THE SITUATION

- Nearly a month has passed following the magnitude 7.8 earthquake that struck Syria and Türkiye on 6 February, impacting the governorates of Idlib, Aleppo, Lattakia, and Hama. Another magnitude 6.3 earthquake struck on 20 February resulting in additional damage and sustaining anxiety to affected communities. Prior to the earthquake, 15.3 million people were estimated to be in need of humanitarian assistance throughout the country.

- Recurring earthquakes also underscore the severe vulnerability and risks in these hard-hit regions. Aid workers and organisations have also been impacted by losses on many levels, which has affected their operational capacities. While casualty figures are increasing every day, more than 5,900 fatalities were reported across Syria as of February 12, most of which (more than 4,500) have been registered in the country’s north-west. Over 12,000 injured persons have also been reported.

- Damaged health care facilities resulted in a lack of essential lifesaving obstetric and neonatal care services. Increased referral times to functioning hospitals and reduced capacity of trained providers has impacted access to care for both normal and urgent deliveries and increased the risks of otherwise preventable maternal morbidity and mortality.

- Despite the extensiveness of the needs and the scale of the suffering caused by this tragedy, UNFPA remains committed to exercising its duty of care towards all its staff members and those of its partners in Syria. In addition to adopting rigorous protocols to guarantee the physical safety of all personnel, UNFPA and partners are ensuring the availability of resources and services to safeguard the psychological well-being of all individuals involved in the response.
In north-west Syria

- According to UN OCHA, as of 1 March, more than 10,000 buildings in northwest Syria (NWS) have been damaged or completely destroyed.
- According to an assessment by REACH, 55,000 households have been displaced by the earthquake. A significant percentage of the people affected have found shelter in camps and reception centres, with 80 sites reported to be newly established in order to accommodate the displaced population. Prior to the earthquake, more than 1.8 million people were already displaced in NWS.
- Living conditions for those impacted are increasingly difficult, particularly in light of overcrowding at shelters and reception areas and the heightened risks of exposure to gender-based violence (GBV) facing women and girls. Majd, an aid worker for a UNFPA partner in NWS, says that “130 families are now living in a camp that was previously accommodating 60 households. The camp is extremely overcrowded and the living conditions are dire, particularly for women and girls. There is no privacy and rooms are being shared by many people. We’re already recording cases of harassment in two different sites since the earthquake occurred.”

‘My words may fail to describe what I lived through during the earthquake, when my children screamed and the neighbours were terrified while rain poured outside. After those terrible moments, our lives were changed. My family and I spent two days outdoors before finding a tent in one of the sites they set up to accommodate people displaced by the earthquake. There, I received some much-needed support, which helped me recover from the shock. I was also able to share my experience and needs.’

— a woman from north-west Syria, who is among the millions currently displaced

In government controlled areas

- UNFPA continues to support those affected by the earthquake with essential sexual and reproductive health and gender-based violence services, emergency referrals, psychosocial support, and supplies, including dignity kits, winter clothing, blankets, and kits for pregnant and breastfeeding women.
- As of March 1, there were approximately 133 shelters in Aleppo, Hama, and Lattakia. The number of shelters fluctuates as there are efforts to return schools and mosques to their intended purpose.
- The situation in the affected areas remains dire with hundreds of thousands still displaced, either in collective shelters, in host communities, or sleeping outdoors with minimal protection. Partners continue to scale up the response but a lack of funding continues to hamper the efforts. At least 50,000 families have been displaced in Aleppo, Homs, Hama and Lattakia, with Aleppo being the worst affected. Extensive infrastructure damage has been recorded in the areas impacted.
- A rapid assessment noted elevated levels of distress among the affected population. Many exhibit signs of post-traumatic stress disorder, including anxiety, panic attacks, sleep disorders, depression, and symptoms of post-earthquake dizziness syndrome. Children suffer from distress, violence, symptoms of urinary incontinence, and panic attacks.

HUMANITARIAN NEEDS

- The earthquake 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.
- To ensure continuation of provision of life-saving SRH and GBV services in the most affected areas, immediate needs include SRH medical supplies, menstrual hygiene management products, adequate and gender-responsive WASH facilities, including showers and safe toilets to limit the exposure of women and girls to GBV; water for cleaning/laundry; dignity kits; blankets and winter clothing; newborn items; and tents and/or prefabricated structures.
The primary needs for protection include psychological first aid, psychosocial support, in-kind medical assistance (including RH kits and medicine for chronic illnesses), dignity kits, GBV case management, and cash assistance.

Generators and fuel are urgently needed to ensure the continuation of critical emergency obstetric care, surgical interventions, and emergency transportation to health facilities. There are also challenges in securing fuel for the transportation of integrated mobile teams, hindering the implementation of their outreach services, including distribution of supplies (e.g. dignity kits), winterised items, and blankets for pregnant and breastfeeding women.

There is a need for all humanitarian actors to mitigate the risk of sexual exploitation and abuse and GBV throughout the response. Protection and GBV referral pathways need to be activated and/or reinforced, particularly in any transit and reception areas that will receive displaced persons.

UNFPA’s RESPONSE ACROSS SYRIA

Provision of essential life-saving sexual and reproductive health services

Across Syria, UNFPA and its partners are working to meet basic SRH needs and ensure that the minimum initial service package (MISP) for sexual and reproductive health in crisis services is available. UNFPA staff are in the field with partners to ensure timely and quality implementation of emergency response as well as assess the current situation and needs.

In north-west Syria

UNFPA continues to fully support nine health service delivery points (five CEmONC, three BEmONC and one mobile clinic) which are to date fully functional despite having sustained initial damage due to the earthquake. The functionality of these facilities has been crucial to maintaining the provision of essential life-saving SRH services to people in need.

Since the earthquake, more than 20,000 SRH services have been provided to women and girls, including more than 1,350 normal deliveries and 400 c-sections performed at UNFPA-supported facilities within affected areas.

As of 1 March, 461 IARH kits and 1,616,466 bulk items have been distributed to serve around 103,000 women and girls in need. Additionally, 255 IARH kits are being procured and expected to be delivered to NWS by the end of March.

In order to maximise reach, UNFPA has mobilised an emergency mobile team to visit reception centres in Qabasin, Bazgha, and Zarzour areas in NWS, where newly displaced families have found temporary shelter. Each mobile team is composed of one doctor, one midwife, and a GBV case worker in order to provide integrated SRH and GBV services.

UNFPA continues to support critical service delivery points to continue their operations. With UNFPA’s support, fuel is being purchased and will be distributed to supported facilities to ensure the continuity of life-saving service provision.

UNFPA continues to lead the SRH Technical Working Group and its coordinating efforts to ensure that referral pathways for women and girls are reflective of the current and evolving situation on the ground.
In government controlled areas

- UNFPA is coordinating with the Health sector to ensure all health services are comprehensive and provide a full package of care, including SRH. In shelters and reception areas, UNFPA integrated mobile teams will be providing SRH services jointly with UNICEF and WHO, and in coordination with the Health sector and the Department of Health (DoH).

- UNFPA's nine implementing partners are providing essential sexual and reproductive health services in 14 reproductive health facilities in the affected governorates and through 30 integrated SRH-GBV mobile teams. Until 28 February, UNFPA's partners reached approximately 57,226 women and girls with SRH services.

- Through mobile teams/clinics and static facilities, UNFPA is supporting the delivery of quality integrated SRH services, including antenatal, postnatal, and neonatal care; referral to maternal and EmONC services; psychosocial support (PSS); and referral to case management services. The integrated mobile teams are conducting visits to the shelters and affected areas to facilitate access to critical SRH services for displaced women and girls.

- On 26 February, 183 life-saving Interagency Reproductive Health kits shipped from the United Nations Humanitarian Response Depot (UNHRD) Dubai to Damascus Airport. The kits contain life-saving essential supplies that will support 23,965 women to give birth safely and/or receive treatment for reproductive health infections and access family planning methods. A distribution plan is in place to deliver these kits to Aleppo, Lattakia and Hama.

- In Aleppo, UNFPA delivered a total of 25 life-saving RH kits on March 1, including clinical midwifery supplies and medicines to ensure safe deliveries, treatment of sexually transmitted infections and contraceptive methods to support the DoH and MoHE hospitals in Aleppo and local midwifery networks.

- UNFPA partners are distributing sanitary napkins to support menstrual hygiene management for women and girls during the crisis. UNFPA is advocating for improved WASH facilities for better health and protection outcomes.

- Weakened health systems and pressure on public facilities make it difficult for women and girls to seek medical advice in private health centres as affordability is an issue for many of them.

Provision of essential psychosocial and GBV response services

The priority of the response is to ensure the availability and continuation of gender-based violence programmes across all affected areas. As the lead of the Whole of Syria GBV Area of Responsibility (WoS GBV AoR), UNFPA is also ensuring close coordination with all response actors to mitigate protection risks for women and girls. To that end, the GBV AoR has developed and disseminated, among humanitarian actors, tools that help non-GBV specialists mitigate the risks of GBV, and inform the beneficiaries about different forms of violence and how they can be addressed.

In north-west Syria

- UNFPA has been providing lifesaving services to the disaster-affected population since the onset of the crisis. In addition to delivering essential kits and supplies during the initial response, UNFPA has been actively supporting partners in their efforts to resume operations through assessments, information sharing, and coordination efforts, in addition to ensuring a measured response that safeguards the health and well-being of teams on the ground.

- Partners in NWS have so far distributed 23,651 dignity kits to women and girls living in the affected areas. UNFPA is procuring additional, winterized dignity kits to be transhipped to NWS and distributed widely. Dignity Kits help women and girls maintain
proper hygiene after being displaced and are a critical component of the earthquake response, with partners reporting an urgent need to reach more women and girls with such kits.

- UNFPA worked with partners to provide immediate support to women and girls who are survivors of or at risk of GBV, including through the provision of 91 PFA sessions, which in turn reached a total of 6,435 people.

- Despite having been directly impacted by the earthquake, UNFPA partners continue to provide GBV risk mitigation, prevention, and response services through 12 operational Safe Spaces. As previously reported, two Safe Spaces were damaged in the earthquake and partners are searching for relocation and rehabilitation solutions, in addition to reaching out to survivors with information and directing them to the closest functioning Safe Spaces.

- Understanding the true extent of the impact of the earthquake will take time as direct casualties, injuries, and destruction are being documented. However, assessments so far indicate that the risks of GBV have increased, particularly as more women and girls find themselves grappling with displacement and struggling to meet their basic needs such as food and shelter. Initial reports also indicate greater risks of separation, exclusion from services, sexual exploitation and abuse and harassment, increased risks of stigmatisation, and domestic violence (including intimate partner violence).

- As the lead of the GBV AoR, UNFPA works to ensure that the women and girls are informed about available services in addition to facilitating their access to such services and mitigating any risks associated with delivery. By supporting the resumption and continuity of life-saving GBV programming, UNFPA is helping to bridge the referral pathways necessary for all clusters and actors to safely engage with women and girls.

In government controlled areas

- Nine out of ten UNFPA-supported Safe Spaces are operating in Aleppo, Hama, and Lattakia, and continue to provide comprehensive GBV response services, including GBV case management. One facility in Aleppo remains suspended due to structural damage.

- There are 30 integrated mobile teams (IMTs) operating in Aleppo, Hama, and Lattakia, providing integrated services that include PFA, PSS, GBV case management. Since the onset of the emergency, IMTs have reached more than 28,000 people in need.

- In Aleppo, Lattakia, and Hama, UNFPA distributed 32,727 dignity kits, including winter clothing kits (for a family of 5), basic female dignity kits, and kits for pregnant and breastfeeding women, 75,980 packs of sanitary napkins, and around 1,000 blankets.

- UNFPA continues to ensure close coordination with all response actors to mitigate protection risks for women and girls. Field missions are being conducted on a daily basis to assess GBV risks in the affected areas. GBV sub-national working groups have been activated in Hama, Aleppo, and Lattakia to coordinate the GBV response interventions made by all GBV actors as well as advocacy efforts to mitigate risk of GBV in the collective shelters.

- Lack of privacy is one of the main issues being reported by women and girls in collective shelters, leading to additional risks as well as lack of freedom to exercise their sexual lives with their partners.

- Lack of clean water, clean drainage system as well as absence of showers are in turn leading to serious SRH risks, including infections.

FOR MORE INFORMATION

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