

**// Gender equality and women's rights are essential to getting through this pandemic together.**

— ANTONIO GUTERRES  
Secretary General of the United Nations



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# UNITED NATIONS POPULATION FUND

# **REGIONAL SITUATION REPORT**

## FOR THE SYRIA CRISIS



**UNITED NATIONS POPULATION FUND**  
REGIONAL SYRIA RESPONSE HUB

The Regional Situation Report for the Syria Crisis offers a bird's eye view of UNFPA's operations within the context of the Syria Crisis. The report is prepared by the UNFPA Arab States Hub in Amman, Jordan, and spans operations conducted by UNFPA offices in Syria, Jordan, Lebanon, Turkey, Iraq, and Egypt, in addition to operations conducted inside Syria and managed from cross-border Turkey.

In addition to providing aggregated quantitative results for each country, the report also brings stories from the field that highlight the plight of communities inside Syria and in host countries, in addition to underscoring the positive impact of the response services provided by UNFPA in the areas of sexual and reproductive health, gender-based violence, youth, and others. As of February 2020, the report also covers UNFPA's efforts to ensure continuity of operations throughout the Syria crisis region during the COVID-19 pandemic.

## THE MISSION OF UNFPA

The United Nations sexual and reproductive health and rights agency.

**UNFPA's core mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.**

UNFPA calls for the realization of sexual and reproductive rights for all, and supports access to a wide range of services, including voluntary family planning, maternal healthcare and comprehensive education on sexuality.

Since the crisis in Syria erupted in 2011, UNFPA has worked consistently to ensure that every Syrian woman and girl has the right to access to affordable sexual and reproductive healthcare (SRH) and be effectively protected from gender-based violence (GBV). UNFPA and its partners are scaling up efforts to empower and improve the lives of Syrian women, youth, and impacted communities inside Syria and in host countries, including by advocating for human rights and gender equality to better equip individuals and communities to cope with the far-reaching ramifications of this protracted crisis. These efforts continue in 2020 as communities withstand the impact of the COVID-19 pandemic, which has presented an array of unprecedented challenges, including consistently changing priorities and severe restrictions on movement. UNFPA continues to mobilise its resources and expertise to maintain the availability of quality SRH and GBV services to people in need throughout the region.



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The crisis in Syria has been globally recognised as one of the worst humanitarian crises of our time. More than 11.7 million people inside Syria are in need, while close to 5.6 million have taken refuge in neighbouring countries throughout the region. They continue to suffer the effects of nearly a decade of conflict, including disruption of community networks, safety nets and rule of law. This is particularly true in the case of women and girls due to the deep-rooted complexity of the issues they continue to face on a daily basis. Moreover, as the COVID-19 pandemic continues to impact communities throughout the region, women and girls face ever-growing risks in terms of access to quality sexual and reproductive health services and protection from various forms of gender-based violence.

**All photos shown in this issue, unless otherwise stated, are courtesy of the UNFPA Arab States Regional Response Hub. Moreover, unless otherwise stated, photos do not directly correlate to the stories next to which they appear. Real names of survivors have been changed for confidentiality.**

# SITUATION OVERVIEW

**In light of the COVID-19 pandemic, UNFPA mobilizes its resources to ensure continuity of SRH and GBV services to Syrians in need throughout the region.**

Within the Syria crisis region, which spans the Whole of Syria, Turkey, Lebanon, Jordan, Iraq and Egypt, there have been a total of 129,407 confirmed cases of COVID-19 as of April 30, 2020. The highest number of confirmed cases came from Turkey (120,204), followed by Egypt (5,537), Iraq (2,085), and Jordan (453). Only 43 cases were reported in Syria. By April, UNFPA country offices throughout the region had already readjusted its programmes and work plans, putting short and long-term plans in place to ensure continuity of operations despite expected challenges.

In Syria, though the situation remains fluid, the Government of Syria introduced several measures since the first case of COVID-19 was reported on 23 March 2020, which remain in place to minimise the risks of COVID-19 transmission. These measures include movement restrictions between governorates and a daily national curfew between 19:30 and 06:00. Other restrictions that had been in place, such as the closing of public institutions and local businesses, These measures immediately impacted UNFPA's capacity to deliver and monitor current activities, though remote surge deployments and new modalities of service provision have ensured that critical services have continued to be delivered.

Throughout the region, curfews, lockdowns and movement restrictions continue to present similar challenges. Turkey, for instance, has been under social distancing and movement restriction requirements from 17 March 2020, which have resulted in business closures and challenges in accessing essential services. Despite these challenges, UNFPA Turkey has continued to support populations in need, such as vulnerable women and girls and Syrian refugees, throughout the outbreak. Continuity of operations as the situation evolves.

In Lebanon, following the announcement of the COVID-19 health emergency on March 13, public mobilisation and lockdowns were implemented nationwide. The COVID-19 emergency has been compounded by the rapidly deteriorating economic crisis that led to the devaluation of the Lebanese pound by more than 50%, decrease in purchasing power, inflation in prices, withholding depositors' money in banks, and other consequences.

Jordan saw similar shifts take place after the government announced a nationwide curfew and the imposition of Jordanian Defence Law (1992). As a result, UNFPA Jordan operations are now limited to time-critical, essential, life-saving components that must be continued regardless of programme and operational disruptions. International and governorate borders have been closed, with military and/or police enforcing the curfew and movement restrictions. As a result of these measures, UNFPA Jordan is focusing on ensuring continuity of essential SRH and GBV services, particularly within the Zaatari and Azraq refugee camps.

Meanwhile, the Government of Iraq and the Kurdistan Regional Government have imposed curfews across the country, and the pandemic has disrupted access to life-saving SRH services and worsened existing inequalities for women and girls. The pandemic and curfews in place have led to a decrease in the reporting of GBV cases as women lack the freedom of movement and privacy to report cases. Nevertheless, GBV is believed to be increasing due to higher tensions in households due to confinement, posing new risks and potentially fueling pre-existing forms of GBV, particularly violence in the home perpetrated by intimate partners or other family members. UNFPA is working with the Government of Iraq and the Kurdistan Regional Government to ensure that essential services are still being provided.

The COVID-19 global pandemic continues to have a serious impact on the people of Egypt, who have faced similar disruptions after the government announced the decision to suspend schools, universities, and government offices, forcing a substantial number of UNFPA-supported WGSS to close. These facilities, however, continue to offer services remotely, meeting survivors only in emergency cases. SRH services are still operational as part of the key partnership with the Ministry of Health and Population.

UNFPA recognizes that outbreaks like the COVID-19 pandemic affect women and men differently, potentially exacerbating existing inequalities both between genders and with other vulnerable communities like persons with disabilities, youth, and the elderly. Despite the challenges faced by beneficiaries, service providers, and staff, UNFPA remains committed to providing essential services in sexual and reproductive health (SRH) and gender-based violence (GBV), and to reaching the Three Zeros of zero preventable maternal deaths, zero unmet need for contraception, and zero GBV and harmful practices.

**The UNFPA Regional Syria Response Hub has been closely coordinating with country offices in the region to ensure that response plans and priorities are clearly established. The primary objective is to ensure that the delivery of life-saving services continues despite the many restrictions on movement that this situation has introduced. Continuity plans are being regularly updated as the situation evolves and regular situation reports are being disseminated to all stakeholders.**

**While fear and uncertainty are natural responses to the coronavirus, we must be guided by facts and solid information. We must stand together in solidarity, fight stigma and discrimination, and ensure that people get the information and services they need, especially pregnant and lactating women.**

— NATALIA KANEM, UNFPA Executive Director



**TOTAL  
CONFIRMED  
CASES**

As at April 30, 2020

<b>SYRIA</b>	<b>TURKEY</b>	<b>LEBANON</b>
43	120,204	725
<b>JORDAN</b>	<b>IRAQ</b>	<b>EGYPT</b>
453	2,085	5,537

# RESPONSE FROM ALL OPERATIONS

Delivering life-saving sexual and reproductive health and gender-based violence services to communities in need inside Syria and throughout the region.

The conflict in Syria has created one of the most severe and protracted humanitarian crises in the world today. Millions have been displaced both inside the country and outside as refugees, especially in Egypt, Iraq, Jordan, Lebanon and Turkey. The crisis has permanently altered the fabric of society in the nation, with far-reaching ramifications for its future resilience.

Even in these circumstances, UNFPA believes that every Syrian woman, adolescent girl and child has the right to sexual and reproductive health and protection from gender-based violence.

UNFPA operations in Syria are run from the Syria Country Office, as well as from the UNFPA hub in Gaziantep, Turkey for cross-border operations.

While the COVID-19 pandemic has significantly impacted UNFPA's operations in the field, efforts are ongoing to ensure that critical services are being delivered to people in need throughout the region.

## REPRODUCTIVE HEALTH

### INDICATOR

INDICATOR	SINCE JANUARY
People reached with sexual/reproductive health services	809,294
Family planning consultations	273,349
Normal / assisted vaginal deliveries	25,485
C-Sections	17,209
Ante-natal care consultations	261,968
Post-natal care consultations	10,391
People trained on SRH-related topics	1,048

## GENDER-BASED VIOLENCE

### INDICATOR

INDICATOR	SINCE JANUARY
People reached with GBV programming / services	361,431
People reached with Dignity Kits	118,323
People provided with GBV case management	5,933
People reached with GBV awareness messages	267,249
People trained on GBV-related topics	1,143

## YOUTH SERVICES

### INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	7,275
People trained on youth-related topics	119



\* Above figures reflect fully-supported service-delivery points. Inside Syria additional 954 primary healthcare facilities are being partially supported through the Ministry of Health.



WHOLE OF SYRIA RESPONSE

# SYRIA COUNTRY OFFICE

Delivering emergency and long-term assistance to Syrian communities in need throughout the country.

Syria announced its first COVID-19 case on 22 March 2020. UNFPA Syria has been preparing and readjusting programmes throughout the country in a number of initiatives, including contributing to the national preparedness plan led by the Health Cluster; developing a series of rolling plans to be implemented by the UN Country Team (UNCT); establishing a Crisis Coordination Committee led by the Resident Coordinator; updating the business continuity plan to include specific scenarios pertaining to the COVID-19 pandemic; issuing guidance notes to all IPS to ensure compliance with infection control procedures; among others.

As per the measures taken by the Government of Syria, ministries were tasked to reduce staffing levels while maintaining basic services and ensuring that production continues in all public and private sectors. Further restrictions were introduced towards the end of March, including the shutdown of all shops and social gathering sites except food stores and pharmacies, as well as the shutdown of Damascus airport, inter-city transportation, border crossings from Lebanon and Jordan.

As a result, all UNFPA programme components implemented in groups have been stopped until further notice. The list of these activities includes, but it is not limited to, the operations of WGSS and youth programmes. IPs have minimized their operations, maintaining only individual services to be provided in facilities (case management, psychosocial support (PSS) individual counselling, individual health consultations). While critical SRH services are still operational, the situation is changing rapidly as the outbreak evolves.

## REPRODUCTIVE HEALTH

### INDICATOR

People reached with sexual/reproductive health services	659,950
Family planning consultations	250,351
Normal / assisted vaginal deliveries	17,525
C-Sections	15,163
Ante-natal care consultations	205,484
Post-natal care consultations	22,794
People trained on SRH-related topics	278

### SINCE JANUARY

## GENDER-BASED VIOLENCE

### INDICATOR

People reached with GBV programming / services	236,590
People reached with Dignity Kits	39,570
People provided with GBV case management	3,753
People reached with GBV awareness messages	222,912
People trained on GBV-related topics	86

### SINCE JANUARY

## YOUTH SERVICES

### INDICATOR

Beneficiaries reached with youth programming	4,217
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### SINCE JANUARY



\* No youth centres are operational as the 2020 work plans have not been endorsed. Youth activities in January took place at Women and Girls' Safe Spaces.  
\*\* Above figures reflect fully-supported service-delivery points. Inside Syria, an additional 954 primary healthcare facilities are being partially supported through the Ministry of Health.



## Seba's Journey

*Seba's delivery amidst COVID-19 highlighted the need for maintaining support for essential SRH services.*

"I am worried about my baby," said Seba, during the final days of her pregnancy. "I have taken all the necessary measures and hope it will be fine."

Seba had followed up her pregnancy at a UNFPA-supported clinic in Homs. She heard about courses and activities designed to support women, registered, and attended the crochet course.

"Shortly after starting the course, the pandemic happened, and we had to stop. We are truly afraid for our lives. As a pregnant woman, I am particularly worried, as I fear I'm particularly at risk."

The last month of her pregnancy brought more pain and discomfort — significantly more than what she had experienced in her previous pregnancy, and she knew it was not normal. One day, the pain reached its peak, at which she started to bleed and was immediately referred to the clinic for an emergency check-up. It was a Friday morning, with every facility closed due to COVID-19. Fortunately, the medical team put together an emergency unit and were able to perform a C-section.

"Despite the restrictions in place, this was an emergency case and required an emergency procedure," explained Dr. Ferial, who led Seba's C-section. "Ensuring the continued delivery of these services even in light of the pandemic is essential and will save the lives of countless women and children."

"It was like a miracle," said Seba upon seeing her new baby girl. "While our family is beyond happy that we have welcomed new life, we are still concerned about the future we will face. We often wonder how we are supposed to protect our children from this disease, or to make enough of a living to cover the basics now that the pandemic is destroying countless jobs."

UNFPA is working closely with the Ministry of Health and the World Health Organization to confront the COVID-19 in Syria. UNFPA continues to work to ensure that pregnant women with suspected, probable, or confirmed COVID-19, including women and girls who may need to be in isolation, have access to woman-centered, dignified and skilled care.

**“ We are truly afraid for our health. As a pregnant woman, I am particularly worried, as my immune response is weaker than others.**

**— SEBA, who recently received SRH services at a UNFPA-supported facility**

# CROSS-BORDER TURKEY

Ensuring that all communities inside Syria have access to quality sexual and reproductive health and gender-based violence services.

Although there have been no confirmed cases of COVID-19 to date in northwest Syria, the continued alarming humanitarian needs of displaced people, returnees and host communities have been further exacerbated by the potential impact of an outbreak on the ground. Prevention and mitigation measures of COVID-19 have resulted in a notable increase of reported GBV incidents due to extended quarantine and other social distancing measures, as well as the deteriorating economic situation and the loss or reduction of income as a result of 'stay at home' measures. Malnutrition has also become an increasing problem. 1 in 5 pregnant or lactating women are acutely malnourished, compared to 1 in 20 in the first half of 2019. Malnourished people have a compromised immune system and are therefore at elevated risk of mortality due to COVID-19.

UNFPA has ensured the continued provision of SRH and GBV services, to the extent possible, while limiting social contact and gatherings and following guidance developed by the GBV and SRH coordination mechanisms on service provision adaptation to COVID-19 preparedness. Additionally, referral pathways among GBV and SRH partners have been strengthened, which has further facilitated and supported adequate GBV response in light of the ongoing emergency. Awareness raising efforts on COVID-19 related risks and safeguards have widely persisted through both online and offline mediums for both SRH and GBV.

## REPRODUCTIVE HEALTH

### INDICATOR

	SINCE JANUARY
Primary health facilities	13
Health facilities that provide Emergency Obstetric Care (EmOC)	13
Functional mobile clinics	10
People reached with sexual/reproductive health services	106,330
Family planning consultations	15,979
Normal / assisted vaginal deliveries	7,486
C-Sections	2,046
Ante-natal care consultations	47,200
Post-natal care consultations	10,428
People trained on SRH-related topics	66

## GENDER-BASED VIOLENCE

### INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	14
People reached with GBV programming / services	76,386
People reached with Dignity Kits	69,774
People provided with GBV case management	414
People reached with GBV awareness messages	33,134
People trained on GBV-related topics	398

While the security situation in the northwest of Syria remained largely calm during the month of April, several IED incidents were reported in the Idlib area and northern Aleppo. The most serious attack occurred on 29 April when a truck loaded with explosives detonated in Afrin city, which resulted in the death of at least 42 people including many women and children. Of the nearly 1 million people in the northwest who fled their homes to escape from hostilities between December 2019 and early March 2020, some 846,000 people have reportedly remained in displacement in the northern parts of Idlib governorate and in Aleppo.







## My Right to an Education.

My right to an education was taken away from me because of what the many years of war in my country has done to us. When my mother died one year ago, I had to become a housewife. I was 13 years old and was no longer permitted to go to school. I was completely isolated, in grief, and had lost all opportunities that I thought were available to me. When I received permission to visit the women and girls safe space in Idleb, which I had learnt about through neighbours, I received psychological help through both individual and group sessions. Through all their support, I was able to rebuild more confidence in myself and more trust towards others. Their outreach team also spoke with my father a few times, which was appreciated. I am very pleased to report that, thanks to the staff at the center and the wonderful work they are doing for women and girls, I am now a student again at the formal education institute where I live.

— MARIAM, who recently received services at a UNFPA-supported facility

COUNTRY OVERVIEW

# EGYPT COUNTRY OFFICE

UNFPA Egypt continues to provide assistance to syrian refugees in the country, focusing on issues related to gender-based violence.

Egypt reported its first case of COVID-19 on February 14, 2020. By end of March, cases had surpassed 1,000. On March 15, the Government of Egypt announced the decision to suspend schools, universities, and government offices for two weeks, forcing eight of the WGSS operated by the Ministry of Youth and Sports (MOYS) and three operated by UNFPA's implementing partner, CARE, to close.

However, these facilities continue to offer the life-saving package of care and case management services remotely and by meeting survivors in emergencies. Two UNFPA-supported WGSS are still open at a limited capacity that offer only the essential GBV case management service. SRH services are still operational as part of the key partnership with the Ministry of Health and Population.

In its COVID-19 emergency response plan, UNFPA Egypt focused on three main pillars; supporting the national healthcare system in responding to COVID-19; ensuring that case management and referral pathways accommodate the needs of pregnant women with COVID-19; and addressing the immediate SRH and GBV needs emanating during and as a result of the pandemic.

## REPRODUCTIVE HEALTH

### INDICATOR

INDICATOR	SINCE JANUARY
Functional mobile clinics	2
People reached with sexual/reproductive health services	562
Family planning consultations	83

## GENDER-BASED VIOLENCE

### INDICATOR

INDICATOR	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	13
People reached with GBV programming / services	3,726
People provided with GBV case management	964
People reached with GBV awareness messages	510

## YOUTH SERVICES

### INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	98



## Surviving violence, prejudice, and isolation.

When the crisis in Syria hit its peak, Fatima, at the in her adolescence, migrated to Egypt in the hope of finding peace and security.

Fatima, who also has a disability that hinders her movement, has since successfully integrated into Egyptian society, but her journey was fraught with countless manifestations of violence and injustice, many of which were due to her status as a female migrant with a physical disability. Sexual harassment, stereotyping, and social isolation were among the many experiences she has had since arriving in Egypt, all of which have all left long-lasting mark on Fatma's her health.

"The sexual harassment in particular really alters your view of the world," explains Fatima. "It can make you feel unsafe, insecure, and pushes you into a spiral of depression."

That insecurity caused Fatma to be further isolated from others around her, which was further compounded by her disability that made certain social interactions more challenging. Before long, her feelings of loneliness and isolation began have a clear impact on her mental and physical wellbeing.

Fatma came to a UNFPA-supported women and girls' safe space at the behest of an acquaintance who shared her plight. Within days of her arrival, she began interacting with others around her, slowly rebuilding her ability to trust people and broadening her social circle. Eventually, stronger bonds began to form, and she quickly realized that the community she found in Sanad can become her family and can help her gain the strength she needed to survive any trauma or challenges she faces.

It was then that COVID-19 came and forced her and many others back into isolation.

"One of the less perceived ramifications of COVID-19 is the impact it has had on women and girls, particularly with regards to restriction of movement and access to essential services," explains Samar Salama, a project manager at Etijah, a UNFPA Egypt implementing partner. Salama currently supervises two UNFPA safe spaces and has had extensive first-hand experience with gender-based violence survivors. "In the case of women like Fatima, many of whom rely on these safe spaces for personal safety or to maintain stability in their daily lives, these restrictions can be detrimental."

Fatima was fortunate enough to receive consistent support from her therapy network in the form of remote assistance and online awareness and training sessions, which allowed her to replace the growing sense of uncertainty and isolation with productive, constructive activities. Many of these activities were done in groups, allowing her to continue growing the social network she had begun at the safe space. Meanwhile, she took advantage of the time in isolation to build additional skills that would later prove useful in her work.



# IRAQ COUNTRY OFFICE

UNFPA Iraq continues to provide essential support to more than 245,000 Syrians currently taking refuge in the country.

Iraq reported its first case of COVID-19 on February 24, 2020. As of 30 April 2020, a total of 2,084 cases had been reported, with 93 deaths. According to the Ministry of Health and WHO data, 47 % of the cases reported are women, the largest age bracket testing positive for COVID-19 is 30-39 years and the largest number of deaths reported is for patients between 60-69 years old.

On 17 March, the Iraq Crisis Cell imposed a curfew across the country resulting in the disruption of access to life-saving sexual and reproductive health services and the worsening of existing inequalities for women and girls.

However, UNFPA-supported reproductive health facilities and women centres continue to offer life-saving services and remote case management to women and girls in need.

UNFPA, in collaboration with WHO, supported the Ministry of Health with the development of the national guideline for the management COVID-19 during pregnancy and childbirth.

UNFPA will also support the Ministry of Health with the online training of health service providers, midwives, nurses and doctors on the mitigation measures in the delivery rooms and reproductive health clinics in response to COVID19 pandemic.

## REPRODUCTIVE HEALTH

### INDICATOR

INDICATOR	SINCE JANUARY
Primary health facilities	4
Health facilities that provide Emergency Obstetric Care (EmOC)	1
People reached with sexual/reproductive health services	26,378
Family planning consultations	2,233
Normal / assisted vaginal deliveries	410
C-Sections	155
Ante-natal care consultations	3,259
Post-natal care consultations	1,107
People trained on SRH-related topics	1,020

## GENDER-BASED VIOLENCE

### INDICATOR


INDICATOR	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	11
People reached with GBV programming / services	1,631
People reached with Dignity Kits	1,779
People provided with GBV case management	117
People reached with GBV awareness messages	2,461

## YOUTH SERVICES

### INDICATOR

INDICATOR	SINCE JANUARY
Number of functional youth centres	1
Beneficiaries reached with youth programming	1,264





**“ I have been a refugee for three years now. It has been a nightmare. The stress we live in, combined now with confinement due to the COVID-19 pandemic, has turned my husband into an abusive partner. There is nowhere for me to go. My only escape is the remote case management where I can vent and forget about my pain. One should never underestimate the feeling of love and care.**

— ROYA, who recently received GBV services at a UNFPA-supported facility

# JORDAN COUNTRY OFFICE

With 1.3 million Syrians nationwide, UNFPA Jordan continues to provide essential services to refugee and host communities nationwide.

Jordan reported its first case of COVID-19 on March 2, 2020. As of March 21, a 24/7 curfew restricting people from leaving their homes began, with only registered diplomats and individuals carrying mobility permits (such as health care professionals) allowed to move around Amman. International and governorate borders have been closed, with military and/or police enforcing the curfew and movement restrictions. As a result of these measures, UNFPA Jordan staff is working from home and focusing on ensuring continuity of essential SRH and GBV services, particularly within the Zaatari and Azraq refugee camps.

Due to the current situation, operations are now limited to time-critical, life-saving components that must be continued regardless of programme and operational disruptions. UNFPA Jordan has been working with WHO and the Ministry of Health to support the country's preparedness and response plan for COVID-19 and will provide essential supplies requested by the MoH. Almost all SRH services at the national level have been suspended due to the curfew and the restriction of movement. The population can only seek health services by calling emergency services. For GBV programmes, all WGSSs are currently closed, though remote GBV case management and hotlines are functioning.

## REPRODUCTIVE HEALTH

### INDICATOR

	SINCE JANUARY
Number of primary health facilities	17
Health facilities that provide Emergency Obstetric Care (EmOC)	2
People reached with sexual/reproductive health services	31,031
Family planning consultations	5,817
Normal / assisted vaginal deliveries	474
Ante-natal care consultations	8,635
Post-natal care consultations	1,598
People trained on SRH-related topics	28

## GENDER-BASED VIOLENCE

### INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	18
People reached with GBV programming / services	6,507
People provided with GBV case management	550
People reached with GBV awareness messages	5,245
People trained on GBV-related topics	28

## YOUTH SERVICES

### INDICATOR

	SINCE JANUARY
Beneficiaries reached with youth programming	2,469
Number of functional youth centres	1
People trained on youth-related topics	79



**“ We have never faced such circumstances. We have shifted all of our awareness work to WhatsApp. Youth are very eager to conduct initiatives in the street, but the main message we want to send is ‘stay at home’ to protect yourself, your family and your community.**

— MOHAMMAD ZAHER, who manages a youth centre in Zaatari

## The voice of youth.

Many vulnerable young people, such as young migrants, young refugees, those in detention, and young people living in crowded areas such as townships or slums, live in conditions that put them at greater risk of contracting COVID-19 where hygiene and sanitation are difficult to maintain. They also have limited access to technology and alternate forms of education and information, including how to mitigate exposure to disease. Refugee camps are also affected by the nationwide curfew in Jordan, which has caused the UNFPA/Questscope youth center — called A Space for Change — close down.

Although youth spaces in the Zaatari Camp for Syrian refugees have limited connectivity due to a weaker internet connection, 50 youth volunteers from the youth center are leveraging their WhatsApp groups to spread awareness messages to their communities and other youth and social networks. Mohammad Zaher, a 30-year-old man who is also the manager of the center, said: “Things are different now. We have never faced such circumstances. We have shifted all of our awareness work to WhatsApp. Youth are very eager to conduct initiatives in the street, but the main message we want to send is ‘stay at home’ to protect yourself, your family and your community.”

Zaher further shared that the quality of internet connectivity varies from one area to another in the camp, but many university students bought internet routers to ensure reliable access to the internet to continue their virtual education. Anwar, a 29-year-old woman, is one of the youth workers in the center who recognizes the importance of staying at home and raising awareness among her peers and community inside the camp. Her children are attending their classes online classes through the platforms offered by the Ministry of Education, however she also underscores the importance of developing new and innovative ways of maintaining youth engagement in humanitarian endeavors.

# LEBANON COUNTRY OFFICE

Despite the ongoing instabilities in Lebanon, UNFPA will continue to provide life-saving services to people in need.

The announcement of the COVID-19 health emergency in Lebanon on March 13 resulted in public mobilisation and lockdowns nationwide. These measures began easing in May, though some restrictions are still in place. All UNFPA projects were placed on hold from this period to be able to respond to immediate actions and needs. As of 26 May 2020, a total of 1,140 COVID-19 cases had been diagnosed. The COVID-19 emergency has been compounded by the rapidly deteriorating economic crisis that led to the devaluation of the Lebanese pound by more than 50%, decrease in purchasing power, inflation in prices, withholding depositors' money in banks, and other consequences. This economic and financial crisis is estimated to have increased the proportion of Lebanese living below the poverty line to around 60 percent and those living below extreme poverty to 20 percent, according to the World Bank. This situation has been compounded by the fact that Lebanon has been facing political, security, and financial instability, which has hindered the work of UNFPA.

## REPRODUCTIVE HEALTH

### INDICATOR

People reached with sexual/reproductive health services

People trained on SRH-related topics

### SINCE JANUARY

750

560

## GENDER-BASED VIOLENCE

### INDICATOR

People reached with Dignity Kits

### SINCE JANUARY

2,312

As a result of the current situation, UNFPA Lebanon's programmes and operations have been affected in several ways. Six ongoing IP agreements were put on hold due to the inability to support regular operations, and ten new IP agreements have been delayed in commencing. Lebanese Government line ministries have not been operational to provide guidance or clearance on some interventions, and some health facilities have been closed or less accessible due to restrictions of movement; there have thus been decreased provision of health care services, including RH services, during this period. Outreach and awareness raising activities at the community level were suspended. For GBV services, IPs have minimised their operations in the WGSSs, with in-person PSS and GBV case management put on hold. Dignity kit distribution has also been challenging during lockdowns, particularly those for the most vulnerable and securing the needed documentation to support procurement and distribution. Despite these challenges, there have been a number of service delivery modality changes that have enabled UNFPA Lebanon to continue to reach vulnerable women and girls throughout the country.





# TURKEY COUNTRY OFFICE

With the largest number of refugees worldwide, turkey continues to provide much needed assistance to displaced syrians throughout the country.

The COVID-19 outbreak in Turkey began with the first reported case on 11 March 2020, and has increased to 158,762 total cases as of 26 May 2020. The country has been under social distancing and movement restriction requirements from 17 March 2020, which have resulted in business closures and challenges in accessing essential services. Despite these challenges, UNFPA Turkey has continued to support populations in need, such as vulnerable women and girls and Syrian refugees, throughout the outbreak.

UNFPA Turkey has been supporting a total of six WGSSs in 2020 specifically targeting Syrian refugees. Due to the COVID-19 outbreak, some adjustments have been made in the modality of service provision in all six centres. While service provision has continued, three WGSSs (two in Hatay and one in Sanliurfa), which are integrated to the Migrant Health Centres of the MoH, continued providing services physically from the centres; while the other three in Istanbul, Eskisehir, and Diyarbakir have been telecommuting for two months.

Since the outbreak started in Turkey, UNFPA Turkey's service providers prioritised awareness raising activities on COVID-19 among beneficiaries through regular information sharing, primarily via phone. UNFPA has also started conducting bi-weekly online supervision and coordination meetings for personnel of the six WGSSs as well as IP managers to enable experience and information sharing between all partners and strengthen their capacities for better service provision during the outbreak.

## REPRODUCTIVE HEALTH

### INDICATOR

	SINCE JANUARY
Number of primary health facilities	6
People reached with sexual/reproductive health services	10,671
Family planning consultations	1,119
Ante-natal care consultations	649
Post-natal care consultations	297
People trained on SRH-related topics	116

## GENDER-BASED VIOLENCE

### INDICATOR

	SINCE JANUARY
Number of women and girls' safe spaces (WGSS)	6
People reached with GBV programming / services	38,203
People reached with dignity kits	6,667
People provided with GBV case management	252
People reached with GBV awareness messages	5,448
People trained on GBV-related topics	629

## YOUTH SERVICES

### INDICATOR

	SINCE JANUARY
Number of functional youth centres	4
People reached with youth programming	491
People trained on youth-related topics	40

## OTHER SERVICES

### INDICATOR

	SINCE JANUARY
Number of social service centers (SSC)	27
Number of Key Refugee Service Units (KRG)	9
Number of functional mobile clinics	12



# COORDINATION UPDATES

UNFPA continues to lead the GBV Area of Responsibility, ensuring that minimum standards are in place to prevent and respond to gender-based violence in emergencies.

To ensure good coordination when emergencies occur, the Inter-Agency Standing Committee (IASC) has introduced the Cluster Approach. Clusters are groups of humanitarian organizations, both UN and non-UN, in each of the main sectors of humanitarian action such as water, health and logistics. In contexts where the IASC Cluster Approach has been activated, UNFPA is mandated to co-lead the GBV Area of Responsibility (GBV AoR), a body part of the Global Protection Cluster, which is led by UNHCR.

As lead, UNFPA is accountable for working closely with national authorities, partners and communities, to ensure that minimum standards are in place to prevent and respond to gender-based violence in emergencies. In non-clustered and refugee contexts, UNFPA is co-leading with UNHCR.

UNFPA leads the GBV coordination mechanisms. Through its Damascus-based operation, UNFPA is the main lead, while in its Turkey Cross Border operation UNFPA co-leads with Global Communities. In its refugee response in Turkey and Iraq, UNFPA co-leads with the Government of Turkey and International Medical Corps (IMC) respectively. In Jordan and Lebanon, UNFPA co-leads the refugee GBV response with UNHCR.

In April, in the framework of the COVID 19 response, the Arab States Hub developed a [Donor Advocacy Brief on critical GBV services during COVID-19](#), with emphasis on the need to continue prioritizing all types of GBV, with the necessary flexibility to adapt services and ensure innovative methods to support GBV survivors and women and girls at risk. The GBV AoR also developed a "Guidance note on GBV service provision during COVID-19", to support frontline GBV service providers to ensure timely, dignified and safe GBV service provision during the COVID-19 pandemic. The hub also supported the GBV AoR in finalising a guidance note on [GBV service provision during COVID-19](#) to support frontline GBV service providers to ensure timely, dignified and safe GBV service provision during the COVID-19 pandemic. The document is available in English and Arabic. Finally, the hub engaged with the Regional Durable Solutions Working Group and its newly established Civil Documentation (CD) and Housel Land and Property (HLP) work stream and the No Lost Generation (NLG) and provided inputs to the draft advocacy report developed for the NLG pledging conference. The Hub also contributed to the review of the first draft of the Regional Situation Analysis on Women and Girls in the MENA region.

In Turkey, the Syria Task Force meeting was attended on the April 2 in Ankara, during which discussions focused on the WHO's regional guidance document on standards of PPEs and medical material supplies for COVID-19 and the report on 3RP Partner Support to Turkey's Response to COVID-19. The National GBV Expert also co-chaired a meeting in Istanbul that focused on COVID-19 and the service provision on GBV prevention and response with concentration on availability of health services. Meanwhile, the PSEA network meeting was held to discuss the revision of the workplan, following the interagency PSEA focal point training which took place in February 2020. Lastly, the National Protection Working Group meeting took place with the objective of observing the changing priorities and workplan due to COVID-19. The agenda was composed of the updates on Services Advisor and Activity Info, discussion on ongoing and planned needs assessments and discussion on outreach, case management and access to services.

In Jordan, the GBV IMS taskforce organized a learning session for case management agencies on remote safety planning for survivors of domestic violence. Moreover, a preliminary trend analysis was issued on GBV incidents during the first two weeks of lockdown in Jordan, showing that GBV case management agencies reported a 68% decrease in incidents reported compared to before the crisis. The drop in reported cases does not mean there are fewer incidents of GBV; on the contrary, women's organisations and specialised GBV agencies confirm that women are facing increased risk of domestic violence but they are also facing additional and specific barriers to seeking help. More information is available [here](#).



# DONORS AND PARTNERS

The essential services being delivered to Syrians region-wide would not have been possible without the generous support of our donors and partners.

## CURRENT DONORS

Australia, Bulgaria, Canada, Denmark, The European Commission, Finland, France, Iceland, Italy, Japan, Republic of Korea, the Russian Federation, Norway, Spain, Sweden, Switzerland and the United Kingdom.

**United Nations:** OCHA/CERF, UNDP, and UNFPA Emergency Funds.

## IMPLEMENTING PARTNERS

**In Syria:** Ministry of Health (MoH), Ministry of Higher Education (MOHE), Syrian Arab Red Crescent (SARC), Syrian Family Planning Association (SFPA), Agha Khan Foundation, Masyaf Charitable Association, Al Bir and Social Welfare Hama, Al Bir Charitable and Sociable Qamishly, Pan Armenian Charity Association, Al-Ihsan Charity Association, Al Bir and Al-Ihsan Charitable Association in Ras Alain, Albatoul Charity for Humanitarian Services, Islamic Charity Association – Aoun for Relief and Developments (AOUN), Monastery of Saint James the Mutilated (MSJM), Nour Foundation for Relief and Development, Syrian Commission for Family Affairs and Population, SCS, SEBC, OCHA / SHF. UNICEF, WFP, UNHCR, ILO, UNDP, UNHCR.

**In Lebanon:** Ministry of Public Health, Ministry of Social Affairs, Amel Association, Al Mithaq, Akkarouna, ABAAD.

**In Jordan:** IFH (Institute for family health), MOH (Ministry of health), JHAS (Society Aid Health Jordanian), JWU (Jordanian Women's Union), the National Council for Family Affairs (NCFA), YPEER (Youth Peer Education Network), Questscope, IRC, RHAS.

**In Iraq:** AL Massela, Harika, Zhian and Civil Development Organisation.

**In Egypt:** UNHCR, Ministry of Health and Population (MOHP), Ministry of Youth and Sports (MoYS), Etijah, Care International.

**In Turkey:** The Disaster and Emergency Management Presidency (AFAD) of the Prime Ministry of Turkey; Ministry of Foreign Affairs (MoFA); Ministry of Health (MoH); Ministry of Labour, Social Services and Family; ASAM (Association for Solidarity with Asylum Seekers and Migrants); KAMER (Women's Center Foundation); Osmangazi University; Harran University; YAHA (Youth Approaches to Health Association); PYD (Positive Life Association); Red Umbrella; Bilgi University.

**Turkey Cross-Border:** Ihsan RD, Syrian Expatriate Medical Association (SEMA), Syrian American Medical Society (SAMS), Shafak.

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## RELEVANT RESOURCES

[www.unfpa.org](http://www.unfpa.org)

[www.ocha.org](http://www.ocha.org)

[www.unhcr.org](http://www.unhcr.org)

<http://syria.humanitarianresponse.info>

