

UNITED NATIONS POPULATION FUND

REGIONAL SITUATION REPORT FOR SYRIA CRISIS

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"My husband and I don't want to have another child for now. The situation has become unbearable in Syria, and here in Jordan, we feel very insecure," said Amal, who visited the UNFPA reproductive health clinic in Zaatari camp, Jordan, with her baby daughter for advice on birth control. "I want to get on contraception so that I can give my children a better life. We cannot afford another child; not in this situation."

Reproductive health and family planning are often not seen as a priority by vulnerable refugee women. UNFPA and its local partners are helping Syrian refugee women get access to affordable, reliable and sustainable services that can address their needs. Access to effective contraceptives can reduce unwanted pregnancies and unsafe abortions as well as maternal and newborn deaths and disabilities. At the women's centres supported by UNFPA, women can have prenatal consultations, family planning advice, undergo all types of tests, familiarize themselves with contraceptive methods, and receive basic health check-ups.

A healthcare worker at the clinic in Zaatari said, "Many women told me that before visiting the clinic, they tried abstinence as a method but then their husbands would get angry, sometimes violent, or would even marry someone else and have more children."

Before Syria descended into civil war, family planning was free and was used relatively widely. "I was on contraception back home, but between the war and fleeing under bombardments, contraception was the last thing on my mind," said Amal, as she cradled her daughter in her arms. "When I got pregnant last year, I was devastated. I had so many questions. Where am I going to deliver? How am I going to feed this baby when we're already struggling to provide for our daughters? What future will my baby have?"

Credit: David Brunetti | UNFPA, 2015.

HIGHLIGHTS

SYRIAN ARAB REPUBLIC

UNFPA-assisted partners deliver 83,567 reproductive health and gender-based violence (GBV) services to people affected by the crisis in Damascus, Aleppo, Sweida, Lattakia, Tartous, Homs, Hasakah, and Hama.

LEBANON

UNFPA conducts 60 reproductive health awareness sessions targeting 1,200 women in Akkar and Tripoli, and delivers condoms to the Ministry of Health for distribution among Syrian refugee men. A total of 80 officers of the Internal Security Forces (ISF) participate in a session on implementation of Law 293 for protection of women and other family members from domestic violence.

JORDAN

UNFPA provides 17,212 reproductive health services and supports 210 safe deliveries in Zaatari camp. A total of 4,963 women, girls, men, and boys benefit from self-reliance and skills training while another 3,483 youth participate in UNFPA-supported reproductive health awareness sessions as well as self-reliance and life skills activities.

IRAQ

UNFPA disseminates health messages on GBV and reproductive health to 738 women and girls. Another 801 women and girls attend recreational activities. The Fund also equips seven district hospitals and 11 primary healthcare centres with reproductive health kits. A total of 206 young girls and boys participate in UNFPA-supported weekly awareness sessions.

TURKEY

UNFPA distributes 22,768 hygiene kits to its implementing partners for distribution among Syrian refugees in Akcakale, Batman, Sanliurfa, Ulubay district in Ankara, and Kiziltepe. It also organizes 12 reproductive health awareness sessions targeting 182 beneficiaries in Ankara and Urfa.

EGYPT

UNFPA Egypt supports 19 sessions on health education, psychological awareness, sport, and recreational activities targeting 82 Syrian girls in safe spaces located in two governorates. It also arranges two 'iftar' events for women and girls in safe spaces and distributes 1,200 copies of brochures on reproductive health and GBV awareness in three governorates.

UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive health care and be effectively protected from gender-based violence. UNFPA and partners are scaling up efforts to empower and improve the lives of Syrian women and youth and impacted communities in host countries, including by advocating for human rights and gender equality, to better cope with and recover from the crisis.

UNFPA: Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.





HUMANITARIAN SITUATION



Reem Elmasdy, 30 year-old social worker and field coordinator.

"It is all about trust," remarked Reem as she explained her role in the UNFPAsupported girls space in 6th October in Egypt. "In the beginning, parents were wary of us taking their girls," she added. 6th October is an area in Egypt that is most densely populated by Syrian refugees; over 30,000 refugees are living there, many in difficult living conditions. However, very few activities in this city target girls and adolescents so that they are able to adapt to and cope with their circumstances.

Reem, a refugee herself, used to work as a social worker in a Syrian school. Asked about the need for safe spaces, she recalled how mothers among her neighbours and friends were always complaining to her about not being able to address their adolescent girls' needs during such complex times, especially when safety concerns would force them to restrict their girls' movements to a great extent. She said, "We needed this safe space even when we did not know what it was called, so I was extremely glad when I got an opportunity to work here."

"Girls do not go out except out of necessity; some have even stopped going to school to avoid harassment," Reem explained. "Parents are sometimes justified in their worries, but those girls are growing up deprived of opportunities and the ability to grow." Reem said that they were able to quickly overcome this because "we gained the families' trust because they knew we would treat them like our own kids and make sure they were safe and secure. In addition to safety concerns, most of our girls are from extremely poor families, and as such, we also have to aid with transportation for most activities for safety. This limits our ability to afford receiving more girls."

"Here, they can be themselves. They play sports, draw, study, and socialize. We have at least two weekly lectures on topics of interest to them, and we are here to provide counseling or support, when needed. Mothers sometimes join for sessions on reproductive health or how to deal with their children. Several girls get beaten at home. For many of them, the space is the only place where they feel normal," Reem continued.

"We need more activities; we need to be able to accommodate more girls; and we need to include more mothers. Our girls have a lot of potential," Reem responded when asked what she thinks is needed next.

Credit: Mohamed Abdel Wahab | UNFPA, 2015

SYRIAN ARAB REPUBLIC

Violence escalated in several parts of the country including Rural Damascus, Aleppo, Hasakah, Idleb, and Deir-ez-Zor. Military operations continued to intensify in several governorates in Rural Damascus, Dar'a, Aleppo, Hasakah, and Deir-ez-Zor. Of the 4.6 million people living in hard-to-reach areas, 422,000 remained besieged in the Syrian Arab Republic. This included 26,500 people besieged by non-state armed groups in Nebula and Zahra, and 228,000 people besieged by ISIL in the government-controlled western neighbourhoods of Deir-ez-Zor.

On the other hand, the United Nations removed the Palestinian Yarmouk refugee camp from a list of besieged areas in Syria despite not having direct access to the camp for five months. The Special United Nations Envoy to Syria, Steffan De Mistura, completed a visit to Syria with a call to stop fire and to open the window of political negotiation and solution.

Due to this volatile political and security situation, the number of violence-affected people with limited access to life-saving reproductive health and gender-based services has continuously been on the rise.

The limited number of partners qualified to provide quality GBV response, along with deteriorating security conditions, increased the vulnerability of violence-affected people, especially women and youth, to different types of threats including GBV. Continuous deterioration of the value of the Syrian pound has led to a decline in the livelihoods of thousands of Syrian families, especially internally displaced people.

LEBANON

Due to the UNHCR's temporary suspension of new registrations as per the Government of Lebanon's May 2015 instructions, the number of Syrians approaching UNHCR for registration decreased by 51 percent between May and June 2015.

UNHCR and the Norwegian Refugee Council conducted a meeting with the General Security officials of Lebanon to better understand the practices of the General Security Office (GSO) and to gain insights into the security raids which they execute, especially in informal tented settlements in Akkar, Tripoli, and the South. The objective of the meeting was to accordingly advise refugees about important issues such as the need to have valid residency and other documents.

In mid-July, the Political Science Institute at the Saint Joseph University launched the findings of a UNHCR-supported survey on 'security related perceptions' among Syrian refugees and host communities in Lebanon. For Syrian refugees, the most pressing concerns were related to safety and security, economic difficulties, and lack of legal status or papers. More than 50 percent of the Lebanese citizens reported feeling unsafe in most of the regions as a result of Syrian presence, and shared anecdotal stories regarding several incidents of assault.

JORDAN

Syrian refugees in Jordan continued to face immense challenges fueling grave concerns about their vulnerability and protectionrelated issues. According to a study released by Care International

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in July, there is growing evidence that after five years of conflict, an increasing number of Syrian refugees have exhausted their means of subsistence. Titled 'Five Years into Exile',' the study reveals that at least two in three families live in poverty. The primary factors contributing to these challenges are reduced levels of assistance and access to services, lack of sustainable livelihoods, and complicated registration procedures. Together, these challenges have contributed to deepening hardships for approximately 629,128 registered refugees in Jordan. Out of the total number of registered refugees, there are 81,405 refugees (50 percent are females) living in Zaatari camp and 20,105 individuals (49.4 percent are females) living in Azraq camp.

During the reporting period, one of the main challenges encountered in Azraq camp was a decline in the number of beneficiaries attending the IMC/UNFPA centre due to access problems. Women living on the margins of the camp were unable to access the facility as they had to travel a long distance to reach the centre. Moreover, feedback from a group discussion with Syrian beneficiaries identified lack of privacy in carrying out outdoor activities as another reason hindering their participation. UNFPA responded to the concern by requesting shades to cover the perimeter of the women spaces. UNFPA, in partnership with IMC, is planning to intensify outreach activities and interpersonal communication-related activities to raise awareness about existing services.

IRAQ

Iraq, which is hosting 251,499 Syrian refugees, witnessed an increase of 1,483 new cases, which represents a 0.7 percent increase in overall case load in July, compared to June; 44.5 per cent of these refugees are living in Erbil, followed by 39.5 percent in Dohuk, and 12.05 percent in Sulaymaniyah, while the rest are scattered in other governorates. About 62.37 percent of the refugees live in urban areas while 37.63 percent live inside camps. Most of the Syrian refugees in Iraq are from Hasakah (57 percent) and Damascus (25 percent) while the rest are from other places across Syria.

One year has passed since the start of the internally displaced population crisis in Iraq. According to OCHA, there are now 2.8 million internally displaced persons, and of these, 1.5 million live in conflict-affected areas. The IOM's Displacement Tracking Matrix (DTM) team has verified that from May 15 to June 15, a total of 25,697 families or 154,182 individuals were displaced from Ramadi District as a result of ongoing clashes in Anbar governorate. Preliminary data show that out of the total number of displaced persons, around 900,000 are women of reproductive age (15-49 years), and around 350,000 are adolescent girls (aged 13-18 years). In addition, due to the nature of the armed conflict in Iraq, an estimated 10-15 percent of the displaced families are female-headed households.

TURKEY

Starting from the Suruç bombing on July 20 to the public declaration of joining the fight against ISIS, recent events in Turkey have aroused serious concerns about the country's national peace and security. According to partners in the field, hospitals in Turkey's southeastern provinces are overwhelmed with patients in need of immediate aid. Deteriorating security conditions have made it difficult for Syrians to cross the border as many crossing points have either been restricted or closed for Syrians fleeing to Turkey.

QUICK FIGURES

SYRIAN ARAB REPUBLIC:	
SYRIANS AFFECTED BY THE CRISIS	12.2 MILLION
WOMEN AND GIRLS OF REPRODUCTIVE AGE	3.1 MILLION
YOUTH	4 MILLION

LEBANON:		
SYRIANS AFFECTED BY THE CRISIS	1,174,690	
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	298,036	
SYRIAN PREGNANT WOMEN	20,792	
SYRIAN YOUTH	212,003	
JORDAN:		
SYRIANS AFFECTED BY THE CRISIS	629,128	
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	153,033	
SYRIAN PREGNANT WOMEN	11,135	

130,989

SYRIAN YOUTH

IRAQ:	
SYRIANS AFFECTED BY THE CRISIS	251,499
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	57,217
SYRIAN PREGNANT WOMEN	4,419
SYRIAN YOUTH	65,566
TURKEY:	
SYRIANS AFFECTED BY THE CRISIS	1,772,535
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	429,536
SYRIAN PREGNANT WOMEN	31,373
SYRIAN YOUTH	257,7220
EGYPT:	
SYRIANS AFFECTED BY THE CRISIS	134,329
SYRIAN WOMEN AND GIRLS OF REPRODUCTIVE AGE	33,480
SYRIAN PREGNANT WOMEN	2,377
SYRIAN YOUTH	27,444

SOURCES: Turkey's Disaster and Emergency Management Authority (AFAD), UNHCR MENA Bureau, OCHA, and UNFPA June, 2015

These events have pushed a shift in Turkey's foreign policy. Syrian refugees fear this might imperil their situation in the country, making them potential targets and leading to potential destabilization, especially in provinces located near the border.

UNFPA, in partnership with the Syrian Social Gathering (SSG), conducted a survey aimed at drawing better insights for designing future programmes and setting new indicators. As many as 109 Syrians participated in the survey; of these, 75 percent were women below 28 years of age. The average age of women was 24. According to the survey findings, 42 percent of the women are married to their relatives, 56 percent have one or more children, 30 percent have had an abortion, 64 percent have abnormalities in the menstrual cycle, 90 percent have not had a medical check-up by a doctor, and 24 percent of the women are living with husbands who do not have any source of income. Furthermore, the survey findings reveal that 55 percent of the women have symptoms of depression, 42 percent have psychosocial problems, 43 percent do not have civil registration of marriage, and 27 percent of the Syrian women included in the survey have a university or higher degree.

EGYPT

The number of registered Syrians seeking refuge in Egypt reached 133,619 during the reporting month. Most of the refugees are scattered in rented households located in the outskirts of large urban centres such as Greater Cairo, Alexandria, and Damietta. Syrian refugees have been granted access to public services, including primary health care and education, at the same cost as Egyptians. However, issues related to quality and availability of these services remain a major challenge, given that the public sector is already struggling to meet the needs of Egyptians.

With the prolongation of the crisis and decreased funding, vulnerabilities are escalating among Syrian refugees, particularly in terms of debts incurred due to healthcare costs, and there is an increased risk of gender-based vioence.

HUMANITARIAN RESPONSE

SEXUAL AND REPRODUCTIVE HEALTH INCLUDING FAMILY PLANNING



Dr. Reema Diab, manager of the UNFPA-supported maternity clinic in Zaatari camp, standing in the delivery room after a young Syrian girl has given birth. Ever since the Jordanian Ministry of Health decided in November 2014 that provision of medical aid to Syrians would no longer be free, many refugees from urban areas are coming to Zaatari camp, just to access services. The UNFPA women's comprehensive centre is operated by the Jordan Health Aid Society (JHAS) in collaboration with UNFPA. This is a one-stop maternity facility and the only centre in the camp that provides normal birth deliveries.

Credit: Sharron Ward | UNFPA, 2015

SYRIAN ARAB REPUBLIC

REPRODUCTIVE HEALTH SERVICES: During the reporting period, UNFPA continued to support its implementing partners in the delivery of lifesaving reproductive health services to the crisis-affected people in Syria. As such, 54,529 reproductive health services, including family planning services, were delivered to 14,882 women. Moreover, safe delivery services were provided to 340 women through reproductive health centres; 135 Caesarean-section deliveries were supported by UNFPA. A total of 600 reproductive health vouchers were distributed in Damascus, Rural Damascus, and Aleppo.

It is worth mentioning that the Syrian Family Planning Association (SFPA) clinic in al-Hasakah, which provides reproductive health and gender-based services, resumed its services with the support of UNFPA. Services in al-Hasakah clinic were suspended during the second half of June due to deteriorating security conditions, which forced most of the clinic and mobile team's staff to leave the city for Rural Hasakah. Even though some of the health workers are reported to have returned to the city, the situation is still far from stable.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: The UNFPAassisted Syrian Arab Red Crescent (SARC) and SFPA mobile teams delivered 16,200 reproductive health services to violence-affected families in 12 governorates.



SUPPORTING HUMAN RESOURCES: UNFPA continued to support the 28 mobile clinics, 27 static clinics, 13 medical points, and mobile teams of SFPA and SARC through deployment of 207 obstetricians, gynaecologists, midwives, nurses, and social workers in 12 governorates.

LEBANON

REPRODUCTIVE HEALTH SUPPLIES: A total of 5,250 packs of male condoms were provided to the Ministry of Public Health for distribution through its primary health care centres' network serving both Lebanese as well as Syrians.

REPRODUCTIVE HEALTH OUTREACH: Sixty awareness sessions targeting 1,200 women were conducted in Akkar and Tripoli by UNFPA's implementing partner, the Lebanon Family Planning Association for Development and Empowerment (LFPADE). The sessions, which were delivered by a group of trained women social leaders, focused on enhancing knowledge about family planning among women and young girls.

As part of the UNFPA-funded project 'Safe Motherhood Campaign - Infant and Young Child Feeding and Reproductive Health,' UNFPA,



Seventeen year-old Syrian refugee Israa holds her newborn baby boy Abdul in the post-natal room in the women's comprehensive clinic in Zaatari refugee camp. Married at age 15 to her cousin, it was her first baby. She said that, when she met her husband it wasn't a love story but there was no pressure to marry, and she finally grew to love him. Early marriage was traditional in some parts of Syria before the crisis, but has increased since the civil war, mainly due to economic factors.

Credit: Sharon Ward | UNFPA, 2015

in collaboration with the International Orthodox Christian Charities (IOCC), implemented five awareness sessions on infant and young child feeding in Bekaa. The sessions targeted 89 women in the Qatari Association for Charity primary heath care centres in Karak-Zahle, Kab Elias primary health care centre, Bekaa Hospital in Taanayel, Mayyas Hospital in Chtaura, and Rayak Hospital in Zahle.

REPRODUCTIVE HEALTH TRAININGS: UNFPA, in collaboration with ABAAD Resource Centre for Gender Equality, organized a three-day training course on Clinical Management of Rape (CMR). The course targeted 20 staff members of Notre Dame de la Paix Hospital in Kobaiyat, and carried out an assessment of five facilities for upcoming trainings planned from next month. These facilities include Hamid Farhad Hospital in Bekaa, Baalbek Government Hospital, Al Najd a Shabeih primary health care centre in Koura, Al Iman primary health care centre, and Al Nahda primary health care centre in the north.

During the reporting period, UNFPA, in partnership with the Lebanese Society of Obstetrics and Gynecology, initiated roll-out of training on the recently-revised reproductive health service delivery guidelines, supported by UNFPA and launched in June 2014. Accordingly, a training workshop targeting 34 health care providers and affiliated with 34 primary healthcare centres within the network of the Ministry of Public Health was carried out.

UNFPA and IMC launched a six-day training session targeting 30 community health workers and educators in Bekaa. The session included information on antenatal care and family planning.

As part of the IOCC project, UNFPA conducted a three-day capacity building workshop on infant and young child feeding in emergencies and family planning for 14 midwives and nurses from Akkar and Bekaa. During the training, different topics on infant and young child feeding, breastfeeding, family planning, and counseling and communication skills were addressed by professionals from the Lebanese Association for Early Childhood Development (LAECD), the Order of Midwives in Lebanon, and IOCC health and nutrition staff. The training was aimed at empowering health workers with techniques to offer guidance and support to vulnerable refugee and host women on topics related to infant nutrition and family planning, especially during times of emergencies

JORDAN

REPRODUCTIVE HEALTH SERVICES: During the reporting period, UNFPA provided 17,212 reproductive health services to beneficiaries living in camps and in host communities; 76 percent of these services were delivered inside camps, while 24 percent were delivered in host communities. Of the total, 3,592 women benefited from ante-natal care services while 1,716 women made use of family planning services.

UNFPA supported 210 safe deliveries in Zaatari camp. In the same camp, 689 women were screened for anemia and 202 cases of anemia were confirmed. In Azraq camp, 98 pregnant women received tetanus toxoid vaccinations and 1,111 individuals were reached with reproductive health related information disseminated during two awareness sessions conducted in the camp.

UNFPA conducted an orientation session at Rabaa Al-Sarhan camp, which serves refugees before they enter the camp. The session focused on case definition of sexual transmission of infections, diagnosis, management, and follow-up of cases, and was attended by seven healthcare providers. Moreover, on-job training on pre- and post-natal care examination was also conducted for doctors and nurses.



REPRODUCTIVE HEALTH AWARENESS SESSIONS: UNFPA, in partnership with IMC, Jordan Health Aid Society, Noor AI Hussein Foundation, and Un Ponte Per reached out to 7,784 beneficiaries (39 percent of them living in host communities). Of the total, 714 families in Azraq camp were reached by community health volunteers with relevant information about reproductive health services.

IRAQ

REPRODUCTIVE HEALTH SERVICES: A total of 1,188 reproductive health services were provided in Dohuk and Sulaymaniyah during the month of July; of these, 229 deliveries were supported, 52 cases opted for Caesarean-section, 34 women received post-natal care services, and 714 women and men received family planning pills and condoms.

REPRODUCTIVE HEALTH SUPPLIES: Seven district hospitals and 11 primary healthcare centres in Dohuk were supported with an assortment of needed reproductive health kits.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: A total of 141 women and girls in Domiz and Gawilan camps benefited from awareness-raising sessions on family planning and the danger signs of pregnancy.

TURKEY

REPRODUCTIVE HEALTH SERVICES: During the reporting month, 140 Syrians benefited from various gender-based violence related services and awareness sessions.

In total, 1,098 Syrians benefited from reproductive health services provided by counseling units. Of the total, four cases of early pregnancies were reported by Hacettepe Counseling Unit and Syrian Social Gathering Centre.

REPRODUCTIVE HEALTH SUPPLIES: A total of 5,770 dignity kits were distributed by AFAD to Syrians in Akcakale. Moreover, the International Middle East Peace Research Centre received 14,826 dignity kits and buckets, and distributed them in Akcakale, Batman, and Kiziltepe. It also distributed 2,072 hygiene kits in Sanlıurfa. The Hacettepe Counseling Unit distributed 100 hygiene kits to Syrians residing in Ulubay district in Ankara as a means of promoting the mandate and services of the new UNFPA-supported unit.

REPRODUCTIVE HEALTH AWARENESS SESSIONS: In partnership with Harran University, UNFPA organized four reproductive health sessions on immunization, family planning, and antenatal and postpartum care. The sessions targeted 48 beneficiaries in Sanliurfa.

UNFPA, in collaboration with IMPR, organized six awareness sessions on dysmenorrhea, mammary gland infections, AIDS, anaemia, toxoplasmosis, antenatal care for teenagers, early puberty, and personal hygiene. The sessions targeted 116 beneficiaries in Sanliurfa In another collaborative venture with Hacettepe Counseling Unit, UNFPA organized two introductory sessions on reproductive health and family planning; these sessions were attended by 18 beneficiaries in Ankara.

REPRODUCTIVE HEALTH MATERIAL DEVELOPED: UNFPA, in partnership with Hacettepe Counseling Unit, distributed 300 brochures on antenatal care and family planning.

Harran University in Sanliurfa published research on the general health situation of married Syrian women refugees residing in Sanliurfa city centre. The university has also developed booklets on child nutrition, breast cancer, and cervical cancer. These booklets will be distributed in both host communities and among Syrians for increased awareness.

EGYPT

REPRODUCTIVE HEALTH AWARENESS SESSIONS: In Damietta, 12 sessions on sexual and reproductive health, psychological awareness, and life skills training were conducted for 47 girls. Topics were chosen on the basis of a prior needs assessment carried out by trainers and Syrian community health workers. A total of 35 girls in 6th October also received similar training.

WOMEN AND GIRLS SAFE SPACES: Support for two safe spaces continued in 6th October and Damietta. These spaces provide several services including psychosocial support, training, recreational activities, awareness campaigns, and sport activities. UNFPA supported the establishment of a safe space in Maadi, Cairo, in collaboration with Care International and signed a grant for the establishment of another safe space in Obour with the Egyptian Organization for Human Rights. This safe space is expected to become functional by next month.



Syrian women in the women counseling unit, Hacettepe, Turkey Credit: International Middle East Peace Research Center (IMPR), 2015.



GENDER EQUALITY AND WOMEN'S EMPOWERMENT



"Shells were raining on us every day," said Rafeef, 37 years from Ghouta. "So we fled, but my eldest son is still in Syria. He's stuck in Damascus; he can't leave, and I can't even call him."

In Bekaa, Lebanon, Rafeef spends long days locked in a battle against elements like rats, heat, rain, mud, dust, and hunger. That is what her new life looks like. Her family lives in a tiny room in a dilapidated area that bakes in the heat and floods in the rain. The rent is so high in some cities; it is not unusual to find more than 20 people sharing a two-bedroom apartment.

"We feel sad that we have to live like this," said Rafeef, who shares a bare, small flat with 14 relatives in Bekaa, Lebanon. "We don't have enough space or mattresses to sleep at night. We're sleeping in chairs, upright."

The overcrowding causes family tensions and domestic violence, particularly against women and girls. Such violence may intensify as households are socially isolated, suffering from tremendous financial stress, and lack of privacy due to overcrowding. All these factors contribute to increased tension which sometimes leads to violence, often perpetrated by males within the household.

"We left our life behind in Syria. Whatever it was, it was better than here. I wish the war in Syria would stop so that we can go back. Before the revolution, we had a good life."

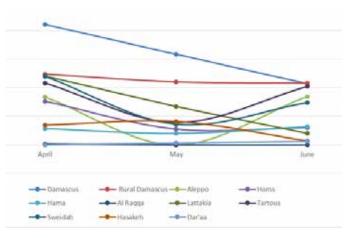
Credit: David Brunetti | UNFPA, 2015.

SYRIAN ARAB REPUBLIC

GENDER-BASED VIOLENCE SERVICES: During the reporting period, the UNFPA-assisted SARC and SFPA clinics and mobile teams provided medical examinations and psychosocial support to around 16,800 women residing in the affected governorates.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: The UNFPAassisted clinics and mobile teams of SFPA and SARC in Damascus, Rural Damascus, Homs, Lattakia, Tartous and Dar'a, provided 10,508 gender-based violence services.

The following chart reflects the trends of psychosocial support delivered by SARC during the second quarter. It may be noted that in Damascus and Homs, awareness-raising on psychosocial support increased in April as a result of a comprehensive campaign carried out by SFPA.



Graph shows the trend of awareness session conducted over the months April, May and June in differnet governorates

Credit: The Syrian Family Planning Association , SPFA, 2015

GENDER-BASED VIOLENCE SUPPLIES: A total of 500 female dignity kits and 150 male dignity kits were distributed to affected people in Hama.

WOMEN AND GIRLS SAFE SPACES: UNFPA continued to support 11 centres that provide gender-based violence screening and services for women in Damascus, Aleppo, Sweida, Lattakia, Tartous, Hasakah, and Hama through deployment of gynecologists, midwives, psychosocial counselors, and nurses.

LEBANON

GENDER-BASED VIOLENCE SERVICES: UNFPA, in partnership with INTERSOS, undertook preparatory measures to expand the livelihood programme supported by UNFPA since early 2014. The programme intends to promote coping mechanisms for women and girl survivors, or those at risk of gender-based violence, by strengthening their selfesteem and self-reliance.

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Accordingly, the following preparatory actions were undertaken: INTERSOS revised the criteria for selection of beneficiaries for the livelihood programme in Beirut/Mount Lebanon based on lessons learned in 2014. Criteria included, among others, age, economic vulnerability, number of family members, vulnerability to genderbased violence incidents, women heads of households, availability to participate in the vocational training programme, and legal status. The Ministry of Social Affairs' social development centers (SDCs) and municipalities in the four target areas were contacted to present the project and discuss referral procedures, and a list of possible trainings was established in order to propose to women in focus group discussions. The options go from chocolate design for events to nursing or home production of traditional food.

Through UNFPA's support, KAFA provided numerous services to women survivors of gender-based violence at KAFA's Listening and Counseling (LCC) Centre in Beirut. Eighteen legal consultations were organized from the beginning till mid-July 2015. The majority of these consultations focused on providing women with needed information about their rights. Moreover, 35 psychological consultations were also provided, and two cases were referred for specialized treatment.

GENDER-BASED VIOLENCE OUTREACH SERVICES: UNFPA, in partnership with INTERSOS, selected nine men to participate in the first cycle of life skills/awareness sessions in Chouf area. It also selected 34 boys aged 15-19 years in Chouf, Shiah and Choueifat to participate in the peer educators' programme in Beirut/Mount Lebanon. The programme targeted 20 youth in each of the three areas. Fourteen stakeholders from the municipalities, SDCs, schools, women's associations, and collective shelters were briefed, offered support, and introduced to awareness and information activities by INTERSOS.

GENDER-BASED VIOLENCE TRAINING: During the reporting period, UNFPA, through its implementing partner KAFA, conducted the following activities:

• Seven one-day training sessions targeting 80 previously trained Internal Security Forces (ISF) officers on implementation of Law 293 to protect women and other family members from domestic violence. The training programme included: review of the family violence curriculum content and review of Law 293 and the role of ISF officers



Beneficiaries during training on makeup and manicure - Chweifet, Lebanon. Beneficiaries during training on hairdressing - Chouf, Lebanon.

Credit: INTERSOS, 2015



Awareness session in Minnieh in Tripoli, Lebanon, carried out by LFPADE community leaders.

Credit: LFPADE, 2015

according to Law 293, using the film 'BelKanoun' as a training tool.

• A psychotherapist coaching session targeting 5 social workers. The sessions were carried out between the listening and counseling team and a psychiatrist. They enabled the social workers to consolidate their skills and to avoid difficulties, especially when dealing with people suffering from psychological disorders.

GENDER-BASED VIOLENCE WOMEN'S CENTRES: UNFPA, in partnership with AI Mithaq, the new women's centre in Baalbek, initiated the rehabilitation process of the premises with an aim to provide a comprehensive service package to Lebanese and Syrian women living in the vicinity of the centre.

JORDAN

GENDER-BASED VIOLENCE SERVICES: UNFPA continued to provide survivor-centred gender-based violence services through the 19 women safe spaces in the camps and host communities. During the reporting period, 1,205 gender-based violence beneficiaries accessed and benefited from safe, confidential, and compassionate specialized multi-sectoral services. As many as 209 women benefited from case management services; of these, 40 percent were women living in the host community, and 78 percent of the targeted women were aged above 24 years. Of the total, 262 women were referred to specialized medical care services.

A total of 4,963 women, girls, men, and boys benefited from selfreliance, vocational training, and life skills activities at the UNFPAsupported women centres; of these, 17 percent were females aged between 18-24 years. In Azraq camp, 55 women and girls participated in psychosocial recreational activities.

In a bid to encourage men and boys to adopt a participatory approach and to constructively contribute to behavioural change, the International Medical Corps (IMC), in collaboration with UNFPA, developed data collection tools for focus group discussions and conducted individual interviews with men and boys in Azraq camp about community-based interventions addressing issues such as stress management, masculinity, parenthood, family planning, and violence.



TRAINING/HUMAN RESOURCE DEVELOPMENT: UNFPA, in partnership with IMC, conducted two training sessions during the reporting period; the first session was on the inter-agency standard operating procedures (SOPs) and referral pathways for child protection and gender-based violence. This session targeted 14 staff working for six agencies. The second session was on a primer of child protection and gender-based violence principles and SOPs targeting 25 staff members working in 12 agencies and representing the nonfood items, health and WASH sectors in Azraq camp.

GENDER-BASED VIOLENCE MATERIAL DEVELOPED: UNFPA distributed information, education and communication GBV materials to 1,095 refugees in women's centres.

IRAQ

GENDER-BASED VIOLENCE SERVICES: UNFPA provided counseling, listening, psychosocial support, and case management related services to 21 beneficiaries in Dohuk, 36 in Basirma, 8 in Darashakran, and 38 in Qushtapa camps. Out of the total, three cases received clinical management of rape services and four cases received legal assistance.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: In Dohuk, 123 women and girls benefited from awareness-raising sessions on gender-based violence prevention and response and reproductive health issues. In Basirma, 66 women and girls participated in decision-making processes, medical care for pregnant women, and refugee task sessions. In Darashakran camp, 10 women and girls attended sessions on family planning, social awareness, and psychological support. In Kawergosk camp, 66 women and girls were introduced to the consequences of early marriage, as well as prevention, signs and treatment of scabies. In Qushtapa camp, 70 women and girls attended sessions on domestic violence, education of people in camps, inspection of the conditions of refugees, family planning, and dealing with teenagers.

GENDER-BASED VIOLENCE OUTREACH: A total of 738 women and girls benefited from awareness-raising on gender-based violence and reproductive health issues of youth; they were also apprised of available services by outreach volunteers.

GENDER-BASED VIOLENCE TRAINING: A total of 21 social workers were given training on how to appropriately conduct focus group discussions and to identify areas that need to be addressed to prevent and respond to gender-based violence.

RECREATIONAL ACTIVITIES IN WOMEN CENTRES: A total of 801 women and girls attended recreational activities including sewing and hair dressing courses; of these, 31 women and girls were in Domiz, 250 in Basirma, 81 in Darashakran, 330 in Kawergosk camp, and 109 women and girls in Qushtapa camp.

TURKEY

GENDER-BASED VIOLENCE SERVICES: According to the counseling units supported by UNFPA, 181 Syrians benefited from gender-based violence related services during the reporting period.

GENDER-BASED VIOLENCE AWARENESS SESSIONS: UNFPA, through its partners, organized two recreational and awareness-raising sessions on sewing, hairdressing and make-up. Four language courses targeting 244 beneficiaries and a training on psychosocial and life skills for 7 Syrian refugees in Sanliurfa were also conducted. Moreover, it also carried out a training session on early marriages (targeting 27 beneficiaries), a session on child labour (targeting 43

individuals), a session on sexual harassment and rape in Sanliurfa (for 22 participants), and a session on the basic concept of gender-based violence for 48 beneficiaries in Ankara.

KAMER, being the biggest local NGO working to combat violence against women, has been awarded a grant for the establishment of a women's and girls safe space in Gaziantep. The objective is to provide psychosocial support and to create a safe environment for socialization and empowerment of refugee women in particular.

EGYPT

PRODUCTION OF SUPPORT MATERIAL: A total of 1,200 copies of reproductive health and gender-based violence materials were distributed in Damietta, Alexandria, and Greater Cairo.





In cooperation with UNFPA, the Syrian Family Planning Association (SFPA) organized a three-day youth peer training on gender-based violence for 60 young volunteers in Lattakia, Sweida, and Tartous governorates of Syria. Credit: UNFPA | SFPA, 2015

SYRIAN ARAB REPUBLIC

YOUTH ACTIVITIES: UNFPA updated the roster of local Y-Peer networks that provides lifesaving humanitarian response including psychosocial support, delivery of humanitarian assistance, and interactive theatre-based awareness-raising in cooperation with local stakeholders.

JORDAN

YOUTH ACTIVITIES: UNFPA's implementing partner, QuestScope, started construction of the first youth centre/safe space in Zaatari titled 'Space for Change.' This youth centre will rely upon and build refugee youth skills through meaningful volunteering opportunities and activities that promote positive development, well-being,

9



leadership, and participation as change agents in their community. The centre, which will target 500 young men and women (aged 15-24 years), includes a big multipurpose hall, library, computer lab, training room, and kitchen.

During the reporting period, QuestScope, along with the core team of 21 Syrian young volunteers, set the structure of the centre and divided the core team into sub-teams that will be operating upon specialty. The core team visited all camp districts, conducting a wide outreach campaign to promote the centre. Several capacity-building programmes were given to the sub-teams; these programmes included a 15-day training on film-making, a two-day training on participatory research approach, a day-long training on communication skills, a two-day session on basic counseling training, a one-day training on managing volunteers, a two-day training on project planning and management, and a three-day training of trainers.

YOUTH AWAREBESS SESSIONS: A total of 2,419 youth (aged 18-

24 years) participated in reproductive health related awarenessraising sessions while another 1,064 youth participated in selfreliance and life skills trainings.

IRAQ

YOUTH ACTIVITIES: During the reporting month, 206 young girls and boys participated in the UNFPA-supported weekly awareness sessions on reproductive health, early marriage and family planning, and took part in the soccer tenement. In Darashakran camp, 157 boys and girls were trained in basic computer skills usage, drawing, and peer education while in Kawergosk camp, 34 were trained in computer skills, sports, English conversation, and peer education.

YOUTH RELATED TRAINING: During the reporting period, 89 youth attended the basic peer education training in Domiz and Gawilan camps.

UNFPA CROSS-BORDER OPERATIONS MAY-JUNE 2015

RESPONSE

REPRODUCTIVE HEALTH SERVICES: Work in UNFPA-supported hospitals in northern Syria providing reproductive health services continued. During the reporting period, 7,750 women and girls benefited from these services. Of the total, 141 were below 18 years of age. UNFPA-supported partners managed and supported 519 deliveries and 180 Caesarean-sections.

REPRODUCTIVE HEALTH SUPPLIES: A total of 151 reproductive health kits were distributed in north Syria to health facilities supported by UNFPA and its two implementing partners. The kits included tools to support clinical delivery, sexual transmitted disease management, a set of contraceptives including hormonal contraceptives and intra-uterine devices, and equipment for referral level hospitals providing services for complicated pregnancy cases. Moreover, UNFPA distributed 19 post-rape kits to seven additional organizations involved in the gender-based violence health strategy.

REPRODUCTIVE HEALTH MATERIAL DEVELOPED: Information education and communication materials (in Arabic language) on family planning, antenatal care, obstacle emergency, and reproductive health related services were received from Jordan and distributed to health cluster members in Turkey for their comments and recommendations before being disseminated to beneficiaries through UNFPA's partners.

GENDER-BASED VIOLENCE TRAINING: The gender-based violence sub-cluster and the health cluster in Gaziantep organized a training on caring for gender-based violence survivors for 17 medical staff. The training, meant for organizations working inside Syria, was part of the broader gender-based violence/health strategy and was co-facilitated by seven service providers who were trained in the training of trainers that took place in June. WOMEN AND GIRLS SAFE SPACES: UNFPA is supporting two local organizations to manage and strengthen women's and girls' safe spaces in Lattakia and Aleppo. As per UNFPA guidance, the grantees conducted consultations with the community, specifically with women and girls, to identify the spaces and activities. Ever since the opening of these spaces in June, 206 women have taken part in different activities offered by the centre, such as recreational activities, theatre courses, dried food preparation, etc.

COORDINATON

UNFPA chaired the gender-based violence sub-cluster (crossborder) group, where members discussed and reviewed the SOPs. A special workshop took place with the participation of 19 members of the gender-based violence sub-cluster to review the complete draft of the SOPs.

Members of the gender-based violence sub-cluster (crossborder) group developed a guidance note on dignity kits.

WASH, in collaboration with the gender-based violence subcluster, developed a tracking sheet to ensure a more coordinated system to plan and follow up on distribution of dignity kits.

UNFPA led the first gender-based violence cross-border meeting in Amman, with the participation of relevant agencies and international NGOs.

The reproductive health sub-working group in partnership with the capacity building subgroup conducted trainings on needs assessment.





The Serdam Youth Centre Theater Group presenting a play titled 'Where we Were and Where We Are' on the occasion of World Population Day. Credit: Milet Ali | UNFPA, 2015



First computer session for youth at Serdam Youth Centre in Iraq. Credit: Haveen Ahamed | UNFPA, 2015

UNFPA-SUPPORTED FACILITIES



Number of women's spaces

SYRIAN ARABIC REPUBLIC

jordan 19

9 in camps and 10 in communities

LEBANON

5

IRAQ 9 (3 in host communities)

EGYPT

3 turkey 7



Number of field reproductive health clinics or mobile teams

 $\begin{array}{c} \text{SYRIAN ARABIC REPUBLIC} \\ 30 \text{ static clinic, } 35 \text{ mobile} \\ \text{clinic and } 16 \text{ medical points} \end{array}$

JORDAN 19 10 static and 9 in camps

IRAQ 8 in camps 40 in non-camp locations



Number of youth centres

JORDAN

7 in communities 1 in camp

> LEBANON 5

iraq 1 egypt

1



Number of health facilities

syrian arabic republic 200

4 hospitals

JORDAN Ministry of Health facilities and NGOs facilities providing reproductive health services

> iraq 5

egypt 5

TURKEY

4 Referral hospitals

11_



COORDINATION & CAPACITY BUILDING

SYRIAN ARAB REPUBLIC

UNFPA participated in the Access Working Group, the United Nations sector group meetings on health, protection, and logistics, as well as meetings of the United Nations Humanitarian Country Team and the United Nations Security Cell.

UNFPA participated in the United Nations retreat and results-based management workshop aimed at formulation of the Strategic Planning Framework Outcomes and Indicators (2016-2018).

LEBANON

UNFPA co-chaired the gender-based violence task force meeting where the 2015 priorities for the sector were agreed upon. UNFPA also co-chaired the nationalgender-based violence Information management system steering committee meeting and contributed to the data analysis efforts.

UNFPA organized a meeting of the task force for clinical management of rape. Members discussed follow-up on mandatory reporting issues, based on feedback received from the Ministry of Public Health, and shared updates on ongoing programmes.

JORDAN

UNFPA co-chaired with UNHCR, the gender-based violence sub-working group and the gender-based violence information management system task force.

UNFPA chaired the youth task force (YTF) in Zaatari camp, and worked on several issues including facilitation for a presentation by REACH on youth-specific findings of the comprehensive child focused assessment, which highlighted low levels of reported youth participation in education, volunteering, and work. Moreover, the YTF is compiling a list of events and activities to mark International Youth Day held by agencies in Zaatari.

IRAQ

The gender-based violence sub cluster facilitated a meeting to update the national gender-based violence strategy to be in line with the newly launched humanitarian response plan.

The gender-based violence information management system (GBVIMS) group adapted the GBVIMS tools (intake form and consent form), translated into Arabic and Kurdish languages and applied in the field.

The gender-based violence sub custer addresses the gaps in sex and age disaggregated data by ensuring that the gender-based violence related issues are well represented in the new rapid protection assessment, working with IOM in ensuring gender is well mainstreamed in data management and by adapting the new genderbased violence service mapping tool to inform the referral pathways for easy reference for frontline workers.

TURKEY

UNFPA attended the United Nation Agencies' Syria crisis task force biweekly meetings in Ankara, field sector coordination meetings in Gaziantep or Hatay, and gender-based violence working group monthly meetings at the Ministry of Family and Social Policies, General Directorate of Woman's Status, and the protection working group, both in Ankara and Gaziantep.

UNFPA hosted and led the gender-based violence working group meetings, where UNHCR, UNICEF, IOM, AFAD, Ministry of Interior, and Directorate General of Migration Management (DGMM) representatives were also present. The participants reviewed and discussed agency collaboration activities on the gender-based violence humanitarian response.

The second gender-based violence sub-group meeting was conducted, where members reviewed the terms of reference of the group, and shared expectations and ideas about a campaign on early marriages. Moreover, a two-day gender-based violence training that was initiated by the sub-group was held in both Ankara and Gaziantep.

EGYPT

UNFPA participated in the inter-agency working group, where members carried out a socioeconomic assessment of Syrian, African, and Iraqi refugees, as well as the food security situation.

UNFPA participated in the sexual and gender-based violence subworking group, where members discussed the final list of indicators for monitoring and evaluation of primary health care interventions, coordination with the Ministry of Health for qualitative indicators, satisfaction surveys, and automation of reporting.



Syrian woman at the UNFPA women counseling unit established in partnership with Harran University in Sanlıurfa, Turkey. Credit: Harran University team, 2015

CHALLENGES

SYRIAN ARAB REPUBLIC

The monitoring of the humanitarian response continued to pose a challenge due to the limited capacity of implementing partners as well as limited access to affected areas due to security conditions.

Availability of only a limited number of implementing partners, especially in the besieged and hot spot areas, who are qualified to provide comprehensive gender-based violence prevention and response continued to affect the ability to deliver a timely humanitarian response.

LEBANON

A constant increase in the number of complicated cases seeking gender-based violence services greatly increased the workload of social workers, and is consequently leading to burn out.

Lack of places in existing shelters, especially when KAFA encounters cases which require urgent attention, remained another serious challenge.

Overloaded physician schedules made it difficult to set training schedules targeting doctors.

JORDAN

Tension between Syrian refugee and citizens remains a challenge.

Families moving to camps are facing difficulties including adaptation to the camp atmosphere and crowded living conditions, which cause psychological stress and an increase in domestic violence.

There is a lack of knowledge among Syrian refugees about the importance of antenatal, post-natal and post-abortion care, breastfeeding, children's vaccination, and periodic follow-up visits.

Lack of electricity in some parts of the Zaatari and Azraq camps has been creating major issues, not only in the provision of services but also in relation to the level of frustration among refugees, affecting responsiveness to services.

IRAQ

The ongoing conflict in the country that resulted in internal displacement is affecting the overall delivery of services and negatively impacting funding opportunities for refugees.

Refugees in urban settings represent more than 67 percent compared to those in camps; this entails development of strategies to respond to the needs of these populations.

TURKEY

Recent terrorist attacks on civilians, police, and the gendarmerie have drawn serious concerns towards the future of both Turkey's own national security and the security of Syrians residing in Turkey. These incidents led to restrictions of travelling to some of the provinces in the southeast region, thus hindering implementation. Challenges like language barrier, lack of qualified and motivated humanitarian aid workers, and long bureaucratic procedures continued to impede delivery of services and/or implementation of programmes.

Accessibility and out-reach to the Syrian population remained extremely intermittent due to recent attacks and political conflicts. As such, the transportation of groups (women, children, youth, or men) remained a main challenge when it came to reaching groups that were most in need. Turkey is expected to host more refugees if the situation continues to deteriorate at its current pace.

EGYPT

Refugees are scattered over large urban areas in Egypt, making it challenging for most aid agencies to extend support to them. Moreover, since the population is still on the move, the allocation and provision of services continues to be difficult.

Birth registration of Syrian newborns in the absence of the father or marriage certificate remains an issue that requires advocacy, although several legal and human rights organizations are currently providing aid for registration of these cases.

Although the Government of Egypt has allowed access to medical and educational public services for Syrians, the issue of improving accessibility and quality of services remains a challenge and necessitates continual support and capacity-building of sectors in areas marked by a high concentration of Syrians.

The living conditions of refugees are alarming; they often live in crowded quarters with multiple family households. Lack of privacy contributes to tensions and increased domestic violence.



FUNDING

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UNFPA Jordan received \$200,000 from the media company MBC for the establishment of a youth centre in Zaatari refugee camp, as well as for a youth project in Irbid Governorate focusing on social cohesion and peace-building through sports.



UNFPA established a new Facebook account for the UNFPA specialized gender-based violence journalists network. The objective of this social media page is to provide a space for journalists to share knowledge and experience, interact with experts in this area of gender-based violence and to advocate for better quality of coverage on gender-based violence in the Syria crisis.



DONORS & PARTNERS

UNFPA IS GRATEFUL FOR THE SUPPORT OF THE FOLLOWING DONORS IN THE SYRIA CRISIS:

Australia, Canada, Denmark, European Commission, Germany, Italy, Kuwait, Netherlands, Norway, OCHA/CERF, United States, United Kingdom, UNDP.

Private sector: MBC

IMPLEMENTING PARTNERS

IN SYRIAN ARAB REPUBLIC: Ministry of Social Affairs and Labor (MOSA), Ministry of Health (MoH), Ministry of Higher Education (MoHE), Syrian Family Planning Association (SFPA), Syrian Arab Red Crescent (SARC) and International Medical Corps (IMC).

IN LEBANON: Ministry of Public Health, Ministry of Social Affairs, Lebanon Family Planning Association for Development and Empowerment, Palestinian Red Crescent Society, Humedica, Makhzoumi Foundation, Amel Association, International Medical Corps and Caritas Lebanon, KAFA ("Enough Violence and Exploitation"), Akkarouna, INTERSOS, SHEILD, LOST, Heartland Alliance, Makassed Primary Health Care Centers, Mazloum Hospital and International Organization for Migration (IOM).

IN JORDAN: Ministry of Health (MOH),Institute for Family Health (IFH), International Medical Corps (IMC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Un Ponte Per (UPP), Jordanian Women's Union (JWU), Youth Peer Education Network (YPE), NCFA (National Council for Family Affairs), QuestScope.

IN IRAQ: Ministry of Culture, Sport and Youth (MCSP), Ministry of Labor & Social Affrairs (MLSA), AL Massela, START NGO and Harikar.

IN EGYPT: Ministry of Health (MOH), Care International, Terre Des Hommes, Souriyat (Syrian Women Association in Egypt), Resala and FARD Foundation.

IN TURKEY: The Disaster and Emergency Management Presidency (AFAD) of the Prime Ministry of Turkey, Ministry of Foreign Affairs (MoFA), and Ministry of Health (MoH), Ministry of Family and Social Polices (MoFSP), Turkish Red Crescent Society (TRCS), universities including Harran in Sanliurfa and Hacettepe University in Ankara, NGOs including the International Middle East Peace Research Center (IMPR), Syrian Social Gathering.

CONTACT INFORMATION



Daniel Baker, UNFPA Syria Regional Response Advisor baker@unfpa.org +962797225829 Ruba Hikmat, UNFPA Syria Regional Communications & Media Specialist hikmat@unfpa.org +962795096066 RELEVANT RESOURCES

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

The United Nations Population Fund | UNFPA Regional Syria Response Hub | Amman- Jordan | www.unfpa.org