

# REGIONAL SITUATION REPORT

FOR THE SYRIA CRISIS

March 2023

“ OUR BODIES HAVE HEALED, BUT OUR MINDS HAVE NOT.

– SARA, a woman who accessed services at a UNFPA-supported Safe Space in Jindires. The space was temporarily shut down and used as a morgue after the earthquake but is now up and running and providing much needed services to women and girls in need.

## SNAPSHOT

**As of early 2023, Syrians and host communities throughout the region are living through one of the worst years of the crisis. People in need continue to face the escalating impact of a protracted conflict, further complicated by a collapsing economy, climate-related challenges, and chronic and new emergencies, including the massive earthquake that struck Türkiye and north-west Syria in February 2023.**

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 widespread and ongoing humanitarian challenges in multiple countries, far-reaching inflation and economic recession, as well as the wider impacts of the war in Ukraine. More than twelve years into this protracted crisis, people continue to endure the cumulative effects of years of instability, the risks of which are even higher now due to extended disruption in community networks and the rule of law.

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 (The Hub) in Amman, and spans operations led by UNFPA offices in Türkiye, Lebanon, Jordan, Iraq, and Egypt, in addition to operations led inside Syria, both 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.





# ISSUE # 127

# MARCH 2023



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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[www.ocha.org](http://www.ocha.org)  
[www.unhcr.org](http://www.unhcr.org)  
<http://syria.humanitarianresponse.info>



# CRISES WITHIN CRISES UNFOLD AS SYRIAN COMMUNITIES ARE PUSHED TO THE BRINK.

In 2023, the needs of Syrians and host communities are higher than ever, particularly in light of widespread economic collapse, the cumulative impact of 12 years of conflict, climate-related challenges, and various other socio-political factors that have exacerbated pre-existing vulnerabilities.

Despite the continuing efforts of humanitarian actors, the Syria crisis remains one of the world's most complex humanitarian and protection emergencies. As of early 2023, 15.3 million people are in need of humanitarian assistance – the highest number since the onset of the crisis in 2011. This includes 7.7 million women and girls, 4.2 million of whom are of reproductive age.

Meanwhile, more than 6.8 million Syrian refugees remain as refugees in five neighbouring countries – Türkiye, Lebanon, Jordan, Iraq and Egypt, nearly half of whom are women and girls.

## A disaster unfolds in the north-west

On February 6, communities surviving extreme conditions in north-west Syria were pushed to the brink after multiple earthquakes, the strongest being of 7.7 magnitude, struck southern Türkiye and northern Syria, creating a disaster of colossal proportions. Following the initial quake, around 17,000 aftershocks occurred until March 13, highlighting the vulnerability of the region to future earthquakes and the severe risks facing communities.

In addition to leaving hundreds of thousands of people – mostly women and children – without access to shelter, food, water, heat, and healthcare, the emergency has further amplified the challenges of an already weak and fragile health system. Maintaining access to lifesaving sexual and reproductive health assistance, integrated SRH-GBV services, and other essential health services remains a critical response priority for UNFPA and its partners operating on the ground. Moreover, the situation is further compounding the risks of gender-based violence, particularly as women and girls are forced to stay in overcrowded shelters that lack adequate privacy, lighting, and security.

Prior to the earthquakes, conditions in displacement camps in the north-west of the country were already dire as people were left with little choice but to return to their homes in front-line areas, where active hostilities and indiscriminate attacks against civilians have claimed countless lives and targeted food and water resources.

Throughout 2022, civilian life and humanitarian assistance were severely impacted by artillery shelling, air strikes, land mines, and unexploded ordnance, creating fear for millions of Syrians who have known nothing but conflict and displacement. Compounding the impact of these challenges is the growing threat of climate-related shocks, with serious drought and flooding creating additional needs and threats. More than a decade of conflict has also resulted in large-scale destruction of the water and sanitation infrastructure, leaving significant numbers of Syrian families in overcrowded displacement sites and poor WASH conditions. Up to 47 percent of the population rely on often unsafe alternatives to piped water, which constitutes a major risk factor for disease outbreaks, including cholera.

## Women & girls pay the steepest price

Assessments and focus group discussions conducted by UNFPA show that gender-based violence continues to pervade the daily lives of Syrian women and girls impacted by the crisis. 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 women and girls are consistently 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.”



**15.3 MILLION**  
Estimated people in need inside Syria



**4.2 MILLION**  
Women and girls of reproductive age in need in Syria



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



**5.6 MILLION**  
Refugees, asylum seekers, or stateless people in the region



## “ FOR MOST PEOPLE IN SYRIA, LIFE TODAY CARRIES VERY FEW PROSPECTS FOR A BETTER FUTURE.

— RIMA, a young woman from Aleppo

Unsurprisingly, women and girls throughout Syria and the crisis region are telling UNFPA that the violence against them has become normalized. 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. Adolescent girls in particular face a wide range of challenges that usually accompany them throughout their lives. It begins with restrictions on movement and domestic violence, and progresses as the girl grows to include child and serial marriage, domestic violence, early pregnancy, sexual violence, and sexual exploitation, among others. Girls are also being denied their education, which further limits their life prospects and can entrap them in an unending cycle of violence and exploitation.

### Throughout the region, Syrians & host communities face an uphill battle

More than 6.8 million Syrians remain as refugees in five neighbouring countries – Türkiye, Lebanon, Jordan, Iraq and Egypt. For the women and girls among them, the protracted nature of the crisis has only multiplied the risks, including the growing threat of gender-based violence in its various forms. Many Syrian refugees live in overcrowded and unsafe conditions, where women and girls are at risk of harassment, assault, and exploitation. The worsening macroeconomic context, now worse than ever after the war in Ukraine, is also forcing countless families to resort to negative coping mechanisms to survive, including child and forced marriage.

Moreover, Syrian refugees in host countries continue to face discrimination, even as they struggle to overcome their traumas and rebuild their lives. This can manifest in a multitude of ways, including limited access to employment opportunities, education, healthcare, and basic services. For women and girls, it can also mean further risk of violence and fewer opportunities to access legal assistance. Discrimination continues to be a significant barrier to their integration and can contribute to their marginalisation and exclusion from society, further underscoring the essentiality of programmes tailored to their unique needs and challenges.

### UNFPA continues to show up

Among the millions of Syrians who have spent the last 12 years surviving conflict, displacement, economic collapse, and mounting risks to their safety, many feel their calls for help have been increasingly drowned out. 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 and humanitarian actors will continue to advocate for the rights and well-being of all Syrians, particularly women and girls. As of March 2023, as part of its regional response to the crisis since the beginning of the year, UNFPA has delivered sexual and reproductive health services to more than 400,000 people, while around 250,000 were reached with services designed to prevent and respond to gender-based violence, including around 105,000 adolescent girls. More than 11,000 women were provided with cash and voucher assistance, and more than 2,300 LGBTQIA+ individuals were served.

**In 2023, UNFPA is appealing for a total of USD 141.9 million to fund its regional Syria crisis response, which spans the Whole of Syria, Türkiye, Lebanon, Jordan, Iraq, and Egypt. In addition, UNFPA has also launched a [Whole of Syria appeal](#) to fund its response to the recent earthquakes.**





# #ThisIsNotNormal

## Disrupting the normalization of violence against women and girls

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

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 has been normalized in many communities.

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 normalization 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.

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



# FROM ALL OPERATIONS

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

**401,859**

PEOPLE REACHED WITH SRH SERVICES

96% FEMALE

**4,104**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

88% FEMALE

**249,650**

PEOPLE REACHED WITH GBV PROGRAMMING

91% FEMALE

**2,320**

LGBTQIA+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

**8,541**

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

84% FEMALE

**11,153**

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

98% FEMALE

**104,941**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**1,901**

PEOPLE TRAINED ON VARIOUS TOPICS

77% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	47,697	100%
Family planning consultations	99,721	99%
Normal / assisted vaginal deliveries	6,928	100%
C-sections	3,042	100%
Ante-natal care consultations	79,825	100%
Post-natal care consultations	18,642	100%
People trained on SRH-related topics	712	83%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	53,673	100%
People reached with dignity kits	129,273	100%
GBV case management consultations	9,556	95%
People reached with GBV awareness sessions	172,079	95%
People trained on GBV-related topics	1,040	70%

## YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	3,571	100%
People trained on youth-related topics	149	96%



**90**  
PRIMARY HEALTHCARE FACILITIES \*



**88**  
WOMEN AND GIRLS SAFE SPACES



**29**  
EMERGENCY OBSTETRIC CARE FACILITIES



**5**  
YOUTH CENTRES



**83**  
MOBILE CLINICS



**22**  
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

**330,365**

PEOPLE REACHED WITH SRH SERVICES

96% FEMALE

**213,646**

PEOPLE REACHED WITH GBV PROGRAMMING

92% FEMALE

**3,350**

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

79% FEMALE

**90,696**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**2,942**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

88% FEMALE

**10,153**

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

**939**

PEOPLE TRAINED ON VARIOUS TOPICS

78% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	42,515	100%
Family planning consultations	84,709	99%
Normal / assisted vaginal deliveries	6,481	100%
C-sections	3,042	100%
Ante-natal care consultations	67,586	100%
Post-natal care consultations	16,220	100%
People trained on SRH-related topics	517	86%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	46,448	100%
People reached with dignity kits	114,948	100%
GBV case management consultations	5,544	96%
People reached with GBV awareness sessions	145,351	96%
People trained on GBV-related topics	422	68%



70

PRIMARY HEALTHCARE FACILITIES \*



52

WOMEN AND GIRLS SAFE SPACES



27

EMERGENCY OBSTETRIC CARE FACILITIES



83

MOBILE CLINICS



8

OTHER SERVICE DELIVERY POINTS

On 9 January 2023, the United Nations Security Council reauthorized cross-border humanitarian access from Türkiye until July 2023, which allows UNFPA Türkiye Cross-Border to continue providing essential services to women and girls living in north-west Syria. This decision was welcomed by UN leaders, including UNFPA's Executive Director, as a fundamental way to preserve this essential lifeline for the 4.1 million people in need in the north-west.

Cross-border operations in Syria remain essential to ensuring that women have access to essential 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 essential 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.

UNFPA's efforts in the Whole of Syria are part of a broader global initiative aimed at ensuring that women and girls have access to essential SRH services and are protected from GBV in crisis settings. As a member of the Inter-Agency Working Group on Reproductive Health in Crises (IAWG), UNFPA works with other organizations to coordinate their efforts to ensure that women and girls receive the support they need during crises. Their cross-border operations are a critical part of these efforts, providing much-needed assistance to women in need, even in the most challenging circumstances.

\* 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.

# SYRIA COUNTRY OFFICE

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

**289,451**

PEOPLE REACHED WITH SRH SERVICES

96% FEMALE

**188,965**

PEOPLE REACHED WITH GBV PROGRAMMING

93% FEMALE

**3,350**

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

79% FEMALE

**80,930**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**1,595**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

92% FEMALE

**10,153**

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

**292**

PEOPLE TRAINED ON VARIOUS TOPICS

85% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	42,515	100%
Family planning consultations	79,894	100%
Normal / assisted vaginal deliveries	1,880	100%
C-sections	1,706	100%
Ante-natal care consultations	58,514	100%
Post-natal care consultations	6,902	100%
People trained on SRH-related topics	271	85%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	36,682	100%
People reached with dignity kits	53,379	100%
GBV case management consultations	5,286	96%
People reached with GBV awareness sessions	137,544	97%
People trained on GBV-related topics	21	86%



61

PRIMARY HEALTHCARE FACILITIES \*



37

WOMEN AND GIRLS SAFE SPACES



19

EMERGENCY OBSTETRIC CARE FACILITIES



82

MOBILE CLINICS



8

OTHER SERVICE DELIVERY POINTS

"I love reading, but I've not been able to read much since my family and I took refuge in this shelter," explains 14 year-old Alaa, one of the many women and girls who have been displaced by the recent earthquakes in Aleppo. She and her family moved into the Cement Plant in the Sheikh Saeed neighborhood, which became a temporary shelter following the disaster.

Close to a hundred other families are taking refuge in the cement plant. The awareness sessions being offered tackle various topics including personal hygiene during menstruation, general health, life skills, coping with daily stress, sexual harassment, and sex and gender.

Alaa feels comforted when attending the UNFPA-supported awareness sessions provided at the shelter. "It has given me my happiest moments since arriving to this shelter. The activities were quite enjoyable and I was able to express my creative side with my friends."

\* 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.



# TÜRKIYE CROSS-BORDER

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

**42,104**

PEOPLE REACHED WITH SRH SERVICES

95% FEMALE

**25,319**

PEOPLE REACHED WITH GBV PROGRAMMING

83% FEMALE

**10,570**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**1,649**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

87% FEMALE

**602**

PEOPLE TRAINED ON VARIOUS TOPICS

74% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Family planning consultations	5,075	95%
Normal / assisted vaginal deliveries	4,667	100%
C-sections	1,316	100%
Ante-natal care consultations	22,901	100%
Post-natal care consultations	10,422	100%
People trained on SRH-related topics	201	87%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	10,570	100%
People reached with dignity kits	66,088	100%
GBV case management consultations	299	96%
People reached with GBV awareness sessions	12,236	81%
People trained on GBV-related topics	401	67%



9

PRIMARY HEALTHCARE FACILITIES



14

WOMEN AND GIRLS SAFE SPACES



8

EMERGENCY OBSTETRIC CARE FACILITIES



1

MOBILE TEAMS

The humanitarian situation in north-west Syria remains dire for the 4.1 million people who are dependent on the humanitarian assistance provided through cross-border operations. Out of the area's 4.5 million population, 2.9 million are internally displaced. Of those, 1.9 million live in camps and informal settlements. The devastating earthquakes in February further exacerbated protection risks and access to critical and lifesaving services. To date, 3.3 million need health assistance, 1,305,000 people need SRH services, and at least 85,000 are in urgent need of accessing GBV services.

In March, UNFPA continued to transship IARH Kits, dignity kits, and medical equipment to north-west Syria through the three open border crossings, namely Bab al-Hawa, Bab Al-Salam, and Al Ra'ee. UNFPA also conducted more frequent cross-border missions into north-west Syria to assess the needs and identify emerging priorities of women and girls affected by the earthquake. Moreover, UNFPA's partners distributed 37,605 dignity kits to women and girls, and these remain key strategic entry points for identifying and referring women and girls at risk of GBV. In addition to providing essential menstrual hygiene supplies, dignity kits

can also include other essential items such as a flashlight, a blanket, and a whistler, which can be vital for women's safety and security in emergency situations.

Moreover, since the onset of the emergency, UNFPA has worked with its SRH partners to ensure the continuity of critical services. While the majority of SRH services have already been re-established, women and girls in areas greatly affected by the earthquake are still reluctant to enter health facilities due to the trauma from the event itself and the recurring aftershocks that have occurred

since. In response, tents were set-up outside the facilities to alleviate anxiety while still allowing those in need to give birth in settings attended by skilled professionals. UNFPA is currently conducting a community-based assessment to better adapt the response to respond to evolving SRH needs and priorities.



# TÜRKIYE COUNTRY OFFICE

**27,829**

PEOPLE REACHED WITH SRH SERVICES

92% FEMALE

**22,321**

PEOPLE REACHED WITH GBV PROGRAMMING

79% FEMALE

**2,934**

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

92% FEMALE

**5,865**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**291**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

51% FEMALE

**2,317**

LGBTQIA+ INDIVIDUALS SUPPORTED THROUGH VARIOUS SERVICES

**359**

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

42% FEMALE

**860**

PEOPLE TRAINED ON VARIOUS TOPICS

75% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	2,504	100%
Family planning consultations	6,952	92%
Ante-natal care consultations	1,752	100%
Post-natal care consultations	688	100%
People trained on SRH-related topics	109	61%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	2,897	100%
People reached with dignity kits	13,026	98%
GBV case management consultations	613	81%
People reached with GBV awareness sessions	16,913	86%
People trained on GBV-related topics	618	72%

## YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	464	100%
People trained on youth-related topics	133	98%



**5**  
WOMEN AND GIRLS SAFE SPACES \*



**4**  
YOUTH CENTRES



**14**  
OTHER SERVICE DELIVERY POINTS

UNFPA provides sexual and reproductive health (SRH) services and protection services, including prevention and response to gender-based violence (GBV), through 21 regular static service units. Following the Kahramanmaraş earthquake on February 6, the Youth Centre in Hatay had to be closed due to severe building damage. Simultaneously, UNFPA scaled up its operations to address earthquake-related needs. They opened one static service unit in Gaziantep, two tent service units in Malatya and Adiyaman, and deployed 10 mobile outreach teams in affected provinces, including Adana (1), Diyarbakır (2), Hatay (1), Şanlıurfa (2), Adiyaman (1), Kahramanmaraş (1), Malatya (1), and Gaziantep (1). These efforts aimed to provide SRH and GBV information and services, particularly in remote areas and informal shelters.

UNFPA closely coordinates with line ministries to provide necessary support for the provision of SRH and GBV services. They procured 10 tents, which Provincial Health Directorates use to coordinate SRH activities in the 11 affected provinces. Additionally, UNFPA acquired 26 metric tons of reproductive health kits.

To further enhance communication with communities in the affected provinces, an implementing partner established a laundry area within the tent service unit in Adiyaman. This initiative facilitates trust-building between service providers and vulnerable women and allows for information sharing on GBV and SRH topics.

In March, UNFPA conducted a pilot session on menstrual health management for younger and older adolescent girls. The aim was to increase their confidence in managing their menstruation. The training covered topics such as puberty, menstruation, available menstrual products, and dispelled beliefs that limit women and girls' ability to manage their menstrual cycle with dignity. UNFPA also conducted supervision and self-care sessions for 98 service providers from UNFPA-supported service units, which helped equip participants with the necessary tools to cope with the trauma and stress caused by the Kahramanmaraş earthquake.

At the end of March, UNFPA organized a workshop to showcase the achieved results within the Women and Youth Support Center in Ankara. This center will no longer receive support from UNFPA in partnership with Ankara Metropolitan Municipality. However, it will continue its operations, fully managed by Ankara Metropolitan Municipality, while following the same service provision model, serving women and youth.

\* 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.



# 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.

**10,018**

PEOPLE REACHED WITH SRH SERVICES

100% FEMALE

**620**

PEOPLE PROVIDED WITH CASH & VOUCHER ASSISTANCE

100% FEMALE

**6,170**

PEOPLE REACHED WITH GBV PROGRAMMING

100% FEMALE

**536**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

100% FEMALE

**2,348**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	675	100%
Family planning consultations	2,061	100%
Ante-natal care consultations	708	100%
Post-natal care consultations	201	100%
People trained on SRH-related topics	12	100%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	1,673	100%
People reached with dignity kits	804	100%
GBV case management consultations	2,105	98%
People reached with GBV awareness sessions	3,834	100%



5  
PRIMARY HEALTHCARE FACILITIES\*



3  
WOMEN AND GIRLS SAFE SPACES

Lebanon continues to face numerous obstacles, including political turmoil, financial instability, high unemployment rates, and inflation. In March, the parallel market rate for the US dollar to Lebanese pound (LBP) reached LBP 143,000 on March 21, causing a further devaluation of the pound and resulting in increased fuel prices. However, the pound later strengthened against the dollar, leading to a recovery in fuel prices. The Association of Lebanese Banks (ABL) went on strike on March 14, resulting in the closure of commercial banks until March 22. On March 23, employees of the state-owned internet provider went on strike to protest reduced salaries due to the depreciation of the LBP, leading to internet disruptions throughout Lebanon. These economic challenges and political instabilities have significantly impacted vulnerable communities, particularly women, who are experiencing heightened risks and challenges.

During March, UNFPA worked with partners to deliver gender-based violence (GBV) and sexual and reproductive health (SRH) services in Beirut, Mount-Lebanon, Bekaa, and South. Partners continued to provide specialized GBV services, including legal and psychosocial support, awareness-raising sessions,

and referrals as needed. They also offered life skills and vocational training, conducted awareness sessions on GBV-related issues, and reached out to LGBTQIA+ individuals and people with disabilities. SRH services encompassed counseling, medical consultations, and tests, with particular attention given to pregnant women. In Bekaa, the IPs organized a menstrual hygiene management training program for peer educators and developed a family planning acceleration plan.

However, the month also presented challenges, as the socio-economic situation deteriorated, leading to increased unmet basic needs and higher risks of GBV. The high costs of transportation and communication posed significant barriers to accessing services, despite UNFPA's provision of cash assistance for transportation. Some medications were unavailable at primary healthcare centers operated by partners.



SOME DAYS, I EXPERIENCE THE DISCRIMINATION EXPLICITLY. A SHOPOWNER 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



# ‘MIDWIVES ARE OFTEN UNDERPAID AND UNDERAPPRECIATED’

AS A MEMBER OF UNFPA LEBANON’S MIDWIFERY NETWORK, NOUR BELIEVES THE IMPORTANCE OF MIDWIVES CANNOT BE OVERSTATED.

Nour, a passionate and dedicated 33-year-old midwife, is firmly committed to assisting women throughout their pregnancy journey. She explains, “I am part of the midwifery network supported by UNFPA Lebanon, and I view my role as deeply humanitarian. I take great pride in being able to make a difference in the lives of the women I work with.”

When it comes to her work, Nour believes that providing support during emergencies is of utmost importance. She emphasizes, “During difficult and severe cases, I feel that my role becomes even more significant. I often find myself being the one who can help women in unpredictable circumstances, and it fills me with joy to make a positive impact on their lives.”

One aspect of her work that Nour finds particularly rewarding is supporting new mothers with breastfeeding. She explains, “This can be an anxious time for mothers, as they want to ensure their babies receive the right nutrition. I take immense pride in being able to assist these women throughout the process, and the love and gratitude I receive from them overwhelms me.”

However, despite the many rewards her job brings, Nour expresses concerns about the state of midwifery in Lebanon. “Midwives are often underpaid and underappreciated, which can be demoralizing for those working in this field. Midwives play an essential role in the healthcare system, and they should be recognized for their vital contributions in supporting women during pregnancy and childbirth.”

Nour also addresses an issue she has encountered, stating, “Some women prefer to work with female midwives rather than male gynecologists. While I understand this preference, it is crucial that all healthcare providers are valued equally for their skills and expertise. Regardless of gender, we should all be recognized for our dedication to providing quality care.”

Through her unwavering dedication, Nour has made a significant impact on the lives of countless women and their families. She shares, “My passion for supporting women during pregnancy and childbirth serves as an inspiration to all who work in the field of midwifery. I’m grateful for the support of organizations like UNFPA, who recognize the importance of midwives like me and advocate for our rights and recognition.”

🗨️ I’M GRATEFUL FOR THE SUPPORT OF ORGANIZATIONS LIKE UNFPA, WHO RECOGNIZE THE IMPORTANCE OF MIDWIVES LIKE ME AND ADVOCATE FOR OUR RIGHTS.

– SOUAD, a woman who recently accessed services at a UNFPA-supported facility





# JORDAN COUNTRY OFFICE

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

**21,295**

PEOPLE REACHED WITH SRH SERVICES

99% FEMALE

**4,110**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**4,311**

PEOPLE REACHED WITH GBV PROGRAMMING

97% FEMALE

**305**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

98% FEMALE

**2,206**

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

80% FEMALE

**18**

PEOPLE TRAINED ON VARIOUS TOPICS

78% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	857	100%
Family planning consultations	2,745	100%
Normal / assisted vaginal deliveries	233	100%
Ante-natal care consultations	4,927	100%
Post-natal care consultations	724	100%

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	524	100%
GBV case management consultations	254	96%
People reached with GBV awareness sessions	1,969	97%

## YOUTH SERVICES

	TOTAL	% FEMALE
Adolescent girls reached with youth activities	930	100%
People trained on youth-related topics	6	100%



**11**  
PRIMARY HEALTHCARE FACILITIES



**17**  
WOMEN AND GIRLS SAFE SPACES



**1**  
EMERGENCY OBSTETRIC CARE FACILITY



**1**  
YOUTH CENTRE

UNFPA Jordan commemorated International Women’s Day by promoting the protection of women’s rights in technology-facilitated spaces through the campaign “Making All Spaces Safe.” Various activities were undertaken to raise awareness, including a social media campaign and community engagement activities. The campaign sought to amplify the voices of communities, promote their rights, and address technology-facilitated gender-based violence in virtual spaces.

As part of an initiative to build social, economic, and health assets for adolescent girls and young women in Karak, UNFPA Jordan conducted a specialised training programme for 25 mentors on digital entrepreneurship and business plan development. These workshops resulted in innovative ideas and the completion of business plans, the progress of which will be monitored to provide guidance on digital entrepreneurship and connect young women with relevant stakeholders.

Meanwhile, the Adolescent Girls’ Empowerment-Led (AGEL) space organised a graduation event for 50 adolescent girls aged 10 to 19. The graduation event held significant meaning for the adolescent girls, as it acknowledged their efforts and achievements in the center’s SRHR programs. It provided a platform for reflection on personal growth and development, as well as an opportunity to celebrate successes with peers, mentors, and supporters.

It is worth noting that the SRH humanitarian response in Jordan aims to enhance access to and use of comprehensive sexual and reproductive health services, with a particular focus on vulnerable populations such as Syrian refugees and impoverished host communities. To achieve this, the SRH program supports mobile clinics and 11 static clinics in underserved areas across Jordan. These clinics offer a wide range of services, including family planning, antenatal and postnatal care, information and counseling, and identification and referral for GBV survivors.

Furthermore, the programme focuses on building the capacity of healthcare providers to deliver quality sexual and reproductive health services and has conducted outreach activities to raise awareness about the importance of sexual and reproductive health. Stakeholders directly involved in the project have praised its impact on their lives.

“I was worried about my pregnancy, but the doctors at the clinic were kind and knowledgeable,” said one Syrian adolescent girl who recently accessed services at the UNFPA-supported clinic in Zaatari Camp. “They made me feel comfortable and safe, and I’m grateful for the care they provided.” Meanwhile, a healthcare provider who received training through the project noted that the experience further reinforced her skills as a provider, adding “I feel more confident in my ability to deliver quality care to my patients.”



# “OUR BODIES DESERVE CARE AND RESPECT”

## ONE SYRIAN MOTHER’S JOURNEY TOWARDS SAFETY AND A BETTER FUTURE.

Amira, a 27-year-old mother, bravely endured the hardships of war and displacement to secure safety for herself and her four children: Ali (8), Sham (4), Shahid (3), and Shaima (1 month). In 2011, at the tender age of 15, Amira fled her hometown of Homs in Syria due to the escalating conflict, seeking refuge in Jordan. Recounting her experience, she says, “The continuous bombing and shooting forced us to constantly move from one house to another in search of safety.”

After a tumultuous journey, Amira’s family eventually found refuge in a remote village in the Homs countryside before making their way to Jordan. They paid a smuggler for a grueling week-long journey to the border, where they were taken to the Al-Zatari camp. After spending two months in the camp, Amira and her family settled in Irbid, a city in northern Jordan. Reflecting on those years, Amira fondly recalls, “It was a delightful time.”

**‘The continuous bombing and shooting forced us to constantly move from one house to another in search of safety’**

In 2015, Amira’s life took an unexpected turn when she got married and began her journey as a wife and mother. Her husband, Ahmad, encountered legal issues that led to his placement in the Azraq camp. Amira chose to accompany him, and they have been living in the camp ever since.

As a mother and life-giver, Amira has faced numerous health challenges that have taken a toll on her well-being. She reveals, “I’ve been pregnant a total of seven times, two of which ended in miscarriage — one at four months and the other at five months. I also gave birth to a baby who passed away just 15 days after being born. I also suffer from blood clotting, iron deficiency, and anemia.”

**‘I’ve been pregnant a total of seven times, two of which ended in miscarriage — one at four months and the other at five months. I also gave birth to a baby who passed away just 15 days after being born’**

During her last pregnancy, Amira had concerns about her health and the risk of another miscarriage. Consequently, she sought medical care at one of the two clinics within the camp, where UNFPA supports vital reproductive health services, where she met midwives Aml and Bayan. “They closely monitored my case from the beginning of the pregnancy, providing not only medical care but also valuable support for my psychological well-being during difficult times.”

At the UNFPA-supported clinic, Amira received comprehensive medical care for her blood clotting disorder, anemia, and iron deficiency. Additionally, she was prescribed medication to help prevent a potential miscarriage.

Amira is among the more than 20% of the camp’s population who require assistance with family planning, ante- and postnatal care, post-abortion care, and referrals. Access to comprehensive family planning services is crucial for women’s health and empowerment. By offering a range of contraceptive methods, including long-lasting options such as IUDs and hormonal injections, as well as short-term solutions like birth control pills and condoms, the clinic plays a vital role in meeting the needs of women in the community.

Continued support and investment in these services will enable women to make informed choices about their reproductive health and future. Amira states, “After careful consideration, I became convinced of the importance of family planning. It is essential to treat our bodies with care and respect, particularly considering my personal struggle with anemia and other health problems.”





# 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.

**2,700**

PEOPLE REACHED WITH SRH SERVICES

99% FEMALE

**1,353**

ADOLESCENT GIRLS SUPPORTED THROUGH VARIOUS PROGRAMMES

**1,016**

PEOPLE REACHED WITH GBV PROGRAMMING

94% FEMALE

**305**

PEOPLE WITH DISABILITIES REACHED WITH VARIOUS SERVICES

98% FEMALE

## REPRODUCTIVE HEALTH

	TOTAL	% FEMALE
Adolescent girls reached with SRH services	683	100%
Family planning consultations	1,675	100%
Normal / assisted vaginal deliveries	114	100%
Ante-natal care consultations	2,032	100%
Post-natal care consultations	450	100%



5  
PRIMARY HEALTHCARE FACILITIES

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	670	100%
People reached with dignity kits	495	100%
GBV case management consultations	25	100%
People reached with GBV awareness sessions	3,698	87%



1  
EMERGENCY OBSTETRIC CARE FACILITY

## IRAQ IN 2023: AN EVOLVING CONTEXT

Iraq remains a country with a very high risk of a humanitarian crisis, currently ranked 18 out of 191 on the INFORM Risk Index, and is grappling with three main crises that overlap. Years of violent conflict have resulted in protracted displacement and significant humanitarian challenges. Political instability and unrest, compounded by regional tensions, including those related to natural resources, have heightened fragility and the risk of backsliding into conflict. The COVID-19 pandemic and its ongoing ramifications have further exacerbated these challenges, acting as threat multipliers.

It is expected that the humanitarian and recovery context in Iraq will continue to evolve in 2023, following the trends observed during 2021 and 2022. Displaced populations face prolonged challenges and many are unable to return due to conditions that are unsuitable for safe and dignified living, such as lack of security, blockage of returns by groups in control of an area, resistance from other community members, or inadequate resources to support sustainable solutions.

Meanwhile, the decision by the Government of Iraq (GoI) to close or reclassify IDP camps as informal sites in all affected governorates, except for the Kurdistan Region of Iraq (KRI), combined with the recent announcement to close the IDP file by the end of 2023, has resulted in the premature departure of many households from the camps or situations of secondary displacement, especially to informal displacement sites where IDPs have limited access to public services or other forms of assistance.

In collaboration with the Ministry of Social and Labor Affairs (MoLSA), UNFPA continues to provide GBV programming to the refugee population, with a focus on entrenching concepts of gender equality and women's empowerment. In Duhok, GBV services are provided through Safe Spaces in four refugee camps (Domiz 1, Domiz 2, Gawilan, and Bardarash), which include various services such as awareness-raising sessions, individual and group PSS, case management, referrals, and follow-ups. Adolescent girls are trained using the Adolescent

Girls toolkit, male engagement sessions are conducted, and recreational activities are provided, in addition to the distribution of GBV dignity kits.

In Erbil, UNFPA supports service provision in four refugee camps (Kawrgosk, Qushtapa, Basirma, and Darashakran). The services include case management, PSS, referrals, awareness-raising sessions, outreach activities targeting both women and girls, vocational and life skill activities, and sessions specifically for adolescent girls. Awareness-raising sessions for adolescent girls, include building confidence, health-related topics, leadership, and safety.

# EGYPT COUNTRY OFFICE

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

9,652

PEOPLE REACHED WITH SRH SERVICES

100% FEMALE

2,186

PEOPLE REACHED WITH GBV PROGRAMMING

95% FEMALE

51

PEOPLE REACHED WITH YOUTH ENGAGEMENT ACTIVITIES

100% FEMALE



10

WOMEN AND GIRLS SAFE SPACES

72

PEOPLE TRAINED ON VARIOUS TOPICS

94% FEMALE

## GENDER-BASED VIOLENCE

	TOTAL	% FEMALE
Adolescent girls reached with GBV programming	559	100%
GBV case management consultations	797	97%
People reached with GBV awareness sessions	173	100%

Lara, a 33-year-old Syrian woman and mother of two, has faced numerous challenges and difficult circumstances throughout her life, particularly during her adolescence. She experienced gender bias and discrimination from her parents, which left her feeling unloved, isolated, and lonely. Reflecting on this period, she shares, "Adolescence was one of the most challenging phases in my life. At that age, a girl needs love and support from her family. Unfortunately, I received the opposite—beatings, deprivation, and restrictions on everything."

In her search for a way out, Lara believed that marriage might provide a solution. At the age of 25, she got married, hoping to find a better life. However, she had to give up her college education as she and her husband moved multiple times due to the unsafe situation in Syria. They relocated to Sudan initially and finally settled in Egypt in 2017.

*'Adolescence was one of the most challenging phases in my life. At that age, a girl needs love and support from her family. Unfortunately, I received the opposite'*

Throughout these years of marriage, Lara and her young daughters endured domestic violence and abuse from her husband, made worse by the extended financial struggles that plagued their family. The situation reached a breaking point when her husband attempted to take her life. In 2021, he abandoned Lara and their two daughters, moving to Libya, leaving her alone in Egypt to face her grief and battle depression.

*'The most significant aspect for me is that my children are with me'*

A friend recommended that Lara seek psychological support at a UNFPA-supported Safe Space, as her condition began to impact her daughters, who became withdrawn and silent due to their mother's isolation. Lara took her friend's advice and sought an appointment with a psychological therapist. Subsequently, she was referred to attend one-to-one sessions with a case management specialist in addition to continuing her psychological support sessions.

Through her participation in these sessions, Lara experienced noticeable improvements. She became more integrated with the support

group and found strength in therapy to overcome her circumstances.

"The Safe Space was an incredible addition to my life," said Lara. "It provided me with a supportive community where I felt valued and capable of navigating through this challenging period. I became stronger. While the opportunity to meet new people and integrate with them was valuable, the most significant aspect for me is that my children are with me. I've made tremendous progress and can now overcome negative emotions quickly."

The Safe Space has been a source of support and growth for Lara, equipping her with the tools to not only navigate her own life but also to nurture and protect her daughters. Today, she continues to visit the Safe Space for one-to-one sessions and engage in mental health and psychosocial support activities.

“SINCE I STARTED PARTICIPATING IN THE ACTIVITIES, ESPECIALLY THE SUPPORT GROUP, MY VOICE WENT UP AND I WAS ABLE TO TALK TO PEOPLE. I USED TO BE ISOLATED AND MY HUSBAND PUT ME DOWN, BUT I GOT MYSELF BACK UP AND LEARNED TO SAY ‘NO.’

— FARAH, who recently accessed GBV programming at a UNFPA-supported facility in Egypt



# COORDINATION

## Whole of Syria

In the framework of the earthquake response, the Whole of Syria GBV AoR operates within the framework of four IASC system-wide operational benchmarks endorsed by the Strategic Steering Group (SSG):

- All assessments are gender-sensitive and include sex and age disaggregated data, and assessments teams include a minimum of 30 percent female staff;
- The centrality of protection, including GBV and PSEA risk reduction actions, is tracked across all operational sectors (reflecting GBV services and PSEA mechanisms); and
- PSEA and GBV services (helplines/ hotlines, safe spaces, referral pathway, complaint mechanisms, etc.) are available to people in need.

In line with the above-mentioned recommendations, the GBV AOR has:

1. Developed an [information brief](#) that provides an overview of the initial GBV risks identified through assessments, monitoring, direct observation, and consultations implemented by various Humanitarian sectors in the aftermath of the EQ. The Brief highlights risks and provides operational measures to mitigate them. The GBV AoR also engaged sectors bilaterally on GBV risk mitigation strategies.
2. Produced a gender review of the earthquake response, including a [full report](#) and an [executive summary](#) of the key findings. In the weeks following the earthquake, UNFPA conducted a review of available data from the impacted areas in order to form an overview of the initial gender-specific findings of the various needs assessments and responses analysis that had taken place.

In October 2022, the SSG endorsed four key priorities to improve the Whole of Syria effectiveness in mainstreaming gender and mitigating the risks of GBV in the framework of the regular woS response. The four SSG commitments are:

- Increase measures to mitigate the risks of GBV throughout the Humanitarian Programme Cycle (HPC).

- Improve the gender analysis throughout the response
- Include the specific needs of women and girls in leadership conversations
- Increase representation of women in general and Syrian women in leadership forums.

To contribute to the fulfillment of the second SSG priority, UNFPA committed to carry out a Gender Analysis of the 2023 HNO. During the month of March and in preparation to the Brussels conference, UNFPA identified and recruited a Gender Analysis consultant and established an ISG/SSG Gender Taskforce to oversee the whole data collection and analysis.

The GBV AoR coordinator visited Damascus in March, engaging in post EQ response with GBV SS members and with other sectors and the humanitarian leadership.

Lastly, the Hub engaged with UNDP in the framework of the Syria Earthquake Recovery Needs Assessment (SERNA), being appointed as the focal point for drafting the gender specific chapter of the human impact assessment and to ensure gender mainstreaming and GBV risk mitigation throughout the document.

## Türkiye Cross-Border

To ensure the uninterrupted provision of services in the affected areas, a survey was initiated to assess the functionality of GBV service delivery points, which involved the active engagement of 21 GBV AoR members. Additionally, a tracking tool was developed to maintain updated information on functional facilities, enabling the timely referral of high-risk cases.

Furthermore, the GBV AoR conducted a comprehensive survey in collaboration with 58 GBV service providers, who were supported by 14 members of the GBVIMS+ Taskforce. The objective of this survey was to evaluate the impact of the earthquake on GBV trends and incidents, gain deeper insights into GBV risks within camps and reception centers, and identify existing challenges, gaps, and recommendations. Participants emphasized several

recommendations to enhance the GBV response in north-west Syria. These included the need for augmenting the presence of GBV service providers in affected areas, fostering coordination with other humanitarian actors, and integrating cash and livelihood assistance for GBV survivors and individuals at risk of GBV.

## Türkiye Country Office

Partners published the 2023/2025 report of the Turkey Country Chapter for the Regional Refugee and Resilience Plan (3RP) in March and continue their support to the Government of Türkiye's refugee response, complementing the substantial assistance provided by stakeholders such as international financial institutions (IFIs) and other development partners. Since its introduction in Türkiye in 2015, the 3RP has facilitated the mobilisation of approximately USD 5.56 billion as of Q4 2022.

As part of its response to the recent earthquakes, UNFPA continues to lead the GBV Sub-Sector, working closely with partners to conduct a mapping exercise of GBV service provision in all affected areas and reviewing the data entry forms in the services advisor platform to ensure comprehensive capture of GBV-specific information. The KAMER Foundation, a local women-led NGO with over 25 years of experience, has been selected as the co-leading organization for the GBV Sub-Sector.

UNFPA also chairs the Thematic Coordination Group on Key Populations, which convened in March to identify the risks and service needs of people of concern in relation to the response. Group members provide updated information on the risks and service needs of key populations. A briefing note is currently being prepared based on the information shared by member organizations, and a capacity-building training for partners on responding to cases involving key populations in disaster situations is scheduled for May 2023.

Meanwhile, to raise awareness on and prevent sexual exploitation and abuse, information, education, and communication materials targeting affected communities were produced, and existing materials were collected and

shared by the PSEA Task Team partners.

UNFPA actively contributes to the Women Empowerment in Humanitarian Action (WEHA) Working Group. Furthermore, UNFPA participates in field-level coordination mechanisms led by OCHA in Gaziantep and hub-level coordination in Adiyaman, Malatya, Hatay, and Kahramanmaraş. UNFPA attends provincial-level hub meetings, particularly in the health and protection sectors, and provides valuable contributions to the discussions on SRH and GBV.

## Jordan Country Office

A task force was established to mark International Women's Day composed of 21 organizations. GBV Subworking Group members conducted ten focus group discussions in consultation with more than 130 women, men, girls and boys from different nationalities including Jordanians and Syrian refugees. The task force developed ten messages targeting communities in Jordan to raise awareness of the forms of technology-facilitated GBV and the available channels for reporting such violence. Messages were communicated through interviews, videos, and social media platforms.

Meanwhile, the SRH Subworking Group, chaired by UNFPA Jordan, brought together experts from different disciplines to discuss the next concrete steps to implement the recommendations from the 2022 neonatal and stillbirth audit report, with a focus on Zaatari and Azraq camps.



# DONORS & PARTNERS

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

## 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, (ASLS) 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 (MoPH), Ministry of Social Affairs (MoSA), National Commission for Lebanese Women (NCLW), AMEL Association, Lebanese Order of Midwives (LOM), AKKAROUNA, SIDC, SALAMA, LECORVAW, CARITAS, CONCERN, NABAD, ABAAD, MAKASSED, Imam Sadr Foundation (ISF), INTERSOS.

**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. 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), Relief Experts Association- UDER (IRC) and Syria Relief and Development (Relief International).

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FOR SYRIA & THE ARAB STATES

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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.

## CONTACT INFORMATION

**Jennifer Miquel**  
Regional Humanitarian Hub for Syria & the Arab States  
miquel@unfpa.org  
(962) 79 575 6755

## RELEVANT RESOURCES

[www.unfpa.org](http://www.unfpa.org)  
[www.ocha.org](http://www.ocha.org)  
[www.unhcr.org](http://www.unhcr.org)  
<http://Syria.humanitarianresponse.info>

