

REGIONAL QUARTERLY REPORT

ON THE SYRIA CRISIS

January – March 2024

“ EVERY YEAR IS PROVING WORSE THAN THE YEAR BEFORE, ESPECIALLY IN TERMS OF THE RISKS AND STRUGGLES OF DAILY LIFE.

– A woman from Aleppo, Syria

SNAPSHOT

As of Q1 2024, the needs of Syrians and host communities are higher than ever, particularly in light of widespread economic collapse, the cumulative impact of 13 years of conflict, climate-related challenges, natural disasters, and various other socio-political factors.

Despite the continuing efforts of humanitarian actors, the Syria crisis remains one of the world's most complex humanitarian and protection emergencies. In 2024, 16.7 million people are in need of humanitarian assistance – the highest number since the onset of the crisis in 2011. This includes more than 8 million women and girls, around 4 million of whom are of reproductive age. Meanwhile, more than 6 million Syrian refugees remain displaced in five neighbouring countries – Türkiye, Lebanon, Jordan, Iraq and Egypt, nearly half of whom are women and girls.

This report 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 (The Hub) in Amman, and spans operations led by UNFPA offices in Türkiye, Lebanon, Jordan, Iraq, and Egypt, in addition to the Whole of Syria (operations led inside Syria, both from Damascus and cross-border via Gaziantep).

With the exception of data on service delivery points, the quantitative data presented in this report is cumulative, covering achievements made between January and the reporting quarter.



JANUARY — MARCH 2024



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

— YUSRA, a woman from Qamishli

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DEVELOPED BY THE UNFPA REGIONAL HUMANITARIAN HUB FOR SYRIA & THE ARAB STATES

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SITUATION OVERVIEW



Despite the continuing efforts of humanitarian actors, the Syria crisis remains one of the world's most complex humanitarian and protection emergencies. In 2024, 16.7 million people are in need of humanitarian assistance – the highest number since the onset of the crisis in 2011. This includes 8.4 million women and girls, around 4.1 million of whom are of reproductive age. Meanwhile, more than 6.3 million Syrian refugees remain in five neighbouring countries – Türkiye, Lebanon, Jordan, Iraq and Egypt, nearly half of whom are women and girls who face mounting risks of violence, exploitation, and lack of access to essential services.

As of early 2024, civilian life and humanitarian assistance remains severely impacted by active conflict in certain areas of the country, in addition to landmines and unexploded ordnance, creating fear for millions of Syrians who have known nothing but conflict and displacement since 2011. These risks have become even more pronounced with the continuing encroachment of Israel's war in Gaza upon Syrian territory.

Meanwhile, basic service capacity in Syria continues to erode, with critical systems like water, sanitation, and public health under severe pressure due to minimal development investment. The region faces recurrent disease outbreaks, waterborne diseases, an extended drought and water crisis, vaccine-preventable illnesses, and food insecurity, leading to increased mortality and morbidity. This includes higher rates of malnutrition and a growing need for humanitarian assistance. Rural Damascus, Idlib, Ar-Raqqa, Quneitra, and Lattakia have reported alarming Global Acute Malnutrition (GAM) levels, with Lattakia experiencing an emergency-level GAM prevalence of 10 percent. Over 12.9 million people

in Syria require food assistance, and the cost of a food basket has dramatically increased, doubling since January 2023 and quadrupling over two years.

As Syrians face these challenges, the economy remains in freefall, sparking some internal migration as families seek livelihoods and better access to services. High inflation, currency depreciation, and rising commodity prices have escalated humanitarian needs, increasing poverty and dependence on aid. By the end of 2023, the value of the Syrian pound had deteriorated to an unprecedented level.

This multifaceted crisis perpetuates vulnerability cycles, particularly affecting those most in need, including individuals with disabilities. The increasing reliance on unavailable basic services exacerbates vulnerability and strains social cohesion. Active conflict and military operations, including shelling and airstrikes, especially near frontlines, have hindered humanitarian access, impacting both aid delivery and the population's access to services.

Women & girls feel unheard and forgotten

In addition to many women and girls lacking access to quality sexual and reproductive health (SRH) services, gender-based violence (GBV) continues to pervade the daily lives of Syrian women and girls impacted by the crisis, as shown by assessments and focus group discussions conducted by UNFPA. Their lives are marked by mutually reinforcing forms of violence and gender inequality, often exacerbated by discriminatory attitudes based on age, displacement status, disability, and/or marital status. This has created an environment in which the health and lives of women and girls are consistently at risk, and in which they're devalued, controlled, exploited, and then blamed for the violence they face.

"Things have gotten much worse in recent years," explains Sali, a young woman living in Areesha camp, who was forced into a child marriage when she was 14, shortly after the crisis erupted. Fortunately, she was able to access services at a UNFPA-supported Safe Space, which helped her overcome her trauma. "The situation is the same for so many girls around me, but many are not able to find support as I did."

Unsurprisingly, women and girls throughout Syria and the crisis region are telling UNFPA that the violence against them has become normalised. 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 gender-based violence, have also been observed in recent years. Adolescent girls in particular face a wide range of challenges that usually accompany them throughout their lives. It usually begins with restrictions on movement and domestic violence, and progresses as the girl grows up to include child and forced marriages, domestic violence, early pregnancy, sexual violence, and sexual exploitation,

among others. Girls are also being denied their right to an education, which further limits their life prospects and can entrap them in an unending cycle of violence and exploitation.

Syrians & host communities still face unprecedented needs

Among the more than 6 million Syrian refugees dispersed across neighbouring countries, women and girls confront heightened vulnerabilities due to the prolonged crisis, with GBV posing an increasing threat. Many find themselves in densely populated and precarious environments where the danger of harassment, assault, and exploitation is ever-present. The deteriorating macroeconomic situation, exacerbated by the war in Ukraine, has pushed numerous families towards harmful survival strategies, including child and forced marriages.

Furthermore, Syrian refugees endure persistent challenges in their host countries, which hampers their efforts to heal from trauma and to rebuild their lives. These include language and cultural barriers, discriminatory attitudes, economic challenges, and many other challenges that can impede their access to work, education, healthcare, and essential services. For refugee women and girls, this often translates into an elevated risk of violence and exploitation and an obstructed path to legal redress. It also poses a key obstacle to their societal integration, leading to their marginalisation and social exclusion. This stark reality accentuates the critical need for interventions that are specifically designed to address the adversities faced by these women and girls and meet their distinct needs.

UNFPA stands with those impacted

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.

In Q1 2024, as part of its regional response to the crisis, UNFPA delivered sexual and reproductive health services to more than 335,000 million people, while more than 225,000 were reached with services designed to prevent and respond to gender-based violence. In addition to reaching more than 95,000 adolescent girls with vital services, more than 700 women were provided with cash and voucher assistance, and more than 2,300 LGBTQIA+ individuals were served.

FROM ALL OPERATIONS

ACHIEVEMENTS MADE THROUGHOUT THE REGION, INCLUDING THE WHOLE OF SYRIA, TÜRKIYE, LEBANON, JORDAN, IRAQ, AND EGYPT.

335,473

PEOPLE REACHED WITH SRH SERVICES

98% FEMALE

4,619

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

87% FEMALE

225,315

PEOPLE REACHED WITH GBV PROGRAMMING

95% FEMALE

2,382

LGBTQIA+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

19,989

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

85% FEMALE

737

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

91% FEMALE

95,236

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

2,684

PEOPLE TRAINED ON VARIOUS TOPICS

81% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	39,938	100%
Family planning consultations	110,765	100%
Normal / assisted vaginal deliveries	5,590	100%
C-sections	2,876	100%
Ante-natal care consultations	87,199	100%
Post-natal care consultations	13,476	100%
People trained on SRH-related topics	1,317	95%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	48,030	100%
People reached with dignity kits	29,867	100%
GBV case management consultations	7,956	95%
People reached with GBV awareness sessions	163,370	95%
People trained on GBV-related topics	1,147	68%

YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	7,268	100%
People trained on youth-related topics	220	65%



107
PRIMARY HEALTHCARE FACILITIES *



125
WOMEN AND GIRLS SAFE SPACES



23
EMERGENCY OBSTETRIC CARE FACILITIES



15
YOUTH CENTRES



104
MOBILE CLINICS



29
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 DEEPEN, 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 build brighter futures for themselves and their families.

THE WHOLE OF SYRIA

UNFPA REMAINS COMMITTED TO ENSURING THAT ALL COMMUNITIES THROUGHOUT SYRIA HAVE ACCESS TO QUALITY SERVICES AND SUPPORT

253,995

PEOPLE REACHED WITH SRH SERVICES

99% FEMALE

168,720

PEOPLE REACHED WITH GBV PROGRAMMING

96% FEMALE

14,596

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

84% FEMALE

68,154

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

3,051

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

91% FEMALE

163

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

1,421

PEOPLE TRAINED ON VARIOUS TOPICS

72% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	29,805	100%
Family planning consultations	95,428	100%
Normal / assisted vaginal deliveries	5,271	100%
C-sections	2,876	100%
Ante-natal care consultations	74,616	100%
Post-natal care consultations	10,619	100%
People trained on SRH-related topics	414	90%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	32,413	100%
People reached with dignity kits	15,817	100%
GBV case management consultations	4,618	98%
People reached with GBV awareness sessions	134,060	96%
People trained on GBV-related topics	863	64%

YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	5,936	100%
People trained on youth-related topics	144	71%



81

PRIMARY HEALTHCARE FACILITIES *



59

WOMEN AND GIRLS SAFE SPACES



22

EMERGENCY OBSTETRIC CARE FACILITIES



10

YOUTH CENTRES



98

MOBILE CLINICS



15

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.



I NEVER EXPECTED TO UNDERGO SUCH A SIGNIFICANT TRANSFORMATION. I'VE BECOME A DIFFERENT, STRONGER PERSON, MORE CAPABLE OF REACHING MY GOALS.

— RAYA, a 24-year-old woman survivor of gender-based violence

SYRIA COUNTRY OFFICE

TWELVE YEARS ON, COMMUNITIES THROUGHOUT SYRIA CONTINUE TO SUFFER AS MULTIPLE CRISES CONVERGE.

233,830

PEOPLE REACHED WITH SRH SERVICES

99% FEMALE

1,989

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

94% FEMALE

150,618

PEOPLE REACHED WITH GBV PROGRAMMING

98% FEMALE

143

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

8,691

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

74% FEMALE

788

PEOPLE TRAINED ON VARIOUS TOPICS

82% FEMALE

58,017

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	26,894	100%
Family planning consultations	93,344	100%
Normal / assisted vaginal deliveries	2,126	100%
C-sections	1,832	100%
Ante-natal care consultations	58,810	100%
Post-natal care consultations	5,068	100%
People trained on SRH-related topics	414	90%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	27,382	100%
People reached with dignity kits	1,998	99%
GBV case management consultations	4,318	98%
People reached with GBV awareness sessions	123,781	99%
People trained on GBV-related topics	230	73%

YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	3,741	100%
People trained on youth-related topics	144	71%



78

PRIMARY HEALTHCARE FACILITIES *



49

WOMEN AND GIRLS SAFE SPACES



19

EMERGENCY OBSTETRIC CARE FACILITIES



10

YOUTH CENTRES



98

MOBILE CLINICS



15

OTHER SERVICE DELIVERY POINTS



I KNOW THE WORLD I WANT TO LIVE IN. HELP ME BUILD IT, AND I WILL NEVER STOP WORKING.

– RASHA, a young woman from Syria

* 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 CHALLENGES CONVERGE AND NEEDS WORSEN, UNFPA REMAINS AT THE FOREFRONT IN SYRIA

The protracted crisis in Syria persists as one of the most intricate humanitarian and protection emergencies worldwide, despite the unwavering efforts of humanitarian organisations. The latest Humanitarian Needs Overview (HNO) for 2024 reveals a staggering 16.7 million individuals requiring humanitarian assistance, marking the highest figure since the crisis began in 2011. Disturbingly, all identified population groups in the HNO fare worse in 2024 compared to previous years, with the overall People in Need (PIN) escalating from 14.6 million in 2022 to 16.7 million in 2024. Particularly alarming is the dire situation of women and girls, with 8.4 million in need, including 4.2 million of reproductive age, impacted by a decimated health system.

The repercussions of external events, such as the 2023 earthquake and recent unrest in neighbouring regions, have further compounded the challenges faced within Syria. The security landscape remains volatile and multifaceted, segmented into Northwest, Northeast, and central/southern regions, each presenting distinct humanitarian needs and access constraints. The persistence of armed conflict and growing insecurity obstructs the delivery of vital services, exacerbating the crisis.

Economic deterioration compounds the humanitarian crisis, driving internal migration as families seek sustenance and essential services. Skyrocketing inflation, currency depreciation, and soaring commodity prices deepen poverty levels and reliance on aid. Gender-based violence (GBV) emerges as a prominent issue, with its prevalence and severity varying across regions. Women, girls, and female-headed households endure heightened vulnerability, while adolescent girls face alarming protection concerns, ranking only behind infants and elderly individuals. Cultural taboos and traditional norms perpetuate GBV, hindering reporting and access to services. Moreover, the disturbing trend of the normalisation of GBV further impedes efforts to address this critical issue.

Programme update

UNFPA continues its crucial work by delivering Sexual and Reproductive Health (SRH) services in Aleppo city and its rural areas, as well as South Raqqa, through eight implementing partners operating 15 static clinics and 24 mobile teams.

In addition, UNFPA, in collaboration with five implementing partners, offers SRH, Psychosocial Support (PSS), and referrals to GBV services via 17 mobile teams, eight static clinics, one maternity clinic, and 10 safe spaces in Al

Hasakah, Raqqa, and the eastern part of Deir-ez-Zor. Notably, construction operations for the maternity clinic in Al Hol camp were finalised, enabling the provision of obstetric services, gynaecological consultations, psychological support, 24-hour obstetrics, and postnatal recovery services for women.

Furthermore, UNFPA extends its SRH services through nine static reproductive health clinics, one hospital centre, and five integrated mobile teams in Homs governorate, as well as four static reproductive health clinics, one community well-being centre, and ten integrated mobile teams in Lattakia. Moreover, in Tartous, two reproductive health clinics and three integrated mobile teams are operational, ensuring comprehensive SRH care reaches those in need.

UNFPA remains committed to providing ongoing support to local and national partners in various regions, including Homs, Hama, Tartous, Damascus, rural Damascus, and areas in the south. This support includes the provision of health services through both static and outreach facilities, with a focus on maintaining SRH achievements made in previous years. By collaborating with partners and extending services to underserved communities, UNFPA aims to ensure that individuals in these regions have access to essential services and support.

UNFPA supported the provision of specialised GBV services to women and girls at risk through different types of facilities, safe spaces, integrated mobile teams (IMTs), community wellbeing centres (CWCs), and others. UNFPA continued to implement a number of GBV prevention models, including the Engaging Men in Accountable Practices (EMAP), Indashakirwa, and Girl Shine. Under EMAP, the model curriculum adaptation was finalised and implementation is planned to begin in Q2 2024. The Girl Shine model has been piloted in three governorates. Under Indashakirwa, UNFPA worked on finalising the midline assessment phase by designing assessment tools (qualitative and quantitative). Pre-testing of the Opinion Leader curriculum and the rollout of the curriculum is planned to start in Q2 2024.

A total of 865 people were reached with female dignity kits and pregnant/lactating kits, distributed to the internally displaced people in Der El Zor governorate as a result of the conflict on the western side of the Euphrates river, as well as people affected by the earthquake (Aleppo, Homs and coastal areas) and within the response to the floods that affected 17 communities throughout Tartous in January.



EMPOWERING CHANGE

RAMA'S JOURNEY TO HEALTH AND SAFETY IN QAMISHLI

UNFPA is dedicated to safeguarding Syrian women and girls by providing essential life-saving services in north-eastern Syria. These services play a crucial role in enhancing the health and safety of vulnerable populations.

Rama, a resident of north-east Syria, found her way to a UNFPA-supported static clinic in Qamishli City after her mother contacted a trusted gynaecologist who worked there. Since that visit, the clinic has become her primary healthcare provider, especially important due to her family's challenging financial situation and her husband's modest income as a driver.

"Not only are the medical services here excellent, but the team is also incredibly welcoming and supportive," Rama remarked, highlighting the warm reception and consistent care she received, which kept her returning regularly throughout her pregnancy.

She followed the advice and directions of both the gynaecologist and the midwife diligently. "Since my first visit, I have consistently listened to the gynaecologist and the midwife's advice in addition to following their guidelines and directions," she stated. Her first childbirth at the clinic in 2017 was natural, smooth, and safe, boosting her confidence in the clinic's services and the capabilities of the medical team.

Rama's interactions at the clinic also extended beyond medical consultations. "Through my regular attendance at the clinic, I participated in several awareness sessions on various topics like family planning and gynaecological infections. That led me to believe that using family planning methods is a good choice for us, especially in our living conditions," she explained. This education has helped Rama and her husband decide to use family planning tools to space their pregnancies, allowing her body time to recover and to devote more attention to her baby and family.

Since 2017, Rama has not only given birth four times at this clinic but also consistently utilised family planning methods under the medical team's supervision.

The clinic in Qamishli City offers comprehensive reproductive health and gender-based violence services, including antenatal and postnatal care, health counselling, pregnancy

check-ups, treatment for common women's infections, family planning, individual and group psychosocial support sessions, health awareness sessions, and case management services. They also distribute essential supplies such as napkins and hygiene kits. In 2023 alone, approximately 9,700 beneficiaries received reproductive health and gender-based violence information and services from this clinic, underscoring its pivotal role in the community.

UNFPA maintains that women and girls in need have the right to access quality sexual and reproductive health services and to be protected from gender-based violence, a commitment clearly reflected in the operations of the Qamishli clinic.

“NOT ONLY ARE THE MEDICAL SERVICES HERE EXCELLENT, BUT THE TEAM IS ALSO INCREDIBLY WELCOMING AND SUPPORTIVE.”

— RAMA, a young woman from Qamishli



CROSS-BORDER OPERATIONS

FOLLOWING THE EARTHQUAKE IN FEBRUARY, UNFPA CONTINUES TO RESPOND TO AN ONGOING AND FAR-REACHING EMERGENCY.

20,165

PEOPLE REACHED WITH SRH SERVICES

94% FEMALE

18,102

PEOPLE REACHED WITH GBV PROGRAMMING

78% FEMALE

5,905

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

100% FEMALE

10,137

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

1,062

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

73% FEMALE

20

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

633

PEOPLE TRAINED ON VARIOUS TOPICS

61% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH programming	2,911	100%
Family planning consultations	2,084	98%
Normal / assisted vaginal deliveries	3,145	100%
C-sections	1,044	100%
Ante-natal care consultations	15,806	100%
Post-natal care consultations	5,551	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	5,031	100%
People reached with dignity kits	13,819	100%
GBV case management consultations	300	99%
People reached with GBV awareness sessions	10,279	70%
People trained on GBV-related topics	633	61%

YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	2,195	100%



3

PRIMARY HEALTHCARE FACILITIES



10

WOMEN AND GIRLS SAFE SPACES



3

EMERGENCY OBSTETRIC CARE FACILITIES

Cross-border operations in Syria are essential to ensuring that women have access to sexual and reproductive health services and are protected from gender-based violence. With the ongoing crisis, women in Syria face numerous challenges, including limited access to healthcare, displacement, and increased risk of violence. UNFPA's cross-border operations enable the organization to provide vital assistance to women in areas where access to life-saving services is limited or non-existent.

Through its cross-border programming, UNFPA provides essential support to those in need, including emergency reproductive healthcare and gender-based violence response and prevention. These services play a crucial role in saving lives and protecting women from GBV, which has increased significantly during the conflict.

Situation Update

In Idlib and Northern Aleppo, out of the 5.06 million residents, 3.4 million are internally displaced. Among these, 2.1 million internally displaced persons (IDPs) reside in camps or informal sites, with 79% comprising women and children. Additionally, over 2 million women and girls in north-west Syria are in urgent need of assistance.

These women and girls face significant challenges in accessing SRH services. From 2023 to 2024, 41% of Emergency Obstetric and Newborn Care (EmONC) facilities were unfunded, severely restricting SRH service access for approximately 2 million people. This shortage impacts 43% of the region's population and places 500,000 women and girls of reproductive age at increased risk due to limited access to crucial SRH services.

A late 2023 IDP Sites Severity Analysis revealed that 91% of sites lack adequate street lighting, increasing safety concerns and the risk of harassment or assault, especially at night. Moreover, 76% of sites do not provide safe and adequate shelter, exposing women and girls to weather elements, privacy issues, and increased physical and mental health risks.

In 2024, UNFPA Gaziantep cross-border (GXB) was forced to cut its programme by 60% compared to the previous year due to severe funding constraints, leaving around 470,000 people with limited access to EmONC services. This reduction has significantly impacted 117,500 women and girls of reproductive age, complicating their access to necessary health services. Consequently, more than 1,200 pregnant women each month now face greater difficulties in accessing health facilities for safe deliveries, escalating the risks of maternal mortality.

Programme update

UNFPA cross-border operations supported the delivery of psychosocial support services (PSS) to 499 survivors of GBV in safe spaces and health facilities. Women and girls were equipped with life skills for managing challenges through "My Safety, My Wellbeing" sessions and provided technological empowerment via robotic and 3-D printing classes that reached 2,049 participants. Additionally, 375 people learned about the root causes of GBV through awareness toolkits, while legal awareness sessions on civil status and property rights reached 10,279 people.

UNFPA also supported three critical health facilities in north-west Syria, providing comprehensive SRH and GBV services to a diverse group of beneficiaries. These facilities delivered a wide range of lifesaving SRH services to 20,165 people, including health education, antenatal and postnatal care, management of pregnancy complications, safe deliveries, family planning, and more.

UNFPA contributed to medical education by supporting a midwifery school in Aleppo's western countryside, with 20 students expected to graduate this year. Furthermore, UNFPA began procuring 383 reproductive health kits and established a new warehouse in Sarmada, ensuring its operational readiness, including a cold room for storing heat-sensitive supplies.

Meanwhile, in response to a February flood, 6,368 dignity kits were distributed across five locations, complemented by awareness sessions on GBV risks and available services. This effort highlights UNFPA's ongoing commitment to addressing the needs of communities affected by the crisis.

Defying the Odds: Raya's Transformation Through Adversity

"True disability lies in the limits you put on yourself, and in not being able to grow and progress," says Sara, a cancer and gender-based violence survivor from north-west Syria.

"I see everything as a tiny light," explains Sara, who has been visually impaired since birth.

Sadly, a shock diagnosis of uterine cancer, combined with violence at home, left her reeling. "Sara faced a battle at home. Her brother stopped her from even going outside," says Noura Alaa, a case manager working with the Syrian American Medical Society (SAMS) organisation, a partner with UNFPA.

Yet through the UNFPA SHE (Support, Heal, Empower) programme, Sara received specialised cancer treatment, comprehensive medical care, counselling and additional support that helped her build her confidence. While Sara has fully recovered from cancer, her mental and emotional healing continues. She enrolled in a UNFPA-supported women's empowerment centre to learn new skills and rebuild her confidence.

"It was hard for her to attend all the training sessions in person, so we tried to give the sessions online, and with help from her mother, she learned new handicraft skills. The psychosocial support also helped her to express herself and to process her struggles," says Noura Alaa.

According to Okba Doghim, UNFPA SRH-GBV integration specialist, "as its acronym indicates, the SHE programme seeks to support, heal, and empower through the provision of integrated, high-quality SRH and GBV services, with a focus on vulnerable women and adolescent girls at risk. We are dedicated to bridging the gaps in SRH medical workforces, addressing the full range of each survivor's needs, and empowering them on their journeys of healing in north-west Syria."

“WE ARE DEDICATED TO BRIDGING THE GAPS IN SRH MEDICAL WORKFORCES, ADDRESSING THE FULL RANGE OF EACH SURVIVOR'S NEEDS AND EMPOWERING THEM ON THEIR JOURNEYS OF HEALING IN NORTH-WEST SYRIA.”

— OKBA DOGHIM, UNFPA SRH-GBV integration specialist



TÜRKIYE COUNTRY OFFICE

28,234

PEOPLE REACHED WITH SRH SERVICES

96% FEMALE

37,988

PEOPLE REACHED WITH GBV PROGRAMMING

95% FEMALE

3,771

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

97% FEMALE

11,554

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

85

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

58% FEMALE

1,550

LGBTQIA+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

192

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

70% FEMALE

275

PEOPLE TRAINED ON VARIOUS TOPICS

80% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	2,238	100%
Family planning consultations	8,863	95%
Ante-natal care consultations	3,130	100%
Post-natal care consultations	957	100%
People trained on SRH-related topics	16	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	8,921	100%
People reached with dignity kits	4,826	100%
GBV case management consultations	859	82%
People reached with GBV awareness sessions	17,135	94%
People trained on GBV-related topics	259	78%

YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	395	100%



8
WOMEN AND GIRLS SAFE SPACES *



4
YOUTH CENTRES



14
OTHER SERVICE DELIVERY POINTS



UNFPA HAS BEEN A SOURCE OF STRENGTH AND SUPPORT FOR US SYRIAN WOMEN IN TÜRKIYE. THEY HAVE PROVIDED US WITH ESSENTIAL HEALTHCARE SERVICES AND EMPOWERED US TO TAKE CONTROL OF OUR LIVES.

– RANA, a Syrian woman living in Türkiye

* 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.

Situation Update

Türkiye has been home to the world's largest refugee population for the tenth consecutive year, with over 3.6 million refugees and asylum-seekers. The situation was further exacerbated by the devastating Kahramanmaraş earthquakes in February 2023, impacting over 9 million people, including 43% of the refugee and migrant population.

One year post-earthquake, an UNFPA assessment highlights significant challenges faced by Syrian women and girls in accessing SRH services in the four most affected provinces. Health facilities are not operating at their pre-earthquake capacity, and several barriers hinder access to SRH services: a shortage of specialised doctors causing appointment delays, inadequate doctor-patient communication or insufficient consultation time discouraging personal inquiries, a lack of proper interpretation support, and difficult transport conditions, especially in inclement weather, which pose risks of injury. Social norms around sexuality prevent adolescent girls from seeking professional SRH services, leading them to rely on information from female relatives. Many women are also misinformed about the side effects of contraception, viewing them as harmful.

The provision of antenatal care has improved since the earthquake, but postnatal care has deteriorated, particularly for Syrian post-partum women. Violence against women and girls has escalated, particularly in container cities, due to inadequate security, lack of privacy, increased social tensions, and poor living conditions. Reports of sexual abuse among adolescent girls have risen, and as a coping mechanism, many drop out of school, increasing the risk of child, early, and forced marriages.

A year on from the earthquake, humanitarian aid has dwindled, especially for those outside container cities. The economic downturn has made the cost of essential materials burdensome for families, particularly those with multiple female members. In some container sites, communal toilets lack cleanliness, heightening the risk of genital and urinary tract infections. The lack of privacy in these sites severely affects women and girls' well-being, especially during menstruation, when social norms compel them to "hide away from men" to avoid stigma, a near impossibility under cramped living conditions.

Programme Update

As of Q1 2024, UNFPA supports 36 static service units and mobile outreach teams across Türkiye, including earthquake-affected provinces. These units offer sexual and reproductive health (SRH) services and protection, including GBV prevention and response, complemented by maternity and dignity kits. Additionally, UNFPA provides cash assistance for GBV case management, offering both emergency and recurrent support to women, girls, and key refugee groups at high risk of GBV.

During Q1, UNFPA enhanced the capability of partner personnel in Eskişehir and Şanlıurfa on Accountability to Affected Population. Training covered accountability principles, complaint and feedback mechanisms, privacy policies, and data management with practical case studies.

Meanwhile, in collaboration with the KRG and Men and Boys (M&B) project partners, UNFPA facilitated the transition of service units due to funding reductions. This included a workshop aimed at maintaining service quality through the transition. Additionally, UNFPA held Stakeholder Meetings in Adana and Izmir to discuss the challenges and successes of the M&B Project, focusing on case management and service mapping for M&B who are sexual violence survivors. By the end of March 2024, the M&B Project concluded, continuing support for five service units under the KRG Project.

Furthermore, UNFPA collaborated with the Canadian Embassy in Ankara to host a human stories event at the Ambassador's residence, increasing awareness of protection and health issues among key refugee groups. UNFPA also phased out three youth centres in Ankara, Izmir, and Diyarbakır. Transition strategies included collaboration with local stakeholders and handover of services in Izmir to the Metropolitan Municipality, with direct support from UNFPA for five more months. Services in these locations are now provided by staff directly recruited through an HR company.

On International Women's Day, UNFPA's partners hosted various events. In Hatay, the UNFPA-supported service units celebrated with 40 Syrian women, offering handcrafting workshops, awareness sessions, PSS activities, and SRH counselling, enriching the community support and engagement among women and girls.

Navigating Turmoil: A Refugee Mother's Journey from Struggle to Strength with UNFPA Assistance

At the tender age of twenty, Mais found herself displaced from her homeland in Syria, seeking refuge in Türkiye from the harrowing crisis. With a young baby in her care and an uncertain future looming over her, Mais's life took a dire turn with a devastating health diagnosis—a brain tumour that caused partial paralysis and necessitated immediate surgery. Amidst these challenges, Mais's once vibrant life spiralled into a struggle.

During this turbulent period, the UNFPA-supported youth centre in İzmir became a beacon of hope for Mais. They not only provided her with essential psychosocial support (PSS) counselling to help manage her psychological strain but also assisted her in obtaining a disability report, which confirmed a disability level of 83%. This report was a crucial step in accessing the social protection services she desperately needed.

Furthermore, as a new mother responsible for her infant, Mais found it increasingly difficult to venture outside, connect with others, and build a support network. Recognising this, the centre facilitated social cohesion and recreational activities that proved invaluable. These gatherings allowed Mais to meet peers in a secure setting, fostering connections that enhanced her well-being significantly.

Mais expressed deep gratitude for the support provided by UNFPA, which played a pivotal role in easing her daily struggles and improving her life during such a difficult time. "Without the help from the UNFPA-supported youth centre, navigating these challenges would have been insurmountable.

Their support has been a lifeline, helping me to not only cope but to thrive despite the circumstances," said Mais.

Mais's story underscores the critical importance of tailored psychosocial and health services provided by organisations like UNFPA, especially for refugees and individuals with disabilities. It highlights how specialised care and community support can transform lives, offering hope and practical help to those facing profound challenges.

UNTIL I MET THE UNFPA-SUPPORTED TEAM,
WE HADN'T BEEN ABLE TO COMMUNICATE
WITH ANYONE FOR A VERY LONG TIME DUE
TO LANGUAGE BARRIERS.

— HILAL, a Syrian refugee living in Türkiye



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.

29,358

PEOPLE REACHED WITH SRH SERVICES

93% FEMALE

14,868

PEOPLE REACHED WITH GBV PROGRAMMING

89% FEMALE

11,516

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

1,064

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

90% FEMALE

831

LGBTQIA+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

285

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

98% FEMALE

890

PEOPLE TRAINED ON VARIOUS TOPICS

97% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	6,659	100%
Family planning consultations	832	98%
Ante-natal care consultations	767	100%
Post-natal care consultations	39	100%
People trained on SRH-related topics	865	96%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	4,857	100%
People reached with dignity kits	9,216	100%
GBV case management consultations	972	84%
People reached with GBV awareness sessions	9,523	86%
People trained on GBV-related topics	25	100%



10
PRIMARY HEALTHCARE FACILITIES *



20
WOMEN AND GIRLS SAFE SPACES



5
MOBILE CLINICS

“SOME DAYS, I EXPERIENCE THE DISCRIMINATION EXPLICITLY. A SHOP OWNER MIGHT REFUSE MY MONEY BECAUSE I’M SYRIAN, OR BOYS MIGHT CHASE ME IN THE STREET AND SHOUT OBSCENITIES AT ME.

– MAY, a young Syrian woman living in Lebanon



Situation update

Lebanon is confronted with a multitude of challenges, encompassing political instability, financial instability, security concerns, elevated unemployment rates, and pervasive inflation. A combination of factors, including economic crisis, political paralysis, humanitarian issues, and regional instability, caused the national currency to fall, resulting in 80% of the population falling into poverty. Without a president for over a year, the parliament struggles to pass legislation. These challenges have been compounded by the deterioration of the security situation in South Lebanon, due to the spillover of the Gaza war. All these economic, political, and security uncertainties significantly impact vulnerable communities, particularly women, who face heightened risks.

In response to these challenges, UNFPA and its partners are actively delivering GBV and SRH programmes in Beirut, Akkar, Mount Lebanon, Bekaa, and northern and southern Lebanon. In the southern region, our partners have been focusing their efforts on internally displaced people, through offering essential UNFPA services and support. Services include specialised GBV support, legal aid, psychosocial assistance, awareness sessions, and referrals. Additionally, they offer life skills training, vocational training, and outreach to LGBTQIA+ individuals and people with disabilities. SRH services encompass counselling, medical consultations, and tests, with a specific focus on pregnant women. In summary, UNFPA and partners are working to provide essential services to vulnerable communities in Lebanon, with a primary emphasis on supporting the well-being of women and girls amidst the challenging socio-economic and political landscape.

Programme update

In Q1 2024, UNFPA Lebanon, supported by ECHO, CERF, Japan, and France, collaborated with implementing partners to deliver GBV and SRH services across Beirut, Mount Lebanon, Tripoli, Akkar, and northern and southern Lebanon. The services included specialised GBV support such as case management with legal aid, psychosocial support, awareness sessions, recreational activities, and appropriate referrals. Life skills and vocational training were also offered. For SRH, sessions were held both inside and outside centres, focusing on family planning, midwifery services, medical consultations, antenatal and postnatal care, and SRH tests, especially for pregnant women.

Additionally, UNFPA's integrated GBV-SRH approach ensured comprehensive service provision, reaching individuals with disabilities and the LGBTQIA+ community. A new shelter for GBV survivors was established in southern Lebanon, and response efforts were directed to support internally displaced people amidst conflicts in South Lebanon, providing essential SRH and GBV services and distributing dignity kits.

Under various training initiatives, UNFPA Lebanon has strategically bolstered community and healthcare capabilities. In collaboration with the local women-led organisation Akkarouna, 25 young women received training in social work and volunteering, aimed at empowering adolescent girls within their communities. Additionally, comprehensive training on Clinical Management of Rape (CMR) was delivered to healthcare providers and paramedics, significantly improving service delivery in primary health centres and hospitals. UNFPA also conducted refresher training in SRH for 14 social workers and provided technical consultations to enhance maternal and child health programmes.

Breaking Barriers: How knowledge transformed Karma's perspective on reproductive health

Karma, a 28-year-old mother of two who recently accessed services at a UNFPA-supported facility, recounts her transformative journey through the GBV-SRHR Integration Project.

Before the intervention, Karma faced significant challenges accessing reproductive health services and grappling with the cultural stigmas associated with gender-based violence.

"We were conditioned to keep such issues within the family, often neglecting our own well-being," Karma explains. However, the project's outreach workers gradually dismantled these barriers with culturally sensitive and informative awareness sessions. "Attending these sessions was a turning point for me," she emphasises. "I learned about the importance of seeking medical consultations and the rights we have concerning our reproductive health. It empowered me to challenge societal norms and prioritise my well-being."

The project provided subsidised medical consultations, which became a lifeline for Karma. Through these services, she addressed a previously undiagnosed health issue. "The project not only saved me from potential health complications but also gave me the knowledge and confidence to advocate for my health within my community," she states.

Moreover, during her second pregnancy, Karma participated in the Maternal Package programme, which offered comprehensive support from prenatal to postnatal care. "The support I received was beyond my expectations, ensuring a healthy and stress-free pregnancy journey," she reflects. Her positive birthing experience, facilitated by the project's midwifery services, had a lasting impact.

Today, Karma has become a vocal advocate for access to reproductive health within her community, encouraging other women to prioritise their health and well-being. "I've witnessed a shift in our community's perspective, and it's inspiring to see more women breaking free from the shackles of silence and seeking the help they deserve," she shares proudly.

JORDAN COUNTRY OFFICE

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

23,235

PEOPLE REACHED WITH SRH SERVICES

100% FEMALE

1,834

PEOPLE REACHED WITH GBV PROGRAMMING

96% FEMALE

1,622

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

63% FEMALE

3,680

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

376

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

99% FEMALE

30

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

83

PEOPLE TRAINED ON VARIOUS TOPICS

57% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	1,168	100%
Family planning consultations	4,453	100%
Normal / assisted vaginal deliveries	274	100%
Ante-natal care consultations	7,821	100%
Post-natal care consultations	1,154	100%
People trained on SRH-related topics	7	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	1,575	100%
GBV case management consultations	635	96%
People reached with GBV awareness sessions	2,383	91%

YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	937	100%
People trained on youth-related topics	76	53%



11

PRIMARY HEALTHCARE FACILITIES



17

WOMEN AND GIRLS SAFE SPACES



1

EMERGENCY OBSTETRIC CARE FACILITY



1

YOUTH CENTRE



1

MOBILE TEAMS

“ SPENDING TIME AT THE SAFE SPACE MAKES ME FEEL SUPPORTED AND MOTIVATED. IT BRINGS OUT THE BEST IN ME, DESPITE THE DIFFICULT CIRCUMSTANCES I FACE AS A REFUGEE. ”

– SALAM, a young Syrian woman living in Jordan



Situation update

As of 2024, Jordan continues to host a significant Syrian refugee population, estimated at over 1.3 million individuals, 712,878 of whom are registered with UNHCR. The protracted nature of the Syrian conflict has led these refugees to seek long-term safety in Jordan, placing ongoing pressure on national resources and infrastructure.

Jordan's response to the refugee crisis has been commendable, with the government and international organisations implementing various programs to support refugee welfare. However, challenges persist, particularly in health, education, and employment.

Housing remains a critical issue, with many refugees residing in urban areas outside formal camps, often leading to higher living costs and limited access to services. Moreover, the legal status of many refugees limits their employment opportunities, contributing to high poverty levels among the refugee population.

In terms of health, Syrian refugees face difficulties accessing quality and affordable healthcare. While UN agencies and NGOs provide support, the demand often outstrips the available services. Issues such as mental health and reproductive health require particular attention.

Educational challenges include overcrowded classrooms and limited resources, which affect the quality of education available to refugee children. Initiatives aimed at integrating into the national system are underway, but capacity still needs to be improved.

Overall, while Jordan has shown resilience and a strong commitment to refugee support, the need for sustained international assistance and more robust integration policies remains critical to managing the long-term implications of the refugee crisis.

Programme update

UNFPA will collaborate closely with the Jordanian Ministry of Health (MOH) and the Health Care Accreditation Council (HCAC) to evaluate the readiness of primary healthcare facilities around refugee camps as part of the Women-Friendly Healthcare Services project. This initiative aims to enhance the quality and comprehensiveness of healthcare services provided in these facilities. The project will target 40 primary health facilities, including 36 under MOH.

Based on the findings and recommendations of the EmONC assessment, UNFPA will collaborate with UNHCR and HCAC to develop a referral pathway and protocol for refugees requiring maternal and neonatal services in referral hospitals. This initiative is expected to commence in May, and a workshop involving all relevant partners will be convened to share insights and experiences.

In January, UNFPA supported Save the Children in the organisation of a Graduation Event for the participants of the "Adolescent Girls Empowerment Led-Center" (AGEL) in Zaatari Camp. This space, facilitated by a dedicated team of trained female guides, has served as a safe haven for various activities, fostering conversations, capacity building and SRHR awareness. This event provided the opportunity to mark an important day for the girls and mentors leading the centre's interventions and to acknowledge the effort put into empowering and building each other's capabilities.

UNFPA also launched the beginning of a JICA funded project aimed at providing specialised and integrated GBV and SRH services to vulnerable refugees residing in the Mafraq Governorate in Jordan by adopting an innovative humanitarian-development nexus approach.

The Mafraq Governorate, due to its close proximity to the Syrian border and its hosting of the Zaatari refugee camp – the largest in Jordan – is a primary destination for Syrian refugees, leading to a significant increase in its population. This surge has put pressure on its resources as well as healthcare and protection-related infrastructures. By meeting the growing demand for services in the host communities within the Governorate of Mafraq the strategic intervention by UNFPA Jordan will provide an integrated and "nexus-oriented" approach which – by both supporting and involving the MOH in project implementation as well as a national women-led civil society organisation – paves the way towards a long-term sustainability and human security.

This year, the theme of the International Women's Day was interlinked with the 68 CSW's priority theme, focusing on accelerating the achievement of gender equality and the empowerment of all women and girls by addressing poverty and strengthening institutions and financing with a gender perspective. The global theme was "Invest in Women: Accelerate Progress". UNFPA ran a social media campaign focusing on the importance of addressing GBV due to its economic impact in hindering the development wheel in Jordan, utilising the findings produced from the recent national study on estimating the economic cost of domestic violence against women and girls in Jordan that was undertaken by the Jordanian National Commission for Women in collaboration with UNFPA and the Department of Statistics and other partners in Jordan.

“COMING TO THIS SAFE SPACE MEANS THAT I HAVE AN OUTLET FOR THE STRESS, CHALLENGES, AND OFTEN TIMES HOPELESSNESS THAT I FEEL GIVEN MY CURRENT SITUATION. IT'S BECOME MY SECOND HOME.”

– HILAL, a Syrian refugee living in Türkiye

RESILIENCE IN ADVERSITY

THE LIFELINE OF HEALTHCARE FOR A SYRIAN REFUGEE MOTHER IN ZAATARI CAMP

Fida, a 45-year-old Syrian refugee living in Zaatari camp and a mother of seven daughters, recently experienced a sudden medical scare.

"I suddenly started bleeding unexpectedly," Fida recounted from her wheelchair at the camp's UNFPA-supported Sexual and Reproductive Healthcare (SRH) clinic. Initially mistaking it for her period, her daughter quickly acted, calling for an ambulance. At the clinic, Fida was given three pills by the doctor, who reassured her, "Take these, and you will feel better." The bleeding stopped shortly after.

Living in Zaatari since January 2013, Fida has been a regular at the SRH clinic, which serves the camp's population of 78,000 Syrian refugees. Her treatment extends beyond emergency care, encompassing various medications to manage her chronic conditions. Diagnosed with Behçet's syndrome at 20, which later led to blindness and severe joint pains, Fida's health was further compromised by a fall that resulted in a broken hip and confinement to a wheelchair. These challenges have left her prone to recurrent infections, particularly urinary tract infections.

The clinic has been instrumental in providing comprehensive reproductive health services, from antenatal to postnatal care, emergency obstetric services, family planning, STD treatments, post-treatment care, and more. Despite high demand, with the clinic offering an average of 72,000 services annually, funding shortages have strained resources, forcing some clinic closures and overextending services. Nevertheless, for Fida, these services are a lifeline, offering relief and vital support in her daily battle for survival.

Her husband, incapacitated by knee pain and unable to work, together with their two youngest daughters, depend on a modest monthly assistance of 15 Jordanian Dinars (about \$21) for food, barely covering their basic needs.

"My joints hurt badly, and I've stopped taking pain killers because they disrupt my sleep," shared Fida. Despite her severe mobility issues, she maintains some independence, managing to crawl to the bathroom on her own. During Ramadan, the community support is palpable as neighbours who cook provide meals for her family.

"Having health services for us and the children here is crucial," she added. "Without them, we couldn't afford the medical care needed outside the camp."

The clinic, accommodating 100 to 150 patients daily, is staffed round the clock to handle deliveries and emergencies. "We harness our resources to deliver the best possible care," said Lamia Aldbisi, manager at JHASi, underscoring the commitment to addressing not just physical but also the psychological well-being of patients. Fida feels deeply valued by the clinic staff; "It makes me feel seen, like I matter in society." This sentiment underscores the profound impact of the clinic's work, supported by EU Humanitarian Aid, in fostering not only health but also dignity within the community.



IRAQ COUNTRY OFFICE

IN IRAQ, UNFPA CONTINUES TO PROVIDE ESSENTIAL SUPPORT TO MORE THAN 290,000 REFUGEES AS 1.2 MILLION PEOPLE REMAIN DISPLACED NATIONWIDE.

481

PEOPLE REACHED WITH SRH SERVICES

100% FEMALE

124

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

398

PEOPLE REACHED WITH GBV PROGRAMMING

100% FEMALE

37

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

92% FEMALE

REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	35	100%
Family planning consultations	1,189	100%
Normal / assisted vaginal deliveries	45	100%
C-sections	865	100%
Ante-natal care consultations	707	100%

GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	91	100%
GBV case management consultations	86	100%



5
PRIMARY HEALTHCARE FACILITIES



8
WOMEN AND GIRLS SAFE SPACES

In Q1 2024, the Government of Iraq ramped up eviction notices for internally displaced persons (IDPs) in informal settlements, driven by a goal to resolve prolonged displacement issues. This policy shift has impacted thousands, with numerous households across the country receiving notices. Despite the closure of all IDP camps in the Kurdistan Region projected within six months, the reality on the ground reflects persistent humanitarian needs. Essential services are scarce, and living conditions remain dire for many displaced families.

Since 2017, approximately 5.6 million IDPs have returned to their areas of origin, yet the transition has been fraught with challenges. Many returnees still depend on humanitarian support due to inadequate housing and infrastructure. Particularly acute are the difficulties faced by specific groups such as the Yazidi community in Nineveh Governorate, who contend with ongoing community strife and local animosity. These issues complicate the process of reintegration and highlight the complex dynamics of displacement and return in Iraq.

For women and girls, the situation is especially critical. Syrian refugee women and girls in Iraq face distinct vulnerabilities and the closure of camps not only disrupts their access to essential services such as healthcare and education but also increases their risk of GBV. The lack of secure housing and legal protections in post-displacement settings further exacerbates these risks, making it difficult for women and girls to access reproductive health services and support for GBV, which are crucial for their safety and well-being.

UNFPA has been actively involved in providing targeted interventions to meet the specific needs of women and girls in this evolving context. This includes strengthening the availability of SRH services and enhancing GBV prevention and response mechanisms. However, as camps close and more families return to less secure environments, there is a pressing need for sustained and expanded support to ensure that women and girls can transition safely and with dignity. The situation underscores the importance of continued humanitarian assistance and the need for comprehensive strategies to support the most vulnerable populations, particularly in transitioning from displacement to return.

Programme update

The UNFPA Iraq Country Office has remained deeply involved in spearheading initiatives focused on SRH and GBV programming in the region. In 2023, efforts prioritised transitioning to a sectoral approach within the Humanitarian Transition Strategy for Iraq (HTS) – a shift that necessitated collaboration with government agencies, national GBV service providers, UN agencies, INGOs, national organisations, and donors to improve coordination and support.

In Q1 2024, UNFPA continued to strengthen the GBV sub-cluster with a focus on capacity-building. This included providing technical assistance and logistical support for coordination meetings and activities across both the Kurdistan Region of Iraq (KRI) and Federal Iraq. Furthermore, the office co-chaired the GBV

Information Management System Task Force alongside UNHCR, helping to refine data management and analysis for strategic response planning.

Simultaneously, UNFPA's focus on reproductive health remained crucial to its operations in Iraq. It worked closely with government counterparts, such as the Women Empowerment Department (WED) at the federal level and the Ministry of Labour and Social Affairs (MoLSA) in KRI, to bolster RH services for vulnerable populations. These efforts included improving maternal health, promoting family planning services, and addressing gender disparities in healthcare access.

UNFPA also facilitated cooperation between stakeholders like the Iraq Health Access Organization (IHAO) to establish sub-working groups and provide training in report writing and analysis. These initiatives aimed to build structured and effective reporting mechanisms, providing comprehensive support for GBV and SRH issues nationwide. Overall, UNFPA's latest programme update underscores its steadfast commitment to advancing gender equality, protecting women's rights, and promoting health and well-being in Iraq.

EGYPT COUNTRY OFFICE

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

170

PEOPLE REACHED WITH SRH SERVICES

61% FEMALE

67

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

1,507

PEOPLE REACHED WITH GBV PROGRAMMING

96% FEMALE

15

PEOPLE TRAINED ON VARIOUS TOPICS

51% FEMALE

208

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

REPRODUCTIVE HEALTH

Adolescent girls reached with SRH services
People trained on SRH-related topics

TOTAL	% FEMALE
35	100%
15	100%

GENDER-BASED VIOLENCE

Adolescent girls reached with GBV programming
People reached with dignity kits
GBV case management consultations
People reached with GBV awareness sessions

TOTAL	% FEMALE
173	100%
8	100%
615	98%
269	83%



13
WOMEN AND GIRLS SAFE SPACES

As of 31 March, Egypt hosts 569,674 registered refugees and asylum-seekers from 61 countries. Sudanese are now the largest group (52%), followed by Syrians (27%) and other nationalities (21%). Most refugees live in urban areas of Cairo and the North Coast. More than 500,000 people forced to flee the Sudan crisis have entered Egypt since April 2023.

Programme update

During Q1 2024, UNFPA, in collaboration with its implementing partners Etijah and the Ministry of Youth and Sports, continued to support refugee women and girls through 13 Women and Girls Safe Spaces across Egypt. The comprehensive GBV and SRH programmes in these safe spaces reached approximately 9,500 refugees, including 1,400 Syrian refugees. Notably, around 2,600 individuals participated in GBV and reproductive health awareness sessions, while about 4,300 received mental health and psychosocial support (MHPSS) through both group sessions and individual counselling.

Furthermore, 2,800 beneficiaries engaged in GBV case management consultations, and 1,400 received detailed SRH consultations in the medical counselling rooms within the safe spaces. Additionally, 250 participants took part in vocational training

sessions aimed at enhancing their economic empowerment, and approximately 170 individuals received emergency cash assistance as part of GBV case management.

In light of the crisis in Gaza, UNFPA is also actively coordinating with the Ministry of Health and Population to provide essential support to medical evacuees in Egypt, ensuring that pregnant women among them have access to necessary obstetric care. This response highlights UNFPA's commitment to addressing urgent health needs while supporting the broader well-being and empowerment of refugees in Egypt.

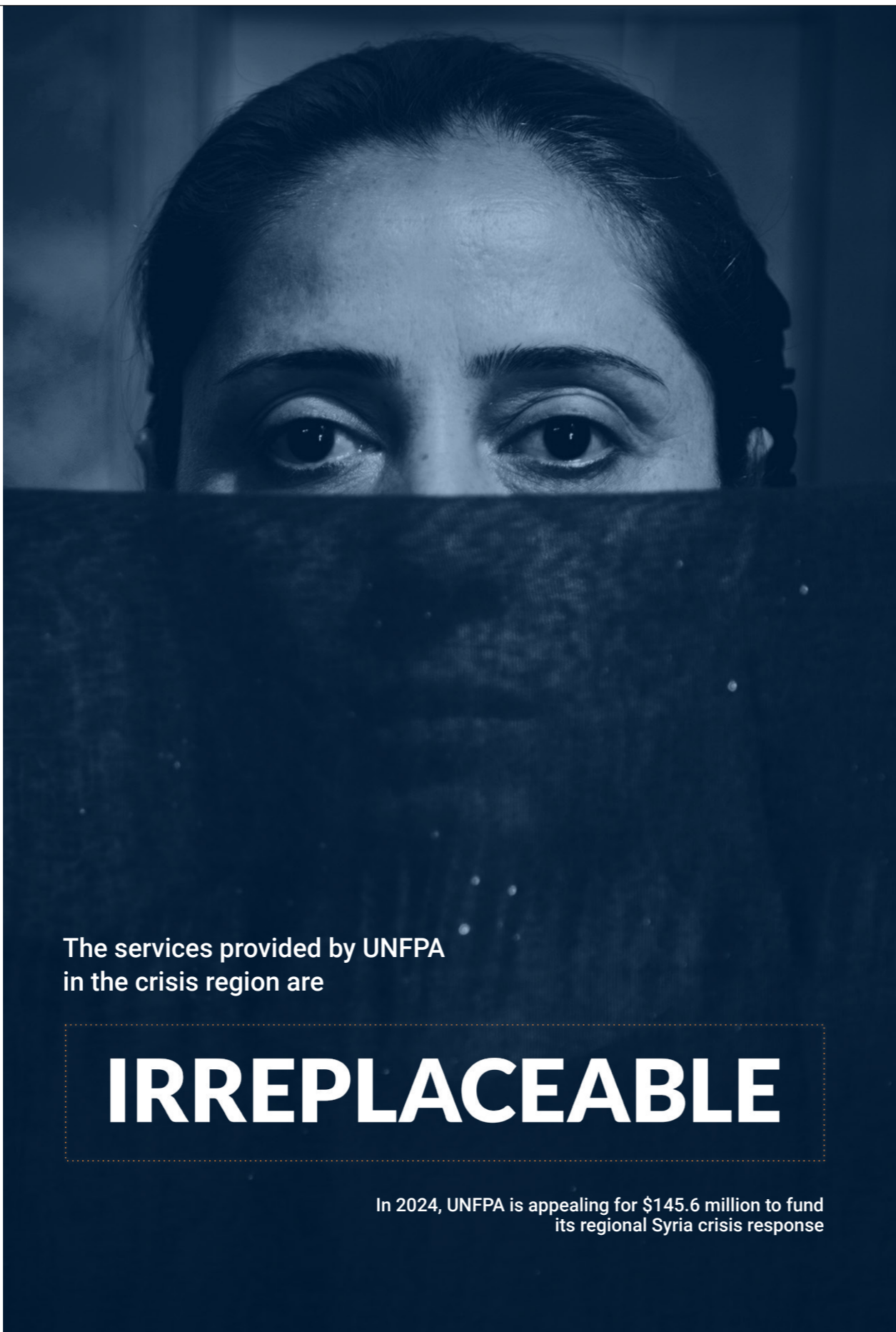
Finding Strength Together: Rama's Healing Journey in a UNFPA-Supported Psychosocial Support Group

"This psychosocial support group was like a true lifeline for me at this time," shared Rama, a 23-year-old Syrian woman who found solace and strength in the psychosocial support groups for GBV survivors at a UNFPA-supported safe space in Egypt. Within this supportive environment, Rama was able to share her story, express her feelings, and forge connections with other survivors. She found each session to be both healing and empowering.

Empowered by a compassionate group of facilitators and fellow survivors, Rama embarked on her journey towards recovery. Through therapeutic activities and group discussions, she learned strategies to cope with her trauma and began to rebuild her life. However, the most significant impact of the support group was the sense of solidarity it fostered. "By sharing my story and listening to others, I realised that I was not alone in my struggles," Rama reflected. This realisation helped her and her peers form a close-knit community united by resilience and a shared hope for a brighter future.

Rama's involvement in the psychosocial support group not only facilitated her own healing but also inspired others within the group. Her story is a testament to the resilience, compassion, and the remarkable capacity of the human spirit to overcome severe adversity.

THE CONSEQUENCES OF UNDERFUNDING



The services provided by UNFPA in the crisis region are

IRREPLACEABLE

In 2024, UNFPA is appealing for \$145.6 million to fund its regional Syria crisis response

Underfunding UNFPA’s crisis response jeopardises essential health and protection services for women, girls, and infants, increasing mortality risks and leaving many without access to vital gender-based violence programming. Throughout Syria, at least 42 health facilities, 52 mobile teams, 36 safe spaces, and 8 youth centres are at risk of closure due to funding shortfalls, resulting in unmet needs for over one million women and girls. Similar risks face neighbouring host countries, where more than 700,000 people will face challenges accessing the care they need.

As the world navigates an era marked by escalating global conflicts, the pressing challenges of climate change, and a stagnating global economy, the plight of those in humanitarian settings grows increasingly precarious. This is particularly evident in the case of the Syria crisis, whose protracted nature starkly illustrates the consequences of placing politics before humanity.

For 13 years, this particular crisis has not only caused widespread devastation but also set a precedent for the neglect of urgent humanitarian needs amidst political stalemates and shifting global priorities. As other areas in the region head in a similar direction, drawing attention and resources away, Syrians throughout the region – already grappling with the long-term impacts of their crisis – risk being forgotten. This situation underscores a worrying trend where those most in need are continually sidelined by the world’s ever-changing focus and the complex interplay of global events.

Underfunding UNFPA’s regional response to the crisis will significantly impact health facilities that provide sexual and reproductive health services. These services are vital for pregnant women, new mothers, and their infants. Maternal health services, including prenatal and postnatal care, family planning, and safe childbirth, are crucial for preventing maternal and infant morbidity and mortality. It also deprives them of a crucial entry point for survivors of sexual violence in conflict and other forms of gender-based violence to access specialised support and services.

Another dire consequence of underfunding is the inevitable closure of women and girls’ safe spaces, which have proven to be unparalleled tools for safeguarding the health and well-being of women and girls in need. The gap left behind by such closures leave women and girls without essential protection and support services, often in areas where no alternatives exist, putting them at further risk of gender-based violence, exploitation, and abuse. The situation is further exacerbated for the millions of displaced and refugee women and girls throughout the region, whose access to such services is even more critical.

Most importantly, the loss of funding will have a ripple effect on communities and societies at large. It threatens to reverse vital progress in gender equality and women’s empowerment, as programmes supporting these areas are often the first to face budget cuts. This not only hampers individual advancement but also stymies broader societal progress toward gender parity, which is crucial for community development and regional stability.

COORDINATION



UNFPA's coordination of gender-based violence is critical as it addresses a major health, human rights, and protection issue that often intensifies during emergencies. This coordination is key to providing accessible and safe services from the onset of a crisis and implementing prevention and mitigation mechanisms to reduce GBV. It involves collaboration between UN agencies, national governments, and local organisations to effectively deliver responses, meet priority needs, and reduce duplication of efforts.

The GBV Area of Responsibility (AoR), led by UNFPA, plays a significant role in ensuring a multi-sectoral response at various levels, offering crucial services

like health, mental health, legal aid, and livelihood support. This coordination is not only vital for immediate response but also for the long-term prevention and empowerment of survivors and at-risk individuals.

Whole of Syria (The Hub)

The Regional Humanitarian Hub for Syria and the Arab States recently conducted a desk review to assess evolving health (and particularly sexual and reproductive health) needs in Syria. The analysis highlighted profound challenges in healthcare access and functionality across Syria, impacting essential health services significantly.

Approximately 40% of primary and secondary healthcare facilities are not fully operational, adversely affecting over 4.8 million individuals in need of urgent health services. The situation is even more severe in 152 of 270 sub-districts, which are home to 11.76

million people. These areas suffer from an acute shortage of hospital beds, healthcare workers, and operational primary healthcare centres per 10,000 people. From 2022 to 2023, there was a noticeable decline in the functionality of primary health care and specialised facilities, including critical services such as emergency obstetric and neonatal care and blood bank services, essential for women's health.

Furthermore, a Health Cluster analysis based in Damascus reveals an alarmingly low availability of SRH and maternal and newborn health (MNH) services in government-controlled areas, with the average availability of SRH services at just 36%. This varies significantly across different regions, highlighting stark disparities in healthcare access. Antenatal care (ANC), a critical component of sexual, reproductive, maternal, newborn, and child health (SRMNH), is available in 83% of partially and fully functioning facilities. However, the actual coverage is misleading as a third of all facilities are non-operational. Critical gaps were also identified in Aleppo and northeast Syria, such as inconsistent blood pressure measurements for pregnant women and limited availability of iron folate, crucial for preventing anaemia. The 2024 Humanitarian Needs Overview (HNO) for Syria underscores the severe issues of malnutrition and anaemia, particularly affecting teenage mothers and their children.

These findings emphasise the need for integrated, standardised service packages for ANC visits, enhanced community outreach, and improved surveillance to boost healthcare access and quality. Moreover, there is a crucial need for systematic approaches to assess malnutrition, anaemia, and other risk factors in pregnant and lactating women, with an expansion of successful programs to tackle these widespread health challenges. The Hub will publish a comprehensive report detailing key findings and recommendations.

Meanwhile, the Whole of Syria GBV Area of Responsibility (GBV AoR) has completed several key initiatives for 2024. The GBV Humanitarian Response Plan (HRP) for 2024 was finalised, targeting 1.6 million people with a funding appeal of \$83.3 million USD, encompassing 79 projects submitted by 67 organisations across three hubs. The estimated population in need (PIN) for GBV in Syria for 2024 remains at 8.5 million.

Additionally, the GBV AoR has completed the *Voices from Syria 2024* report, anticipated to be published in the second quarter of 2024, alongside a related Advocacy Brief. To enhance the capacity of service providers, a training package on GBV Prevention and Response for Older Women was designed, with a Training of Trainers (ToT) conducted online from January 15-18, 2024. Plans are underway to extend this training across the respective GBV coordination groups in each hub.

Significant updates were made to the January-December 2023 GBV dashboard for the Whole of Syria, reflecting monthly data collection across the hubs.

The GBV AoR, in collaboration with the protection sector and other AoRs, revised the 5Ws template and conducted four trainings to prepare GBV organisations for reporting on their 2024 activities.

A new tracker tool was developed to monitor the status and planned closures of women and girls' safe spaces across the hubs, aiding in better programming, coordination, and advocacy efforts. Although primarily for internal use, aggregated data from the tracker will be shared with relevant stakeholders as necessary.

The year-end coordination survey garnered feedback from 77 organisations, revealing strong approval rates for member engagement in decision-making and skill development within GBV programs. Results indicated that 87% of respondents believe their capacity in developing and implementing quality GBV programs has improved, and 82% feel the GBV AoR has made a positive impact on GBV prevention, response, and risk mitigation in Syria.

Lastly, The Hub has finalised the development of *Stronger Together* – a comprehensive knowledge guide on integrating GBV and SRH approaches in humanitarian settings. The guide, available in both English and Arabic, is intended for use by GBV and SRH service providers and programme managers who wish to start, strengthen, or scale up integrated GBV and SRH interventions in humanitarian settings, thus delivering the best possible care to those in need.

Looking ahead, the GBV AoR has begun developing the 2024-2025 Whole of Syria GBV Strategy, aligning with the HRP framework to clarify and enhance GBV plans. This draft strategy will be reviewed by all hubs before finalisation, along with the development and alignment of hub-specific work plans for 2024.

Syria Country Office

UNFPA Syria maintained its leadership within the GBV Sub-Sector and Area of Responsibility, achieving significant milestones. The coordination team finalised the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) for 2024, establishing strategic objectives, indicators, and targets for the GBV framework. UNFPA also provided technical support to partners for the preparation and online submission of HRP projects, reviewing 115 submitted projects in collaboration with the protection sector and other Areas of Responsibility.

Additionally, the GBV Sub-Sector coordination team hosted a training in Qamishli for 15 participants from various sectors, focusing on GBV risk mitigation. This training is part of an ongoing series aimed at enhancing inter-sector action planning and the implementation of GBV risk mitigation actions in accordance with the IASC Guidelines. Moreover, UNFPA continued its advocacy efforts, promoting the inclusion of GBV prevention and response as a priority focus area across humanitarian coordination teams, inter-sector groups, and donor platforms, including CERF and SHF.

COORDINATION



Cross-Border Operations

During Q1 2024, three coordination meetings for the GBV AoR and three for the SRH TWG were held under the leadership of UNFPA. The GBV-SRH Integration Initiative continued with efforts to strengthen inclusiveness in essential SRH and GBV services across north-west Syria. Training on social inclusion was provided to 623 staff members (374 females and 249 males) across 117 health facilities, enhancing their capabilities to identify and address access barriers for persons with disabilities while delivering disability-sensitive services.

Additionally, 73 supervision and monitoring visits were conducted to facilitate on-the-job training, improving the delivery of comprehensive and inclusive response services to GBV survivors within health facilities. SRH IEC materials focused on disabilities were developed and disseminated among the SRH TWG, health cluster, and SRH/GBV initiative coordination group to ensure accessibility of SRH and GBV information and messages for persons with disabilities. In February, a workshop was convened to finalise the 2024 work plan for the SRH TWG.

Türkiye Country Office

UNFPA plays a pivotal role in the Regional Refugee & Resilience Plan (3RP) Inter-agency coordination mechanism, contributing significantly to the protection, health, and basic needs sectors. The 2024 appeals of 3RP partners indicate a more focused geographical scope, primarily targeting regions densely populated by refugees and provinces affected by the earthquake. There has been a noted decline in programmes aimed at non-Syrian refugees and those that are cross-cutting or intersectoral compared to 2023. However, there is a marked increase in initiatives targeting or mainstreaming persons with disabilities, reflecting a shift towards more inclusive programming.

In its capacity as co-lead of the GBV sub-Working Group and co-chair of the Southeast Turkey KRG Thematic Coordination Group (TCG), UNFPA has spearheaded significant inter-agency efforts. These efforts include expanding the typologies of GBV within the Monitoring & Evaluation (M&E) framework to address the evolving challenges impacting GBV. Moreover, UNFPA has enhanced partner coordination and capacity-building as outlined in the 2024 Work Plan. This includes legal

protection training aimed at improving the quality of services provided to vulnerable populations. Additionally, as a member of the Protection from Sexual Exploitation and Abuse (PSEA) Network and the Aging and Disability Inclusion Task Team (ADITT), UNFPA has contributed to developing strategies and training programmes focusing on the inclusion and protection of government personnel and persons with disabilities, ensuring that partners use the latest tools and practices, such as the Inter-Agency Referral Form (IARF) and various accessibility checklists.

Lebanon Country Office

During Q1 2024, UNFPA Lebanon continued its leadership role in addressing GBV by co-chairing the National Working Group on GBV and leading the GBVIMS, which plays a crucial role in enabling humanitarian organisations to efficiently collect, analyse, and share data concerning GBV survivors.

Furthermore, UNFPA maintained effective coordination with key gender and human rights platforms, including the UN Gender Working Group, the Human Rights Working Group, and the Protection from Sexual Exploitation and Abuse (PSEA) network, enhancing inter-agency advocacy on these critical issues. Additionally, UNFPA spearheaded the Reproductive Health Sub-Working Group (RH SWG) and the Clinical Management of Rape Task Force (CMR TF), undertaking significant initiatives such as updating the mapping of sexual and reproductive health (SRH) services to improve referral processes and collaborating with the Ministry of Public Health to map providers for subsidised CMR services. UNFPA also played a pivotal role in developing annual work plans for both the RH SWG and CMR TF, ensuring ongoing support and strategic direction in these areas.

Jordan Country Office

In its ongoing efforts to bridge the humanitarian-development nexus, the SRH sub-working group has made significant strides in integrating SRH responses and refugee health policies into the national health systems. This month's notable achievement is the transition of the co-chair role to the Ministry of Health, underscoring a deepened commitment to national ownership and aligning our initiatives with governmental strategies. This structural change marks a significant advancement in our approach, particularly in addressing persistent SRH issues and our responses to refugee needs through integrated health services. These efforts are reflective of our commitment to adapting and responding to the complex health challenges within Jordan, ensuring that our strategies are both inclusive and effective in meeting the needs of all communities.

Meanwhile, UNFPA maintained its co-leadership role in the national Gender-Based Violence Sub-Working Group (GBV SWG), developing its 2024 work plan based on a review of the previous year's achievements and challenges. The GBV SWG also conducted an extensive

review, titled "Deep Dive into Sub National Coordination," which included presentations on 2023 achievements and the 2024 work plans across various field locations including Zaatari, Azraq, Irbid, and Mafrq. Additionally, the group updated the 4Ws tool—aimed at clarifying who is doing what, where, and when—to support service delivery and prevent duplication. This tool is essential for maintaining an up-to-date database of GBV activities and enhancing service coordination through shared information among stakeholders. The GBV SWG also commemorated International Women's Day with a social media campaign and various community engagement activities in refugee camps and on the sub-national level.

Iraq Country Office

The Humanitarian Transition Strategy for Iraq in 2023 shifted to a sectoral approach, led by government agencies and national GBV service providers, with support from UN agencies, INGOs, national actors, and donor agencies. In 2024, UNFPA is continuing backing the sub-cluster's capacity in KRI, while in Federal Iraq, coordination meetings began under UNFPA's logistical and technical assistance.

UNFPA also co-chaired the GBV Information Management System Task Force with UNHCR, facilitating coordination, capacity building, and essential support. This ongoing commitment aims to strengthen coordination, build capacities, and support the project's objectives. UNFPA also played a pivotal role in supporting the government's efforts against GBV in Iraq, fostering collaboration between key departments and organisations, establishing sub-working groups, and discussing training and reporting mechanisms for effective action.

Egypt Country Office

The GBV SWG in Egypt has effectively updated its Standard Operating Procedures (SOP) / Terms of Reference (ToR) and the GBV referral pathway for 2024. Additionally, an annual work plan for 2024 has been developed, which will be reviewed quarterly by the SWG.

In February, the co-chairs of the GBV SWG hosted a donor round-table event to discuss the GBV context and trends of 2023, achievements, and the identified gaps and challenges in GBV interventions. The event aimed to engage donors further and advocate for the critical needs of refugees at risk of GBV. Moreover, the SWG has ensured the establishment of post-rape support services in Aswan, a region with a high density of refugees. UNFPA was instrumental in conducting capacity-building sessions for medical service providers and supplying post-rape kits in Aswan.

DONORS & PARTNERS

THE ESSENTIAL SERVICES BEING DELIVERED TO SYRIANS REGION-WIDE WOULD NOT BE POSSIBLE WITHOUT THE GENEROUS SUPPORT OF OUR DONORS AND PARTNERS.

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In Lebanon: Ministry of Public Health (MoPH), Ministry of Social Affairs (MoSA), National Commission for Lebanese Women (NCLW), AMEL Association, Lebanese Order of Midwives (LOM), AKKAROUNA, SIDC, SALAMA, LECORVAV, CARITAS, CONCERN, NABAD, ABAAD, MAKASSED, Imam Sadr Foundation (ISF).

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), and Etijah.

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, HASÜDER (Public Health Specialists Association), MDM (Doctors of the World / Médecins du Monde). For the service units that are under direct implementation, UNFPA is collaborating with Sanliurfa Municipality.

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

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RELEVANT RESOURCES

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<http://Syria.humanitarianresponse.info>

