWIDE, UNFPA IN JORDAN CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES AND HOST COMMUNITIES NATIONWIDE.

52,259

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

648

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

96% FEMALE

28,422

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

86% FEMALE

4,532

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

4,139

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

63% FEMALE

251

PEOPLE TRAINED ON VARIOUS TOPICS

76% FEMALE

76

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	9,292	100%
Normal and assisted vaginal deliveries	677	100%
Ante-natal care consultations	17,934	100%
Post-natal care consultations	2,311	100%
People trained on SRH-related topics	96	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People provided with GBV case management	1,170	92%
People reached with GBV awareness messages	15,089	82%
People trained on GBV-related topics	55	96%

YOUTH SERVICES

	TOTAL	% FEMALE
People trained on youth-related topics	100	43%



16

PRIMARY HEALTHCARE FACILITIES



19

WOMEN AND GIRLS SAFE SPACES



1

EMERGENCY OBSTETRIC CARE FACILITY



1

YOUTH CENTRE

“ I FELL TO THE FLOOR AND BURST INTO TEARS, AND I SIMPLY RECALL MYSELF PLEADING FOR PROTECTION. THE ANXIETY HAD REACHED SUCH DEEP LEVELS THAT IT MADE ME FEEL OVERWHELMED.

– SALMA, who recently received gender-based violence support at a UNFPA-supported facility in Jordan

IRAQ COUNTRY OFFICE

IN IRAQ, UNFPA CONTINUES TO PROVIDE ESSENTIAL SUPPORT TO MORE THAN 316,000 SYRIAN REFUGEES AS 1.2 MILLION PEOPLE REMAIN DISPLACED NATIONWIDE.

9,321

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

173

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

98% FEMALE

1,810

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

93% FEMALE

472

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

332

YOUNG PEOPLE ENGAGED THROUGH VARIOUS ACTIVITIES

49% FEMALE

62

PEOPLE TRAINED ON VARIOUS TOPICS

52% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	9,850	100%
Normal and assisted vaginal deliveries	233	100%
C-Sections	74	100%
Ante-natal care consultations	7,197	100%
Post-natal care consultations	1,847	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
People reached with dignity kits	343	100%
People provided with GBV case management	62	100%
People reached with GBV awareness messages	9,633	82%
People trained on GBV-related topics	2	100%



9

PRIMARY HEALTHCARE FACILITIES



9

WOMEN AND GIRLS SAFE SPACES



1

EMERGENCY OBSTETRIC CARE FACILITY



1

YOUTH CENTRE



1

GBV MOBILE TEAM

As Iraq transitions to focus on development programming, UNFPA continues to serve those marginalised

Nearly 1.2 million Iraqis continue to live in protracted situations of internal displacement and the country hosts over one-quarter of a million refugees. These displaced populations are often more vulnerable to protection risks—such as arbitrary arrest and detention, trauma and psychological stress, the threat of eviction from their homes, and lack of access to essential services than the population at large. Nearly one-in-five Syrian refugees rely on charity and cash assistance for food, and more than half report experiencing difficulties accessing healthcare services.

While significant humanitarian support is still crucial for many, efforts in the country are gradually transitioning from humanitarian interventions and placing more focus on development interventions to support public institutions to deliver basic services and ensure their socio-economic integration. At the same time, Iraq's overall political, economic, and security environment remains unpredictable.

Iraq's Health Ministry has said that more than 4,000 people received medical help for breathing problems amidst a new severe sandstorm that engulfed large parts of Iraq. The storm shut down government offices, grounded flights, and closed Iraq's seaports in Basra.

UNFPA Iraq continues to provide SRH services in nine refugee camps throughout the country. These include antenatal care, family planning consultation, postnatal care, gynaecological consultations and referral

pathways to secondary hospitals for the purpose of normal delivery, caesarian sections and complication cases.

In May, the SRH team in refugee camps started an awareness campaign that saw teams going tent-to-tent, reaching more than 2,300 women with vital information on the importance of family planning. UNFPA also partnered with the Ministry of Youth and Culture to conduct activities to raise awareness on peace-building, reproductive health and gender-based violence at its youth centre and also through its three-day sports tournament for girls.

EGYPT COUNTRY OFFICE

UNFPA EGYPT CONTINUES TO PROVIDE ASSISTANCE TO SYRIAN REFUGEES IN THE COUNTRY, WITH A FOCUS ON WOMEN AND GIRLS.

131,314

PEOPLE REACHED WITH REPRODUCTIVE HEALTH SERVICES

100% FEMALE

5,424

PEOPLE REACHED WITH GENDER-BASED VIOLENCE SERVICES

96% FEMALE

15

PEOPLE WITH DISABILITIES REACHED WITH SPECIALISED SERVICES

87% FEMALE

759

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

842

PEOPLE TRAINED ON VARIOUS TOPICS

91% FEMALE

10

WOMEN AND GIRLS' SAFE SPACES

REPRODUCTIVE HEALTH	TOTAL	% FEMALE
Family planning consultations	315,100	100%
Ante-natal care consultations	321	100%
People trained on SRH-related topics	842	91%

GENDER-BASED VIOLENCE	TOTAL	% FEMALE
People provided with GBV case management	738	95%
People reached with GBV awareness messages	1,714	91%

UNFPA continues to tailor its programmes in Egypt to respond to the needs of women and girls caught in the crisis

More than 280,000 refugees and asylum seekers from 66 countries of origin are currently living in Egypt, around half of whom are Syrians. Most refugees and asylum-seekers are located in urban areas of Greater Cairo and on the northern coast. During June, UNFPA continued to support 10 Safe Spaces in six governorates, delivering vital services to survivors or those at risk of gender-based violence. UNFPA is particularly focusing on mental health and well-being, with more than 460 women and girls attending multiple MHPSS sessions that span sound therapy, yoga, psychological balance workshop, identity crisis and psychological support, group therapy, and others. GBV awareness raising activities were also delivered with a focus on the types of GBV, sexual harassment, and prevention using sports for GBV. Reproductive health awareness sessions were delivered to women and girls with topics including puberty, menstrual health, and Hepatitis prevention.



THIS SAFE SPACE HAS ALLOWED ME TO FIND MY OWN WORTH AND COMMUNITY. I FEEL STRONGER AND READY TO START LIVING.

— YOSRA, a Syrian woman from Rural Damascus

Celebrating World Refugee Day

UNFPA, along with UNHCR and WHO, marked World Refugee Day on June 19, 2022 with a joint community event under the theme "Whoever. Wherever. Whenever. Everyone has the right to seek safety." The event included several activities targeting refugee communities such as live music performances, an art therapy workshop focused on upcycling tools, awareness sessions on gender-based violence and mental health for women and girls, a Wendo self-defense workshop, a sports activity for youth, and an interactive theater performance.

"When I first came to the safe space, I felt like I was being welcomed as part of a family," said one woman refugee who participated in the event. "That encouraged me to attend the World Refugees Day event as well, and there I learned even more about my rights, needs, and how to protect myself, not just as a refugee but also as a woman. I felt like I could finally catch my breath."

The theme for World Refugee Day 2022 underlines that every person in the world has a right to seek safety, whoever they are, wherever they come from and whenever they are forced to flee. Seeking asylum is a human right. Anyone fleeing persecution, conflict, or human rights abuses has a right to seek protection in another country. People forced to flee should be treated with respect and dignity. Among other things, this means keeping families together, protecting people from traffickers, and avoiding arbitrary detention.



COORDINATION UPDATES

UNFPA CONTINUES TO LEAD THE GBV AREA OF RESPONSIBILITY, ENSURING THAT MINIMUM STANDARDS ARE IN PLACE TO PREVENT AND RESPOND TO GENDER-BASED VIOLENCE IN EMERGENCIES.

In June, the Whole of Syria GBV AoR continued the preparation of both sectoral and multi-sectoral needs assessments to inform both the 2023 Humanitarian Needs Overview (HNO) and the WoS GBV AoR annual Voices from Syria report. The GBV AoR coordinated with other humanitarian sectors to mainstream GBV risk mitigation and gender throughout different humanitarian sectors' questionnaires and assessment tools. This is of crucial importance in a situation where the Multi-sectoral Needs Assessment (MSNA) data gathering exercise does not allow collecting in depth GBV and Protection information due to the sensitivity of the topic. Additionally, the AoR contributed to the finalization of the sampling for the protection key informant interviews (KIIs) and the selection of the communities and facilitators for community focus group discussions. The AoR also finalized the community FGD tools and organized two training programmes for FGD facilitators in coordination with the protection sector and other AoRs.

Meanwhile, the WoS GBV AoR published the [WoS GBV dashboard](#) for the period Jan-Mar 2022, with a revised format to help users access WoS GBV data in a more friendly way.

Also in June, the UNFPA Regional Humanitarian Hub for Syria and the Arab States collaborated with the Global GBV AoR Community of Practice to hold a webinar under the heading of Transcending Gender Norms, focusing on how to use gender transformative approaches in Safe Spaces in humanitarian settings (recording available [here](#)). Over seventy global GBV specialists who are part of the Community of Practice network participated in the event, during which the Hub presented its knowledge product [Transcending Norms](#), highlighting the gender transformative potential of Safe Spaces through real-life insights from the field. The Hub also continued its efforts to coordinate the replication of the existing Awareness Raising Toolkit, originally developed by the Türkiye Cross-Border GBV Sub-cluster, in Iraq and Yemen. The steps and timelines of the adaptation and replication initiative have been identified and agreed upon. A consultant is being recruited to support the process.

In Syria, the UNFPA team in Deir-ez-Zor has updated all documents related to GBV coordination, such as referral pathways and service mapping. The UNFPA referral pathway guidance was the cornerstone for similar documents developed by other UN agencies, and UNFPA is in the process of developing joint guidance with support from UNDP and FAO.

Through Türkiye cross-border, the GBV Sub-Cluster and the Sexual and Reproductive the Technical Working Group (SRH TWG) have launched a joint initiative aimed at fostering the level of integration of gender-based violence services into facilities providing reproductive health services in northwest Syria. In June, a detailed outline of the initiative was developed and disseminated. The initiative targets SRH facilities in northwest Syria and it is implemented in three geographical areas, namely Idlib, Afrin, and Northern Aleppo. As of today, the level of provision of integrated quality services has been assessed in 50 facilities and 2,140 medical staff, and 1,248 non-medical staff that have been interviewed. An interagency coordination team composed of 64 technical members (30 from the SRH TWG, and 34 from the GBV SC) representing 45 different organisations has been established to lead the implementation of the initiative.

In Turkey, the Protection Working Group informed member organisations that the registration process for Syrian refugees in Türkiye has changed. The registration will take place at referral / temporary accommodation centres (TAC). Newcomers or unregistered Syrians will be referred to TACs where they will be required to stay until their security checks are completed. Temporary protection ID cards will be issued only for those whose security checks are completed positively. Registration by PDMMs (as per previous practice) will be possible only for the exceptional categories.

UNFPA, as the co-chair for the GBV sub-working group from Southeast Türkiye, presented the activities provided to men and boys survivors of sexual violence. It was noted that the men and boys service units, which are operated by UNFPA

Türkiye in collaboration with Positive Living Association, provide SRH services, GBV prevention, and response services for refugee men and boys who have been subjected to sexual violence and/or at risk of sexual violence. In addition, the service units cover the cost of HIV medications for up to three months. UNFPA also marked International Day for Elimination of Sexual Violence by inviting participants to attend a capacity building training on the topic.

Meanwhile, as the Chair of PSEA Network, UNFPA invited Ghulam Ghous, the Lebanon PSEA Network Coordinator, to share her experience and the perceptions and the barriers in front of reporting sexual exploitation and abuse (SEA) cases faced by refugees in Lebanon. UNFPA informed members that an online training package (developed by UNHCR Türkiye) on SEA Investigation is available on the disasterready.org platform. In addition, UNFPA drew members' attention to the need for localising investigation procedures for SEA cases and announced that the PSEA Network is looking for an organisation to volunteer for coordinating this action.

Moreover, for the first time since the COVID-19 pandemic, UNFPA organised an in-person GBV coordination meeting in Izmir, with a key agenda item being the situation of Ukrainian refugees in Türkiye. Experts from the Social Services Centre of the Ministry of Family and Social Services attended the meeting and shared experiences on protecting the most vulnerable Ukrainian refugees in Antalya.

In Lebanon, GBV coordination meetings took place between GBV and SRH partners, supported through SIDA funding. These were conducted to ensure adequate referrals, service provision, and attendance at Safe Spaces. UNFPA also finalised the agreement with a financial service provider to implement disbursements of cash assistance.

“ I'VE SPENT MY LIFE TRYING TO FIND THE KIND OF SUPPORT AND UNDERSTANDING THAT I FOUND IN THIS SAFE SPACE, AMONG THESE REMARKABLE WOMEN WHO REFUSE TO SURRENDER TO CIRCUMSTANCE.

— RAYA, who received protection services at a UNFPA-supported facility



DONORS & PARTNERS

CURRENT DONORS

Australia, Bulgaria, Canada, Denmark, The European Commission, Finland, France, Iceland, Italy, Japan, Republic of Korea, the Russian Federation, Norway, Spain, Sweden, Switzerland, the United Kingdom, USAID's Bureau for Humanitarian Assistance (BHA), and the US Department of State Bureau of Population, Refugees, and Migration (BPRM).

United Nations: OCHA/CERF, UNDP, SCHF, and UNFPA Emergency Funds.

IMPLEMENTING PARTNERS

In Syria: (MOH) Ministry of Health, (MOHE) Ministry of Higher Education, (Mosaic) for Human Relief & Dev., (ICDA) Ihsan Charity Development Association, (NFRD) Nour Foundation for Relief and Development, (SSSD) Syrian Society for Social Development, (Al Tamayouz) Altamayouz for Orphan Sponsorship, (SFPA) Syrian Family Planning Association, (Yamama) Syria Al-Yamama, (Agha Khan) Agha Khan Foundation, (ASSLS) Amelioration of Sanitary and Social Level Society, (CCA) Circassian Charity Association, (Ghiras) Ghiras Ass. for Development, (PACA) Pan Arminian Charity Association, (Sham) Al-Sham Association for Health, (BSWH) Al Bir & Social Welfare Hama, (SARC) Syrian Arab Red Crescent, (SCFAP) Syrian Commission for Family Affairs and Population, (MAC) Mar Asia, (PRCS) The Palestine Red Crescent Society, (IECD) European Institute of Cooperation and Development, (Sanad) Sanad team for development, UNDP, UNICEF, FAO, and WFP.

In Lebanon: Ministry of Public Health, Ministry of Social Affairs, Amel Association, Al Mithaq, Akkarouna, and ABAAD.

In Jordan: Institute for Family Health (IFH), Ministry of Health (MOH), Society Aid Health Jordanian (JHAS), Jordanian Women's Union (JWU), the National Council for Family Affairs (NCFA), National Women's Health Care Centre (NWHCC), Questscope, Higher Population Council (HPC), Generations for Peace (GFP), Health Care Accreditation Counsel (HCAC), International Rescue Committee (IRC), Royal Health Awareness Society (RHAS), the Jordanian National Commission for Women (JNCW), and Save the Children Jordan.

In Iraq: AL Massela, Harika, Zhian and Civil Development Organisation.

In Egypt: UNHCR, Ministry of Health and Population (MOHP), Ministry of Youth and Sports (MoYS), Etijah, and Care International.

In Türkiye: ASAM (Association for Solidarity with Asylum Seekers and Migrants); KAMER (Women's Centre Foundation); Eskisehir Osmangazi University; Harran University; YAHA (Youth Approaches to Health Association); PLA (Positive Living Association); Red Umbrella Sexual Health and Human Rights Association. For the service units that are under direct implementation, UNFPA is collaborating with Ankara Municipality, Sanliurfa Municipality and RASAS (Refugees and Asylum Seekers Assistance and Solidarity Association).

Türkiye Cross-Border: International Rescue Committee (IRC), Relief International (RI), Shafak, Syrian American Medical Society (SAMS), Ihsan for Relief and Development (IhsanRD), and their sub-implementing partners Women Support Association (IhsanRD), Hope Revival Organization (IRC) and Relief Experts Association- UDER (IRC).

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RELEVANT RESOURCES

www.unfpa.org
www.ocha.org
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<http://Syria.humanitarianresponse.info>

