

UNTIL EVERY NEED IS MET

“Sometimes, life feels like one of those strange nightmares in which you are trying to call for help but your voice is caught in your throat. Coming to this Safe Space felt like I finally got my voice back.

— Rama, a survivor of gender-based violence from Qamishli, Syria

AGENDERANALYSISOF THE 2022-2023 HUMANITARIAN NEEDS OVERVIEW (HNO), HUMANITARIAN RESPONSE PLAN (HRP) & SECTORAL ASSESSMENTS



GENDER EQUALITY & THE EMPOWERMENT OF WOMEN & GIRLS IN HUMANITARIAN ACTION

Globally, women and girls are disproportionately affected by crises in comparison to their male counterparts, with impacts that include reduced life expectancies, maternal mortality and morbidity, and heightened risks of gender-based violence. When emergencies strike, the rights and choices of women and girls are far too often trampled on or side-lined, making gender inequality a major barrier to equitable access to humanitarian assistance and the protection of human rights.

The Syria crisis is a prime example of how women and girls almost invariably bear the brunt of the impact of humanitarian crises, with **assessments showing that the lives of Syrian women and girls 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 been conducive to the normalisation of gender-based violence and the creation of an environment in which women and girls are consistently devalued, controlled, exploited, and then blamed for the violence they face.

The plight of Syrian women and girls was made more severe on 6 February 2023 when a devastating 7.8 magnitude earthquake and subsequent aftershocks struck Syria, affecting multiple governorates, and further compounding the existing sufferings of women and children, who make up the vast majority of people hosted in temporary shelters. The emergency further exacerbated the risks of gender-based violence as women and girls were forced to take refuge in newly established reception centres, camps, informal settlements, or overcrowded living spaces that lack privacy and adequate facilities.

This advocacy brief summarises the key findings, challenges, and recommendations of a gender analysis, commissioned by the Syria Senior Steering Group (SSG) and conducted by UNFPA, of existing HNO and HRP data and sectoral assessments to advance gender equality and GBV risk mitigation in the Whole of Syria humanitarian response and inform the 2024 Whole of Syria Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP).

KEY CHALLENGES IDENTIFIED





DATA COLLECTION

Gaps in sex, age, and disability disaggregation in data collection tools hinder gender and intersectional analysis, making it challenging to address the specific needs and vulnerabilities of different population groups. The limited number of female respondents and challenges in ensuring the presence of female enumerators further affect data collection efforts. The level of disaggregation in the 2022 Syria Multi Sectoral Needs Assessment (MSNA) data is low, with several sectors lacking necessary sex and age disaggregation. These data gaps highlight the need for more comprehensive and intersectional data collection to inform needs assessments and programming in Syria.

Inconsistencies exist in addressing GBV risk mitigation across sectors, with not all programs including explicit GBV risk assessments or mitigation measures. This inconsistency poses challenges for accountability. Additionally, the recognition of women's agency, capacities, and opportunities is often lacking in needs assessment reports, perpetuating gender stereotypes and hindering women's full participation in decision making and planning.



NEEDS ASSESSMENTS

The crisis in Syria disproportionately affects women and girls, especially those in female-headed households, widows, older women, and female IDPs. These groups face higher economic vulnerability and security concerns. In IDP camps, up to 80% of residents are women and children, facing land insecurity and a lack of mechanisms to claim their rights. Female-headed households in camps struggle to meet basic needs, with 92% reporting insufficient ability to do so. Patriarchal norms and cultural beliefs perpetuate discrimination against women and girls, contributing to their vulnerability to Gender Based Violence (GBV) and limiting their access to services and empowerment opportunities.

The intersectional analysis of data reveals compounded vulnerabilities for women and girls in Syria based on gender, disability, age, and marital status. However, there is limited information on addressing the specific needs of these intersecting groups, hindering targeted interventions. Barriers to women's participation and access to equitable humanitarian assistance are not consistently captured or addressed in data collection tools and needs assessment reports.

The lack of women's committees in IDP sites further limits opportunities for women's engagement and undermines the effectiveness and accountability of humanitarian interventions. Insufficient data disaggregation and analysis for adolescents make it difficult to identify their unique needs, risks, and vulnerabilities, particularly concerning gender-based violence, exploitation, malnutrition, and school dropout.



HUMANITARIAN PROGRAMMING

There are significant gaps between identified needs and humanitarian programme planning across the Whole of Syria. Despite the recognition of the vulnerabilities and risks affecting women and girls, these issues are not consistently addressed in humanitarian programming. While gender analysis is reflected in some assessments and the HRP, it is not systematically integrated into inter-sector and sectoral programming, and gender-targeted interventions for the most vulnerable groups are not consistently designed.

Discrimination against women and girls persists, limiting their access to services, participation in social life, and opportunities for empowerment. Gender norms contribute to the perpetuation of gender-based violence, and the implementation of interventions to address these issues is inconsistent. Gender norms also affect women's access to livelihood opportunities and employment, with traditional labour distribution and domestic responsibilities acting as significant barriers for women seeking work.

Barriers to women's participation in decision-making within humanitarian programming persist. Although some sectors make efforts to improve women's involvement, the compounding effects of gender norms and other forms of discrimination are not consistently addressed across the humanitarian response. While the Protection sector recognises the importance of women's participation and supports localization and engagement with women-led organisations, their participation in sector coordination and access to partnership and funding opportunities remain limited.

In terms of coordination, the lack of a gender coordination mechanism at the Whole of Syria level and uneven gender coordination capacities in the different hubs ultimately hamper the capacity of translating gender commitments and standards into actions.



KEY FINDINGS PER SECTOR

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CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

Female-headed households, both inside and outside of camps, face **significant disadvantages in meeting their basic needs**, with a large majority reporting a complete inability or insufficient ability to do so. The overcrowding and inadequate lighting in IDP sites pose **increased risks of GBV, exploitation, abuse**, and exposure to climate-related disasters, especially affecting women, girls, and persons with disabilities. Additionally, the **severe underrepresentation** of women in camp committees restricts their involvement in crucial planning and decision-making processes and limits their engagement in accountability systems.



EARLY RECOVERY AND LIVELIHOODS

Gender disparities in employment are significant, with 85% of males aged 18-64 employed compared to only 27% of females in the Whole of Syria. Variations across regions are notable, with employment rates of 10% for females in north Syria, 33% in central and South Syria, and a mere 6% in north-west Syria. The traditional roles and distribution of labour pose **barriers to women's employment**, particularly due to domestic and care responsibilities. Furthermore, **high rates of young females not in education, employment, or training (NEET)** are observed, with females aged 15-24 being three times more likely to be NEET compared to males in the same age group.



EDUCATION

Female heads of internally displaced households are three times more likely to have no formal education compared to male heads. **Access to education for girls is hindered by various factors**, including GBV, such as harassment and sexual violence, attacks on education facilities, military use of schools, and other security threats. **Poor water, sanitation, and hygiene (WASH) conditions in schools affect 56% of students**, impacting girls' enrolment and retention and increasing their vulnerability to drop out, early marriage, adolescent pregnancy, and economic dependence. However, **girls who receive better education are less likely to be married off as children** and have more opportunities. Disparities in school attendance among children with disabilities also vary by gender across different age groups, indicating gender-specific factors influencing access.



FOOD SECURITY AND AGRICULTURE

Food insecurity is more prevalent among female-headed households, with a significant percentage resorting to purchasing less expensive food (93%) and reducing meal sizes (63%) at least once a week. A higher proportion of female-headed households (71%) reported food as an unmet need compared to households led by men (58%). Distributions of food and other essential items are often considered unsafe for women and girls, with assessments revealing **frequent instances of GBV and exploitation during distributions**. The economic downturn and **limited livelihood opportunities further exacerbate GBV risks** for women and girls as they seek access to food and job opportunities.





HEALTH

Women and girls face **increased health risks** due to various factors. For instance, issues related to sexual and reproductive health, including menstrual irregularities, unintended pregnancies, and preterm birth, pose significant challenges. Gender roles, social norms, limited access to information and services, and restricted participation contribute to women's limited knowledge about health issues, making them more **vulnerable to communicable disease outbreaks**. **Access to antenatal and postnatal healthcare is also limited**, with a large portion of pregnant women lacking visits in each trimester. Additionally, the prevalence of **adolescent pregnancy due to early marriage is concerning**, with limited antenatal care available for pregnant girls under 18 years.



NUTRITION

Many pregnant and lactating women suffer from moderate acute malnutrition and anaemia. Maternal malnutrition prevalence ranges from 11% to 25% across different regions of Syria. Nutritional insecurity increases the risk of GBV, which further hampers the uptake of optimal infant and young child feeding practices. **Early marriage exacerbates the malnutrition burden on adolescent girls** as they often drop out of school and face risks of preterm delivery and low birthweight. **Children born to young mothers also experience higher mortality rates**, worse nutritional outcomes, and limited education.



PROTECTION

In Syria, 33% of households report **women and girls feeling unsafe in their communities**, especially in public transportation, crossing checkpoints, and markets. Overcrowded and unsafe living conditions in camps disproportionately affect women and children, increasing the risks of GBV. Displaced women face barriers in accessing their Housing, Land, and Property (HLP) rights due to discriminatory social norms. **GBV has become normalised and on the rise**, with intimate partner violence, early and forced marriage, and technology-facilitated forms of GBV being reported more frequently. Safety and security issues, GBV risks, and exploitation are more prevalent among females, highlighting deeply rooted gender inequalities. **Gender-based discrimination** to access education and job opportunities, rights, services and basic needs is more prominent in female-headed households, and females with disabilities, particularly widows, face compounded vulnerabilities.



SHELTER AND NON-FOOD ITEMS (SNFI)

Inadequate shelter conditions and limited access to NFIs, combined with overcrowding are **increasing the possibility of exposure to protection and GBV risks**, including sexual violence. Moreover, sharing housing with unrelated people could also **contribute to the phenomenon of early marriage** as a mechanism to make the mixed gender sharing in the shelter socially acceptable and avoid the risk of harassment of adolescent girls in camps and other shared facilities.



WATER, SANITATION, AND HYGIENE (WASH)

Vulnerable groups such as women, people with disabilities, the elderly, widows, single mothers, and those in hard-to-reach areas face **challenges and protection risks, including GBV, when accessing WASH services**. Women and girls in IDP camps are hesitant to use public bathing facilities. The affordability of sanitary pads is a significant concern for women, impacting their health, dignity, participation, and access to livelihoods or education. Water scarcity is leading households to adopt negative coping mechanisms, such as altering hygiene practices or accumulating debt to cover water expenses.

RECOMMENDATIONS

FOR THE SYRIA SSG

- **Establish a system for increased accountability of the inter-sectoral groups** to integrate gender mainstreaming and GBV risk mitigation in the humanitarian response across hubs and sectors to respond to the gendered and intersectional needs of the affected population in line with IASC Gender Policy and its Accountability Framework.
- **Commission the development of a Whole of Syria gender strategy to operationalize Gender Equality and the Empowerment of Women and Girls (GEEWG) integration** across hubs and sectors in a harmonised and coherent manner.
- **Ensure that gender expertise and leadership are in place at Whole of Syria and hub levels to address identified gaps** and ensure that the IASC Gender Policy's standards and commitments and the IASC Guidelines to integrate GBV in Humanitarian Action are reflected in inter-sector and sector-specific activities and funding allocations.
- **Strive to increase representation and meaningful participation of women**, including women led, women rights organisations and networks, in leadership and humanitarian decision-making forums, as well as in coordination mechanisms.
- **Engage and strategize with donors to agree on funding gender priorities and GBV risk mitigation** for the two years duration of the HRP.
- **SSG members and humanitarian leadership are encouraged to emphasise women and girls' needs and resources** in all relevant advocacy documents, speeches and bilateral or multilateral meetings with key stakeholders.

FOR DONORS

- **Reinforce accountability structures by ensuring that humanitarian leadership, sectors, and actors live up to their commitments**, particularly with regards to implementing relevant policies and standards on safeguarding the rights and well-being of women and girls, gender mainstreaming, and GBV risk mitigation.
- **Invest in the placement of sustained gender expertise at both strategic and cluster levels to inform GEEWG programming and in targeted capacity building** for humanitarian leadership, sectors, and partners to deliver on commitments to gender equality, GBV risk mitigation and the empowerment of women and girls at the policy, strategic and programming level.
- **Support women's groups and women leaders to engage in the response:** Financial support to and scaled up partnerships with women's groups, networks, and organisations. Provision of core funding to local women/women's organisations may be considered with a focus on most at risk groups to engage in and advocate for gender in contingency plans, humanitarian response, and recovery efforts.
- **Address gender inequality through structured, long-term, transformative action** that is inclusive of men and boys, while also challenging social norms which compound discrimination and violence against women and girls, such as those that marginalise people with disabilities, displaced people, widows, divorced women, and girls, elderly women, and adolescent girls.

FOR THE INTER-SECTORAL GROUPS AND SECTORS/CLUSTERS

- **Inter-sectoral Groups to consider setting up a gender coordination mechanism at the Whole of Syria level and at hub level with dedicated gender expertise** to ensure quality and coherence of gender integration, GBV risk mitigation and compliance with the IASC gender and GBV accountability frameworks. At the same time, effort should be made to maximise gender synergies across hubs, including enhanced collaboration as well as expertise and knowledge sharing.
- **Inter-sectoral Groups to enhance accountability and monitoring of the sectors/ clusters efforts to meet gender policies, commitments, standards and reduce GBV risks across humanitarian interventions.** It is essential to ensure that gender expertise and leadership are in place to address identified gaps, set up a strong monitoring system, and ensure that the IASC Gender Policy's standards and commitments and the IASC GBV guidelines are reflected in inter-sector and sector-specific activities and funding allocations.
- **Improve data collection tools to bridge gender gaps:** Humanitarian actors are encouraged to invest in disaggregating data collection tools to enable gender intersectional analysis, in addition to addressing the challenge of female enumerator representation through increased recruitment and training and increasing the involvement of diverse groups of female respondents. It is also imperative to provide opportunities for adolescent girls to participate in data collection.
- **Improve needs assessment to bridge gender gaps:** It is vital to enhance gender expertise by not only collecting disaggregated data by sex and age but also having experts who can analyse and interpret the data to identify the specific needs and vulnerabilities of different groups of women and girls. Additionally, analysing intersecting variables is crucial to consider intersectional vulnerabilities and exclusion among crisis-affected groups.

Ensure that interventions are informed by gendered findings: Humanitarian interventions should be guided by the insights on gendered and GBV-related risks. The inter-sector groups and sector coordinators are encouraged to analyse, compile and share the existing findings on gender and GBV risks, thus enabling the development of targeted and measurable strategies to address identified risks.

Prioritise gender-response programming:

It is important to strengthen intersectoral programs that address gender-specific needs identified in assessment reports consistently and systematically. Consistent measures should be taken across sectors to mitigate and respond to GBV risks, including by integrating GBV risk mitigation indicators into existing monitoring systems and consistently reporting on them. Attention should be given to addressing the compounded vulnerabilities and needs of adolescent girls through targeted interventions, involving them in program design and implementation, and providing safe spaces for their access to information, support, and services. Lastly, it is crucial to integrate gender impact measurement into humanitarian monitoring and evaluation frameworks by including specific indicators, baselines, and targets to ensure equitable improvement in the lives of people in need.

- **Focus on localization through the capacity building of local women's organisations and networks** to engage with humanitarian planning, decision making and monitoring/ accountability (with a focus on those organisations that work with crisis affected women and girls, including those at heightened risk of violence, sexual exploitation, harassment, and abuse).
- **Conduct regular rapid gender and GBV risk mitigation trainings** on the use of existing tools (such as the IASC Gender Handbook), rapid gender training for clusters/ sector members, training for enumerators on how to collect SADDD, and mechanisms to ensure that SADDD data is consistently analysed and reported in assessments to inform strategic planning and resource allocation should be prioritised. Allocate resources and time for regularly conduct GBV risk mitigation trainings in line with context developed and international-endorsed material.
- **Foster the exchange of good practices and lessons learned on gender integration and GBV risk mitigation in humanitarian programming across hubs.** While the analysis has identified clear limitations in the integration of gender and GBV risk mitigation practices in the conduct of needs assessments and humanitarian programming, the review has also allowed to identify windows of opportunities and good practices.



“Despite the pain that I and many like me have been through, I still believe in the possibility of a better world, where young girls can live their childhoods in peace and freedom.

– Layali, a young woman from Qamishli

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