

UNITED NATIONS POPULATION FUND

REGIONAL SITUATION REPORT

FOR THE SYRIA CRISIS



ISSUE # 70
JUNE 2018



“ For UNFPA, working with and for young people has a long-standing tradition. Young people are at the forefront of the ICPD agenda for population and development - at the heart of the UNFPA mandate. UNFPA has been working with and for young people since our inception.

UNFPA Executive Director, Dr. Natalia Kanem

Briefing for Member States on “Generation Now”

July 20, 2018

IN THIS REPORT

OVERVIEW OF THE CONTENTS OF ISSUE # 70 / JUNE 1-30 2018.

The Regional Situation Report for the Syria Crisis offers a bird's eye view of UNFPA's operations within the context of the Syria Crisis.

The report is prepared by the UNFPA Regional Syria Response Hub in Amman, Jordan, and spans operations conducted by UNFPA offices in Syria, Jordan, Lebanon, Turkey, Iraq, and Egypt, in addition to operations conducted in Syria through cross-border modalities from Jordan and Turkey.

In addition to providing aggregated quantitative updates 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 reproductive health, gender-based violence, youth, and others.

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SNAPSHOT

THE SYRIA CRISIS

RESPONSE EFFORTS FROM ALL OPERATIONS.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	1,158,639
Family planning consultations	487,320
Normal / assisted vaginal deliveries	27,689
C-Sections	34,220
Ante-natal care consultations	328,544
Post-natal care consultations	14,626
People trained on RH-related topics	1,749

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with GBV programming / services	465,729
Population reached with Dignity Kits	243,660
Beneficiaries provided with GBV case management	10,695
Beneficiaries reached with GBV awareness messages	207,808
People trained on GBV-related topics	1,463

YOUTH SERVICES

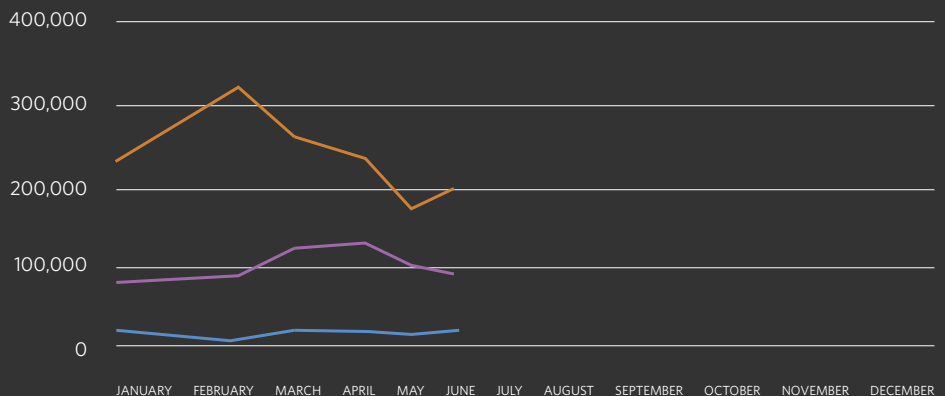
INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	67,073
Beneficiaries trained on youth-related topics	907



* Above figures reflect fully-supported service-delivery points. Inside Syria additional 917 primary healthcare facilities are being partially supported through the Ministry of Health.

LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly, non-cumulative)



- BENEFICIARIES REACHED WITH REPRODUCTIVE HEALTH SERVICES
- BENEFICIARIES REACHED WITH GENDER-BASED VIOLENCE SERVICES
- BENEFICIARIES REACHED WITH YOUTH SERVICES

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 continues to devastate the country and shows few signs of letting up in the near future.

Even in these circumstances, UNFPA believes that every Syrian woman, adolescent girl and child has the right to 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 hubs in Amman, Jordan and Gaziantep, Turkey for respective cross-border operations.

SNAPSHOT

THE SYRIA CRISIS

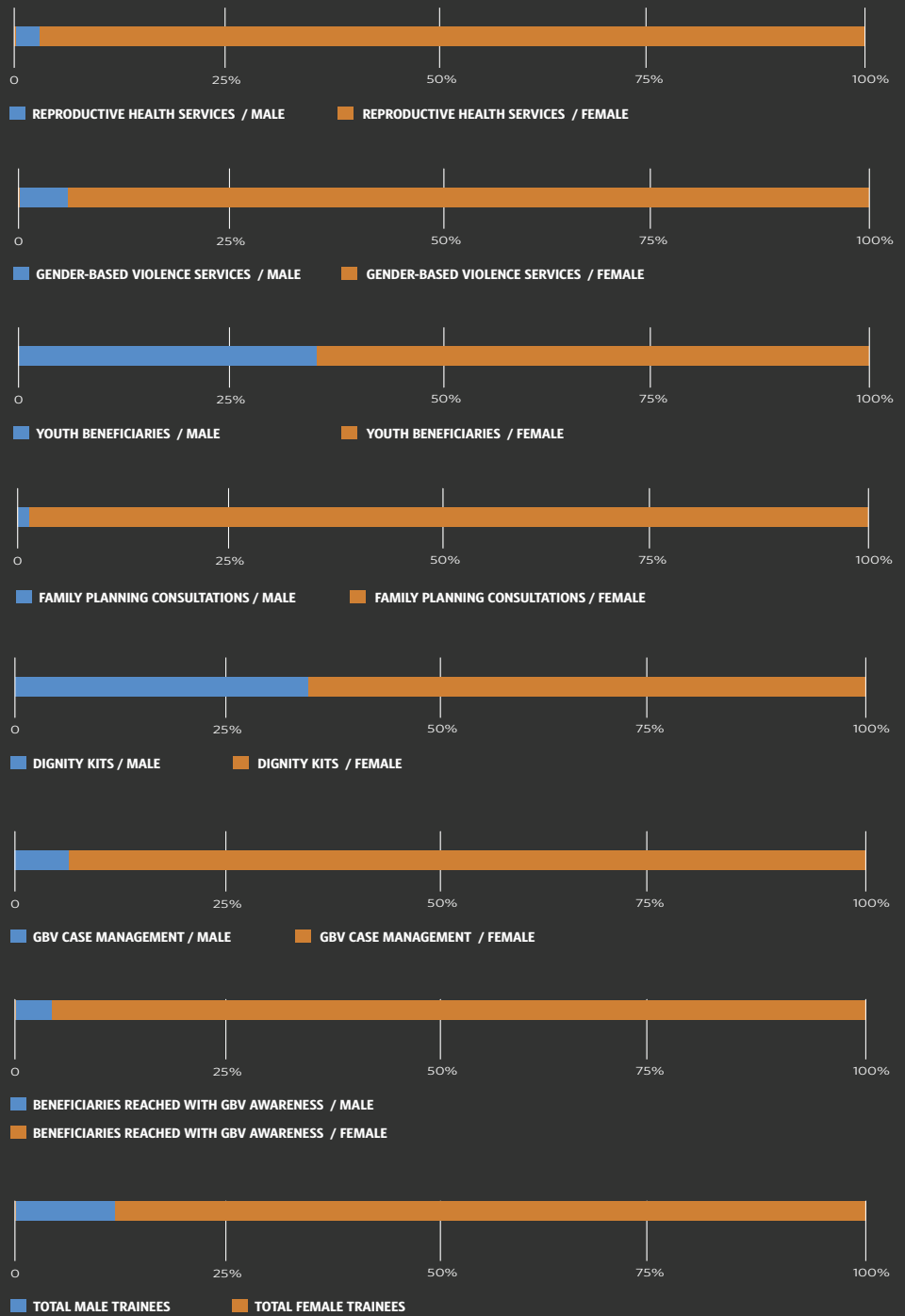
RESPONSE EFFORTS FROM ALL OPERATIONS.

Through its 132 Women and Girls Safe Spaces, 145 primary healthcare facilities, and 26 youth centers, UNFPA continues to provide essential reproductive health and gender-based violence services to women, girls, men and boys impacted by the Syria crisis.

While most beneficiaries reached by RH and GBV services are female, up to 15 percent of beneficiaries are males. Meanwhile, around 70 percent of youth beneficiaries and 60 percent of Dignity Kit recipients are females, while around 85 percent of beneficiaries receiving training services covering RH, GBV and youth topics are females.

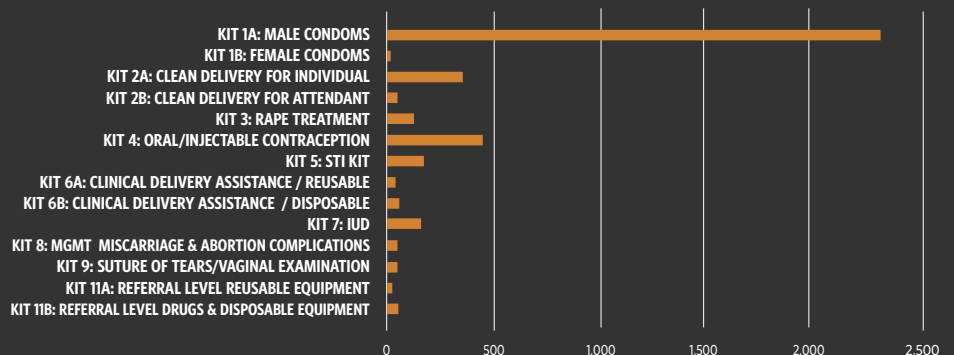
KEY INDICATORS DISAGGREGATED BY SEX

(cumulative since January)



TOTAL REPRODUCTIVE HEALTH KIT DISTRIBUTION

(cumulative since January)



COUNTRY REPORT
WHOLE OF SYRIA
 COMBINED RESPONSES FROM SYRIA COUNTRY OFFICE,
 CROSS-BORDER JORDAN AND CROSS-BORDER TURKEY.

SYRIA COUNTRY OFFICE

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	811,106
Family planning consultations	372,705
Normal/assisted vaginal deliveries	23,694
C-Sections	20,600
Ante-natal care consultations	243,417
Post-natal care consultations	37,429
Health facilities that provide Emergency Obstetric Care	27
Primary healthcare facilities	65
Partially-supported primary healthcare facilities	917
Mobile clinics	66
People trained on RH-related topics	701

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	38
Beneficiaries reached with GBV programming / services	178,783
Population reached with Dignity Kits	77,809
Beneficiaries provided with GBV case management	4,783
Beneficiaries reached with GBV awareness messages	88,191
People trained on GBV-related topics	581

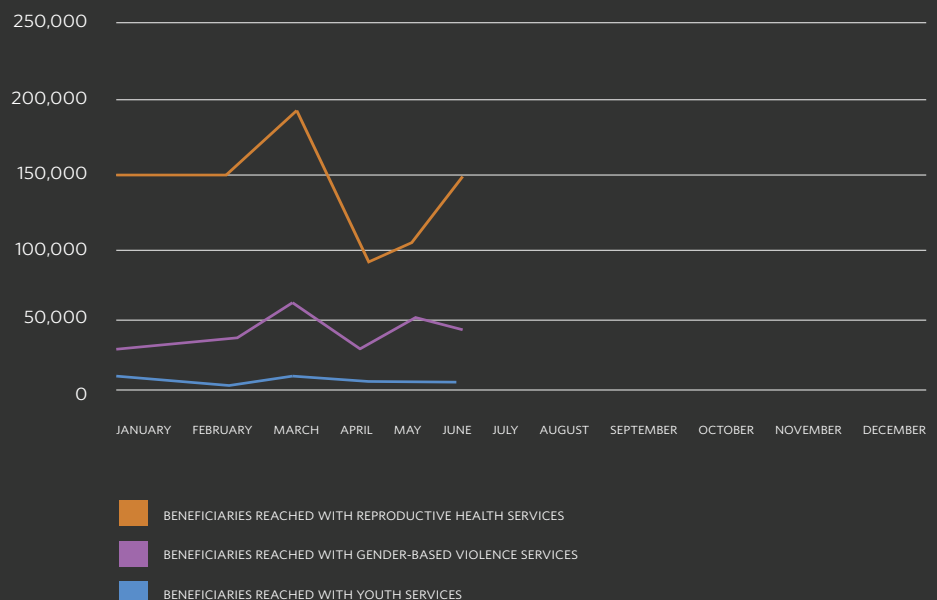
YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	16
Beneficiaries reached with youth programming	39,027

UNFPA Syria continues to respond to the aftermath of the hostilities in East Ghouta. With more than 158,000 people displaced, the situation remains alarming for civilians staying in the collective shelters, most of which do not have the capacity or infrastructure to accommodate the large number of people arriving.

UNFPA Syria is on the ground to meet the dire needs and to respond to the rapidly changing situation in the Afrin and East Ghouta area. UNFPA and its partners continue to provide integrated RH and GBV services, including family planning supplies and counselling, gynecological consultations, antenatal care including supplements, post-natal care, psychosocial support and referral for deliveries and comprehensive emergency obstetric and neonatal care.

LONG-TERM OVERVIEW OF SERVICE DELIVERY
 (monthly, non-cumulative)



HIGHLIGHT

FATIMA'S UPHILL JOURNEY TOWARD SELF-EMPOWERMENT

AFTER LOSING HER HUSBAND AND BATTLING BREAST CANCER, FATIMA CAME CLOSE TO GIVING UP ON LIFE. THE MOTHER OF TWO FOUND THE SUPPORT SHE NEEDED TO TAKE CONTROL OF HER FUTURE.

When 36-year-old Fatima lost her husband four years ago, her life was turned upside down. A mother of two girls of 17 and 14 years, she lived in a humble house in Damascus after being forced to abandon her home in Harasta.

"Life was not easy before his departure and became even more difficult after," explains Fatima. "He left me alone with two daughters without a home to shelter us. We found ourselves having to gather our strength and work together to survive."

Life for Fatima was rife with challenges, especially after she was diagnosed with breast cancer that caused her to haemorrhage money in medical expenses. As she explains, "I did not know what awaited me after I received my diagnosis, as I have virtually no possessions. I wanted to give up. Embracing death seemed like the best course of action at the time."

It was in the midst of this hopelessness that Fatima found the will to join one of the women's empowerment workshops supported by UNFPA Syria, which was hosted at her neighbourhood in Damascus. "It was a special day," explains Fatima. "I was visited by a friend who convinced me that it was time to heal and take control of my life, and she told me about the programme taking place near my house."

The workshop helped participants develop basic vocational skills, including handcrafts, knitting and sewing, and offered access to marketing and investment channels that allowed women to turn their skills into

revenue-generating ventures. During the workshop, Fatima found herself surrounded by women who shared her plight, many of whom had even suffered more severe traumas and found the strength to bounce back and embrace life.

After completing the training within a few weeks, Fatima participated in an exhibition showcasing the products she had created, all of which were highly praised by visitors. It was to Fatima's great surprise that she received an offer from the Excellence Association to join their team as a professional trainer, where she will have the opportunity to help other women facing similar challenges.

"It was an ideal opportunity," explains Fatima. "Receiving aid is beautiful, but giving it is even more rewarding. This training renewed my faith in life and allowed me to feel a sense of productivity that I had never felt before. I no longer have to suffer the indignity of begging for work or face the risk of being exploited. From today until a hundred years from now, this will be remembered as the moment that defined my life."

Historically, women have and continue to play a crucial role in the economic development of nations, be it in both developed and developing communities. More often than not, their contributions go unnoticed, particularly within predominantly patriarchal social structures that have rigidly archaic definitions of economics. The result is that women are frequently disadvantaged when it comes to economic

opportunities and education — a reality that UNFPA and other humanitarian actors have endeavoured to change over the past decades.

For UNFPA, empowering women and girls is a key priority and an integral step toward gender equality. With the aid of its implementing partners in Syria, UNFPA has been able to develop a multitude of programmes to help women tap into their potential, achieve their personal objectives, and address gender bias on an institutional level.

Since the onset of the crisis in Syria, women and girls have also had to grapple with the uncertainties of displacement, which only exacerbated the challenges they face on a day-to-day basis. Efforts by humanitarian organisations to diversify and scale up means of protection seem to be in a constant race against regular reports of the hardships that women and girls face due to the conflict and the long-term consequences of the crisis. Unlawful sieges continue to place communities at risk by restricting access to food, health services and aid supplies, while women and girls continue to suffer the effects of seven years of conflict, including disruption of community networks, safety nets and rule of law.

Meanwhile, the risks of gender-based violence against women and girls have increased significantly, with child and forced marriage becoming a prevalent coping mechanism against economic hardship and an ever-growing likelihood of family violence, sexual assault or exploitation.

“ I no longer have to suffer the indignity of begging for work or face the risk of being exploited. From today until a hundred years from now, this will be remembered as the moment that defined my life.

Fatima from Damascus Governorate, Syria

Fatima received vocational training at a facility supported by UNFPA Syria.



UNFPA's Mission

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

UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive healthcare 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 inside Syria and in host countries, including by advocating for human rights and gender equality, to better cope with and recover from the crisis.



COUNTRY REPORT
WHOLE OF SYRIA
 COMBINED RESPONSES FROM SYRIA COUNTRY OFFICE,
 CROSS-BORDER JORDAN AND CROSS-BORDER TURKEY.

CROSS-BORDER JORDAN

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	35,009
Family planning consultations	16,296
Normal/assisted vaginal deliveries	3,757
C-Sections	2,071
Ante-natal care consultations	14,306
Post-natal care consultations	6,129
Health facilities that provide Emergency Obstetric Care	6
Primary healthcare facilities	9
People trained on RH-related topics	107

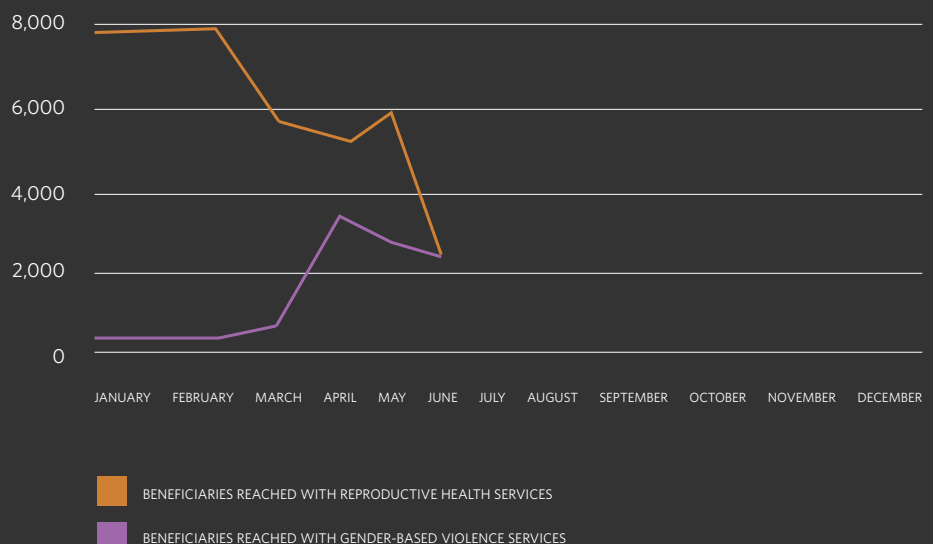
GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	16
Beneficiaries reached with GBV programming / services	10,077
Beneficiaries provided with GBV case management	398
Beneficiaries reached with GBV awareness messages	3,069
People trained on GBV-related topics	59

UNFPA continues to provide services to Syrians located in areas inside Syria that are not controlled by the Syrian government, operating cross-border from Jordan. With primary healthcare facilities and Women and Girls Safe Spaces available to people in need, operations from cross-border Jordan continue to serve as a lifeline to pregnant women, adolescent girls, and survivors of gender-based violence, delivering services to areas where access to aid may be difficult to many.

Given the escalation of the security situation during the last week of June, cross-border operations from Jordan have been significantly affected. In Dara'a, the provision of SRH and GBV services has entirely stopped due to the loss of facilities and safe spaces, while the loss of communication with the staff on the ground impeded the collection of data from the field. UNFPA continued to provide services through the implementing partner in Quneitra, which suffered a large influx of internally-displaced people from Dara'a.

LONG-TERM OVERVIEW OF SERVICE DELIVERY
 (monthly, non-cumulative)



HIGHLIGHT

ART AS A LIFELINE DURING TIMES OF STRIFE

SIMAR, A YOUNG WIDOW WITH TWO CHILDREN, STRUGGLED WITH LONELINESS AND DEPRESSION DUE TO HER DIRE ECONOMIC SITUATION. HER PASSION FOR ART AND DESIGN GAVE HER A SECOND CHANCE.

During humanitarian crises, a multitude of factors converge to place women at greater risk of violence or exploitation. With men absent, injured, killed, or unable to find employment the burden of responsibility often falls heavier on the shoulders of women and girls to maintain households.

However, these additional responsibilities do not necessarily lead to greater empowerment or freedom for women. Invariably, it leads to an increase in workload and sometimes to additional abuse as men resist a perceived threat to their dominance.

This is a reality that UNFPA has been working to change since the onset of the crisis. By helping women attain safe and dignified self-reliance, and by creating a network of support that allows women facing similar issues to collaborate, humanitarian actors can help establish foundational safety nets that can often redefine the course of people's lives.

Nearly eight years into the crisis, Simar found herself a young widow with two children under her care. Her loss was especially difficult considering that her late husband was the primary breadwinner in the family, and she soon found herself in dire economic straits.

"It is difficult enough losing a husband in such a cruel and unforgiving environment," explains Simar. "Not only do you have to deal with the social stigma of being a 'widow,' but you also find yourself struggling to make ends meet. All I wanted was to provide a decent living for my children without having

to give up my dignity."

Simar also suffered from anxiety due to her growing sense of loneliness. Living by herself with two children in southern Syria, she found little solace in her narrowing social circle, and her feelings of isolation were compounded by the lack of security she felt due to the growing political tensions in the area.

Her lifeline, however, was her passion for art and design. As a creator of handmade products, she consistently sought outlets for her creativity and was adamant about developing her skills into a lifelong career. Upon seeing her work, one of her neighbors — who regularly attended sessions at a women and girls safe space supported by UNFPA through cross-border Jordan — encouraged her to participate in the capacity building workshops organized at the center.

"I was hesitant at first," explains Simar. "It quickly became clear to me that it was the best decision I could have made. I found a network of support that I desperately needed in my state of mind at the time, and the workshops allowed me to organize my time better in order to develop my skills and learn from people who have had much longer experience doing what I do."

Creating products for the women and girls who sought help from the center gave Simar a sense of purpose. She found that, through her art, she had a unique ability to inspire and heal those who have experienced trauma, in addition to transferring her skills

to other women who wished to broaden their horizons.

It was not very long before Simar's talent evolved into an income-generating project. The beauty of her creations quickly garnered the attention of those who frequented the center, many of whom were eager to help her achieve financial independence by marketing and expanding her products. This, in turn, had an immense impact on her state of mind, and she found herself slowly coming out of her isolation.

"When you are surrounded by the right people, any sense of loneliness or isolation disappears. The people who flocked to express support and interest in my work were all recovering from their own traumas, which allowed me to share my experiences with them without feeling judged or ostracized."

Similarly, those who have had the opportunity to learn under Simar's guidance have expressed their admiration of her strong and generous character, particularly those who have had no previous experience with art and design and were able to cultivate a basic familiarity with a field they previously thought was alien to them.

"She is a remarkable woman with plenty to offer those around her," explains a case manager at the safe space. "All the potential that was previously hidden by her fear and isolation has disappeared to reveal the dynamic, outgoing and incredibly giving person underneath, which is a tremendous inspiration to those around her."

“ When you are surrounded by the right people, any sense of loneliness or isolation disappears. The people who flocked to express support and interest in my work were all recovering from their own traumas.

Simar from Quneitra Governorate, Syria

Simar received capacity building training at a women and girls safe space supported by UNFPA through cross-border operations managed from Jordan.

COUNTRY REPORT

WHOLE OF SYRIA

COMBINED RESPONSES FROM SYRIA COUNTRY OFFICE, CROSS-BORDER JORDAN AND CROSS-BORDER TURKEY.

CROSS-BORDER TURKEY

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	113,690
Family planning consultations	45,527
Normal/assisted vaginal deliveries	5,014
C-Sections	2,080
Ante-natal care consultations	35,228
Post-natal care consultations	7,052
Health facilities that provide Emergency Obstetric Care	9
Primary healthcare facilities	10
Functional mobile clinics	11
People trained on RH-related topics	75

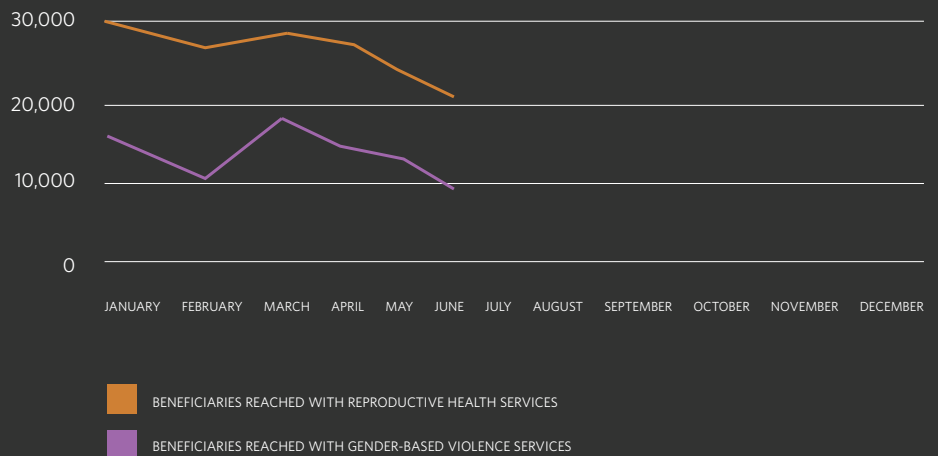
GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	11
Beneficiaries reached with GBV programming / services	62,497
Population reached with Dignity Kits	19,291
Beneficiaries provided with GBV case management	410
Beneficiaries reached with GBV awareness messages	32,415
People trained on GBV-related topics	296

UNFPA Turkey's Cross Border program has experienced significant changes during the month of May that resulted from shifting lines of control in areas of operation. Three supported health facilities in formerly besieged areas of Homs were evacuated and service provision discontinued at those locations. Evacuations were conducted according to approved procedures that ensure the possibility of continued humanitarian assistance in those areas as well as accountability to stakeholders.

Service provision through Turkey Cross-Border hubs supported facilities is continuing to place a strong emphasis on emergency response to displacements that have taken place. Furthermore, increased focus has been placed on ensuring services that are friendly to people with disabilities (PWD) at supported facilities. To this end, Turkey Cross-Border hub has worked with IPs to develop a list of action points that are aimed at improving accessibility and inclusion of PWD.

LONG-TERM OVERVIEW OF SERVICE DELIVERY
(monthly, non-cumulative)



THE FREEDOM OF KNOWING BETTER

LEILA IS A 24-YEAR OLD WOMAN FROM IDLEB WITH TWO CHILDREN AND IS NOW PREGNANT WITH HER THIRD CHILD. A SURVIVOR OF CHILD MARRIAGE, SHE AND HER COMMUNITY WERE RECIPIENTS OF AWARENESS RAISING ACTIVITIES FROM OUTREACH TEAMS WHO DISSEMINATED BASIC MESSAGES ON GENDER-BASED VIOLENCE PREVENTION AND PROVIDED INFORMATION ON AVAILABLE SERVICES AT A FACILITY SUPPORTED BY UNFPA THROUGH CROSS-BORDER TURKEY. LEILA DECIDED TO VISIT THE FACILITY, WHERE SHE WAS RECEIVED BY A CASE MANAGER.

“ I was a 15-year-old girl when I got married to my first husband. I stayed with him for four years, and we had two children. But sadly, he died from a fatal traffic accident when I was 19. His death and the predicament of being left alone with the children led to my depression. I was so young, and I did not know how to provide for the children by myself. Luckily my family helped, but I was always afraid, always anxious and the sadness of my husband’s death never left me.

This lasted for four years, until I met a young man, he was only 18 at the time and a new arrival in the camp here, but he was kind and caring. We loved each other very much and eventually got married, but soon afterward I discovered that he did not want to work. He would find any excuse to just stay home all day and do nothing. I later discovered that it was his status here as a newly displaced person that was making him uncomfortable. So I tried to get money for the house, but he didn’t like that either. We would often argue about this and he would become angry and physically threatening.

Sometimes after we argued he would leave the house for days, even weeks. When I became pregnant again, he said he did not want the baby and he left, this time for good. I was so hurt and confused, how could I take care of three babies by myself? My family is also poor; they cannot support another child. I now feel ostracised by my own community; they all believe that I am the one to blame for my situation.

She [the case manager] treated me with so much compassion and understanding. We had several sessions to help me relax and adjust to life. She then helped me to develop a plan that will allow me to take care of myself and my children. I am now attending sewing and knitting classes at a women and girls safe space where she helped me register.

God willing, I will be able to use this new skill to help provide for my family. After my sessions with the case worker, I now feel better, with more self-confidence and a more positive view of life. My experiences have taught me many things, but most important is that I have to be strong and independent for my family.



COUNTRY REPORT

EGYPT

WITH NEARLY HALF A MILLION SYRIANS LIVING ALONGSIDE EGYPTIANS, UNFPA CONTINUES TO PROVIDE ASSISTANCE TO SYRIAN REFUGEES IN THE COUNTRY, FOCUSING ON ISSUES RELATED TO GENDER-BASED VIOLENCE.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	2,244
Family planning consultations	400
Ante-natal care consultations	88
Functional mobile clinics	12

GENDER-BASED VIOLENCE

INDICATOR

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	10
Beneficiaries reached with GBV programming / services	7,295
Beneficiaries provided with GBV case management	546
Beneficiaries reached with GBV awareness messages	2,891

YOUTH SERVICES

INDICATOR

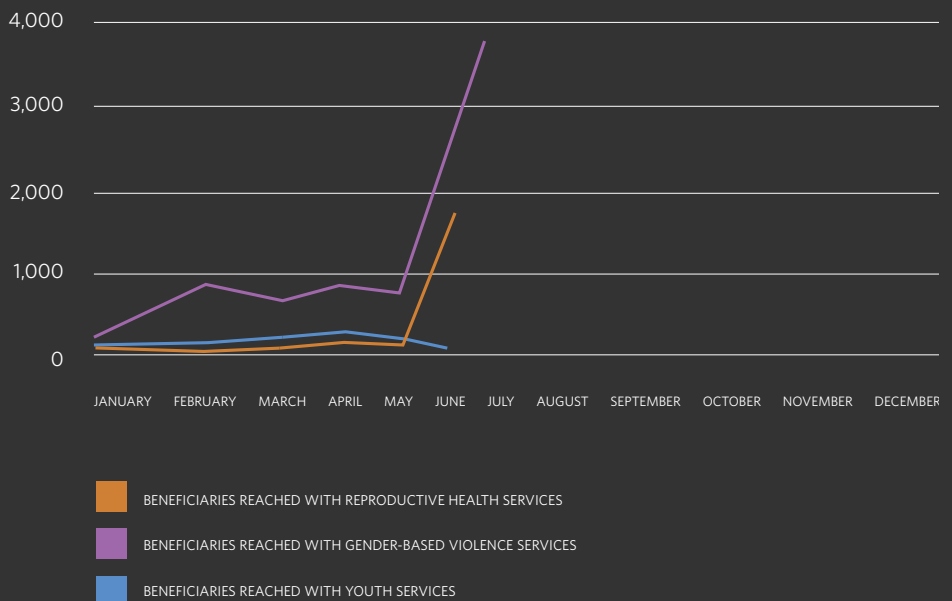
INDICATOR	SINCE JANUARY
Beneficiaries reached with youth programming	1,161

Egypt remains a destination and transit country for refugees and asylum-seekers, most of whom live in urban areas. The country continues to generously host Syrian refugees, despite the absence of a land border with Syria. Currently, there are 127,414 Syrian refugees registered with UNHCR Egypt.

Egypt constitutes a successful model with regards to the social inclusiveness dimension. The country hosts nearly half a million Syrians who live alongside Egyptians in various areas, sharing public services, resources and many of the privileges afforded to local citizens.

Among refugees in Egypt, women and girls, boys, adolescents, and unaccompanied and separated children face disproportionate risks. According to UNHCR, 94 percent of the Syrian population in Egypt have been identified as either highly or severely vulnerable. UNFPA Egypt continues to provide essential services to Syrians, focusing on prevailing social predicaments associated with forced migration such as various forms of gender-based violence.

LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly, non-cumulative)



HIGHLIGHT

THE COURAGE TO TAKE A STAND

AFTER ESCAPING THE CONFLICT IN SYRIA AND TAKING REFUGE IN EGYPT, AMINA FOUND IT IMPOSSIBLE TO LEAD A NORMAL, INDEPENDENT LIFE IN THE SHADOW OF HER ABUSIVE BROTHER.

Amina is an 18-year-old Syrian girl who came to Egypt as a refugee in 2012. Shortly after arriving, her father had a heart attack and passed away, leaving her and her five siblings dependent on intermittent grants by civil society organizations and what little support they received from neighbours.

These circumstances negatively impacted Amina's mental health tremendously, who felt as if she had lost her dignity after having to rely on the support of others in order to afford life's basic necessities.

"I was definitely in deep depression," explains Amina. "Taking handouts from others was something I never thought I'd have to do, and I constantly felt as though life has painted me into a corner. The situation also began changing my siblings. The tension in our family was growing by the day, and anger became the most dominant emotion."

After three years in this situation, Amina's older brother was finally able to find a stable job and became the primary breadwinner in the family. This made her believe that her life would finally take a turn for the better, as her number one priority was to retrieve her old documents from Syria and complete her higher education in Egypt.

This, however, was far from Amina's reality. Her brother had always grappled with control and anger issues, and she often found herself the unwitting target of his aggression. Under his newfound dominion as the sole provider

in the family, he severely restricted her movements, and she was barely allowed to leave the house. Too often, he would physically assault her at the slightest provocation, and the notion of completing her education was unacceptable to him.

"This is the reality of so many girls who fled Syria during the war," explains Amina. "We often end up living in house arrest and are abused by the men in our families, unable to pursue any semblance of a normal life."

Amina eventually learned of a women and girls safe space supported by UNFPA Egypt, where she managed to seek help escaping her situation. It was there that she found the support system she desperately needed and learned from the social workers about a program being run by a UNFPA implementing partner to help women and girls in similar predicaments.

"When I first arrived, I was a wreck," says Amina. "I had very low self-esteem and I had developed serious anger issues that were already taking over my character. I had also embraced solitude as a lifestyle and found it exhausting to spend time with other people."

The social workers at the centre reached out to Amina's mother, who convinced her to visit the centre and have a brief session with a case manager. Several discussions took place before Amina agreed to undergo intensive therapy to deal with her

depression, and she was eventually enrolled into a youth support group and art therapy workshops. Amina also needed a constructive outlet for her emotions, so she joined a theatre workshop designed to help survivors channel their negative feelings through interactive performances.

"I was truly surprised by how quickly these workshops began to help me," explains Amina. "I had given up on the idea of finding my voice again and openly discussing my depression, but all of the women in the group had similar – if not more heart-breaking – stories to mine and we simply allowed ourselves to embrace the healing process together."

The case workers also convinced Amina's mother that she needs to resume her education in order to break free of her current situation and carve an independent life for herself. Fortunately, the necessary documents were eventually retrieved from Syria, and with the support of her mother she was able to confront her brother and end the cycle of abuse that tormented her.

"Confronting him was the most difficult part, but thanks to my mother it was made possible. Sometimes, it is a simple matter of learning how to take a stand and say 'no.'"

Recently, Amina made her first appearance on stage in a stunning rendition of "A Girl from Mars." Almost a woman reborn, she positively glowed on stage, and received a standing ovation for her captivating performance.

“ Taking handouts from others was something I never thought I'd have to do, and I constantly felt as though life has painted me into a corner.

Amina from Aleppo Governorate, Syria

Amina has been receiving services at a women and girls safe space operated by UNFPA Egypt.

COUNTRY REPORT

IRAQ

UNFPA IRAQ CONTINUES TO PROVIDE ESSENTIAL SERVICES TO REFUGEES IN BASIRMA, DRASHAKRAN, KWARGOSK, AND QWSHTAPA CAMPS.

Currently, around 250,000 Syrian refugees are seeking safety in camps and host communities in Iraq. UNFPA supports nine women community centres, sixteen health facilities, and five youth centres serving the refugee population in the Kurdistan region of Iraq. UNFPA ensures that antenatal, postnatal, and emergency obstetric referral services are offered. In addition, UNFPA provides reproductive health kits and supports referral services.

Despite the availability of reproductive health (RH) services to all women, some communities continue to refuse all forms of reproductive health services. To address this, the RH unit staff conduct outreach visit to the pregnant women to provide information at the very least.

UNFPA in Iraq continues to coordinate with other gender-based violence (GBV) prevention and response service providers targeting refugees. Staff from the RH Units have been trained on the GBV Standard Operating Procedures for the Kurdistan Region, reporting an increased ability to identify GBV cases, provide information, and make referrals to service providers using a survivor centred approach.

Response activities are targeting refugees in the eight primary camps in Iraq: Basirma, Drashakran, Kwrgosk, and Qwshtapa in Erbil Governorate, Domiz 1, Domiz 2, Gawilan in Dohuk Governorate and Arbat in Suleymania Governorate with programs that span vocational training for women, awareness sessions for women and adolescent girls, lectures on topics related to reproductive health and gender-based violence, and various community engagement activities.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	16,058
Family planning consultations	4,490
Normal/assisted vaginal deliveries	2,547
C-Sections	982
Ante-natal care consultations	3,437
Post-natal care consultations	1,348
Health facilities that provide Emergency Obstetric Care	16
Primary healthcare facilities	8

GENDER-BASED VIOLENCE

INDICATOR

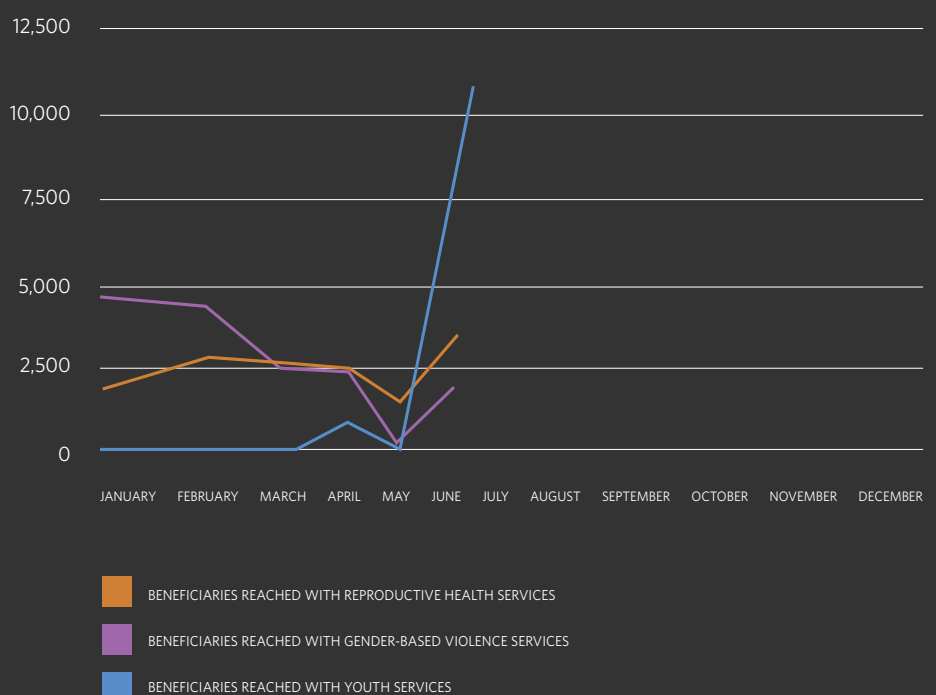
INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	9
Beneficiaries reached with GBV programming / services	22,627
Population reached with Dignity Kits	96
Beneficiaries provided with GBV case management	686
Beneficiaries reached with GBV awareness messages	15,528

YOUTH SERVICES

INDICATOR

INDICATOR	SINCE JANUARY
Functional youth centres	4
Beneficiaries reached with youth programming	11,032

LONG-TERM OVERVIEW OF SERVICE DELIVERY
(monthly, non-cumulative)



HIGHLIGHT

OVERCOMING THE STIGMA OF INFERTILITY

AFTER LEARNING OF HER INFERTILITY, RAMA ENTERED A VICIOUS CYCLE OF DEPRESSION, NEGLECT AND ABUSE. SHE EVENTUALLY FOUND THE SUPPORT SHE NEEDED TO REGAIN HER SELF-CONFIDENCE.

Many women grow up dreaming about the day when they find their significant other, get married, have children, and create a haven they can call home. However, not all women are able to complete their dreams of bringing life to the world.

"Infertility can rock your very foundation: your sense of control over your future, your faith in your body, and your feelings about yourself as a woman," said Rama, a 43-year-old Syrian refugee from Damascus.

At the age of 30, kindergarten teacher Rama met a man and fell in love. "It was perfect back then. We fell in love, decided to get married and start a family. It was all I was looking forward to; after all, I love children, and that's why I worked at a kindergarten," she added.

Things did not go as planned for her and her husband: a year into their marriage and after a series of doctors' visits and tests, the once-happy family discovered that Rama was unable to conceive. "When people find out about my infertility, their facial expressions change; the smile on their face is immediately replaced by an awkward silence that screams: "Something is wrong with you," she explains.

Years passed and the situation kept worsening for the family-of-two. Rama eventually discovered that her husband had begun

having an affair, and his attitude toward her had shifted considerably. He had taken to calling her "less of a woman," relegating her to the role of a housekeeper and preventing her from leaving the house. Her sadness and despair were immeasurable to the extent that the idea of committing suicide haunted her day and night.

"I eventually summoned the strength to ask for a divorce, but he refused, again and again," explains Rama. "I resigned myself to suffer in silence and to hope that one day I will manage to break free."

In 2011, eight years into the marriage, the war broke out in Syria and the family was forced to leave Damascus. In 2013, they sought refuge in the Kurdistan Regional of Iraq, more specifically in the Gawelan camp, home to more than 8,300 Syrian refugees.

The burden of displacement took its toll on Rama as it exacerbated her sense of loneliness and rejection and led her into a complete state of depression. One day, she saw a leaflet in front of her tent about the UNFPA-supported Women's Social Centre at the camp. The leaflet presented the services offered to women, especially those in need of psychosocial support. Despite her lack of hope, she decided to take a chance.

"At the centre, the social workers told me that I am not alone – that I may suffer in silence, but I am far from alone. They restored some of the faith I had lost in myself and made me feel that I should not be judged by my ability to procreate," recalls Rama of her first visit to the centre. "They made me feel as if I had a place in the world."

The social workers sheltered her and provided her with advice and knowledge on infertility. They also encouraged her to attend the recreational activities and life-skills sessions offered, which she happily took in the hope of ending her isolation.

"The centre and social workers not only held my hand when I needed it, but they also reached out to my husband and convinced him to attend the focus group discussions for men and young boys on gender-based violence and women's rights," explains Rama.

"I have learned to live with the idea that I am unable to have children, so now I fill my time with arts and crafts instead of feeling sorry for my situation. My husband has also improved considerably. His disrespectful statements have stopped and he is slowly embracing the situation with a more compassionate and understanding attitude," added Rama, smiling.

“ I have learned to live with the idea that I am unable to have children, so now I fill my time with arts and crafts instead of feeling sorry for my situation.

Rama from Northern Syria

Rama has been receiving services at a women and girls safe space operated by UNFPA Iraq.



COUNTRY REPORT

JORDAN

UNFPA JORDAN CONTINUES TO PROVIDE MUCH NEEDED SERVICES TO SYRIAN REFUGEES NATIONWIDE.

Jordan is currently hosting more than 1.3 million Syrians, including 655,000 registered refugees, who face increasing vulnerability as their savings, assets and resources are long exhausted. Providing for their needs and ensuring their access to basic reproductive health and gender-based violence services is among the top priorities of UNFPA Jordan.

According to the 2015 population census, the total population of Jordan was estimated at 9.531 million, including 1.265 million Syrians, who represent 13.2% of the overall population.

Approximately 79% of Syrian registered refugees, representing 516,000 people, live in host communities in urban and rural areas of Jordan. The remaining 21% is settled in camps, either in Azraq, Emirati Jordanian Camp, or Za'atari. The highest concentration of refugees is found in the northern governorates of Amman, Irbid, Mafraq and Zarqa.

UNFPA Jordan has been providing essential reproductive health and gender-based violence prevention services to Syrian refugees throughout the kingdom, whether in refugee camps or in host communities.

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	70,853
Family planning consultations	11,594
Normal/assisted vaginal deliveries	870
C-Sections	161
Ante-natal care consultations	20,012
Post-natal care consultations provided	4,646
Health facilities that provide Emergency Obstetric Care	3
Primary healthcare facilities	15
People trained on RH-related topics	196

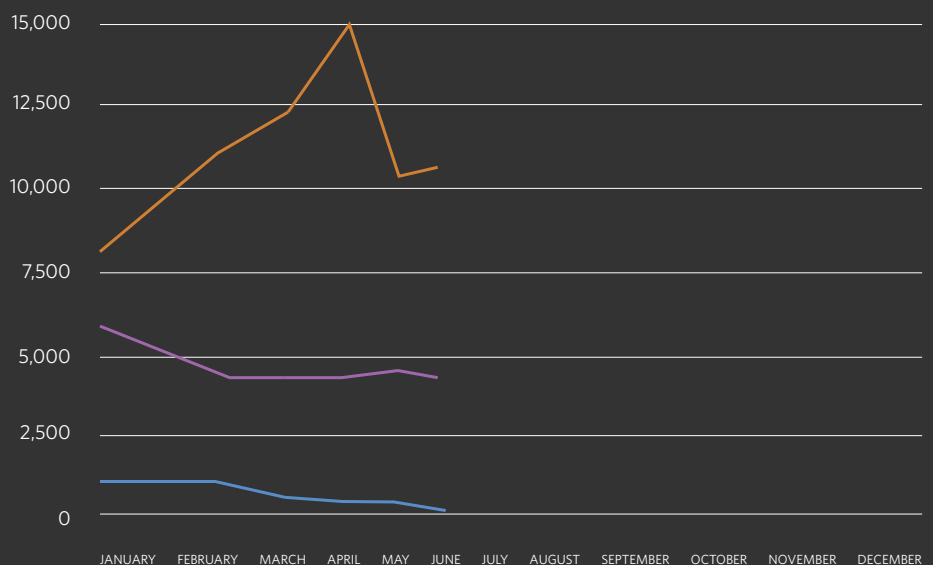
GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	20
Beneficiaries reached with GBV programming / services	19,948
Beneficiaries reached with Dignity Kits	9,817
Beneficiaries provided with GBV case management	2,604
Beneficiaries reached with GBV awareness messages	7,229
People trained on GBV-related topics	57

YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	1
Beneficiaries reached with youth programming	3,484
People trained on youth-related topics	75

LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly, non-cumulative)



- BENEFICIARIES REACHED WITH REPRODUCTIVE HEALTH SERVICES
- BENEFICIARIES REACHED WITH GENDER-BASED VIOLENCE SERVICES
- BENEFICIARIES REACHED WITH YOUTH SERVICES

“

We are girls like all other girls. We're well-mannered, respectful and we want to pursue our education and become self-sufficient. But there is one negative practice in our communities that keeps us from achieving our dreams: girls are subjected to child marriage. It is a phenomenon that is even more widely practiced in the camp.

I don't want to get married now. I want to become an architect.

My name is Yanal and I am 16 years old. I am a resident of the Zaatari Camp in Jordan. I am an advocate against child marriage, the destructive consequences of which I learned about at a youth center supported by UNFPA Jordan.

When I attended the trainings on the subject, they gave us a comprehensive idea on the issue of child marriage, its dangers and its adverse effects on girls. They told us how girls are often taken out of school and thrust into a life of hardship and responsibility long before they are ready. Sometimes, they are forced to do it, often ending up with much older men. We try to give them advice. We tell them that they have their entire lives ahead of them and all the time in the world to marry.

In the past, child marriage was regarded as normal by my parents. Even I used to think that, when I turned 16 or 17, I'll get married just as my cousins had done. If I hadn't gone to the trainings, and if I hadn't opened up to my parents about my dream of becoming an architect, they would have probably seriously considered child marriage.

I would love to go on TV, to appear on all channels simultaneously, and to tell all girls around the world that marriage under the age of 18 is a violation of their rights and a danger to their lives. I want every girl to live her childhood to its fullest and to let nothing stand in the way of her dreams.

Yanal from Quneitra Governorate, Syria

Yanal received a training on child marriage at a youth center in Zaatari Camp supported by UNFPA Jordan.



COUNTRY REPORT

LEBANON

WITH THE HIGHEST PER CAPITA NUMBER OF REFUGEES IN THE WORLD, UNFPA CONTINUES TO PROVIDE VITAL SERVICES TO SYRIANS NATIONWIDE.

Since the onset of the Syria crisis in 2011, Lebanon has continued to be a generous host, welcoming around 1.5 million displaced Syrians — the highest per capita number of refugees in the world.

Given the significant refugee-per-capita ratio and the undue strain the crisis has placed on Lebanon’s economy and services, UNFPA Lebanon continues to provide a wide array of programmes and services to displaced Syrians in Lebanon.

More than 75 percent of refugees in Lebanon are women and girls, making it all the more vital to provide them with essential reproductive health services as well as programmes to respond to and prevent gender-based violence.

Since the beginning of the crisis, UNFPA Lebanon has continually worked on enhancing coordination, expanding partnerships, and assessing needs in close collaboration with key humanitarian actors including pertinent agencies within the United Nations.

REPRODUCTIVE HEALTH

INDICATOR

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	5,575
Family planning consultations	1,418
Normal/assisted vaginal deliveries	24
C-Sections	109
Ante-natal care consultations	1,550
Post-natal care consultations provided	411
Primary healthcare facilities	3
Mobile clinics	1
People trained on RH-related topics	67

GENDER-BASED VIOLENCE

INDICATOR

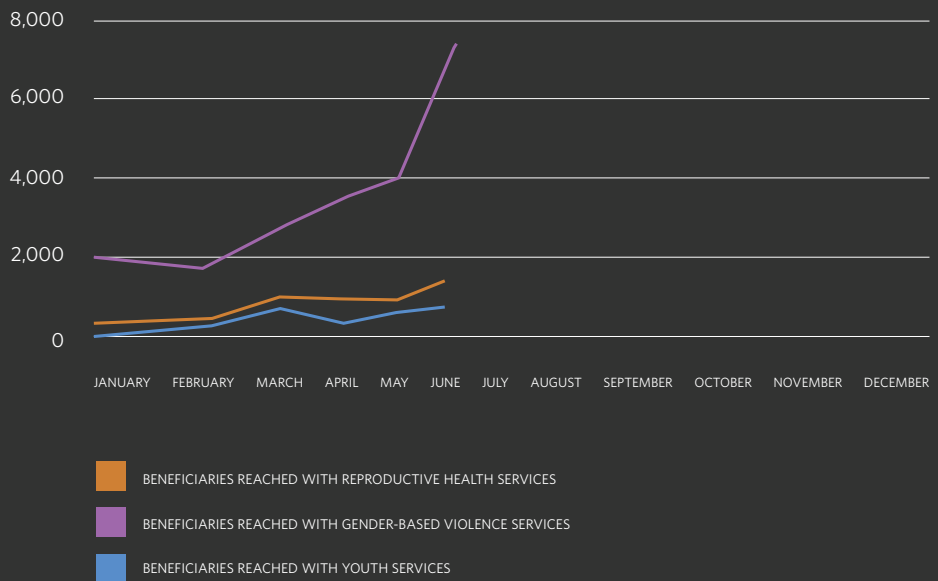
INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	3
Beneficiaries reached with GBV programming / services	20,289
Beneficiaries provided with GBV case management	93
Beneficiaries reached with GBV awareness messages	18,879
People trained on GBV-related topics	62

YOUTH SERVICES

INDICATOR

INDICATOR	SINCE JANUARY
Functional youth centres	1
Beneficiaries reached with youth programming	1,155
People trained on youth-related topics	33

LONG-TERM OVERVIEW OF SERVICE DELIVERY
(monthly, non-cumulative)



- BENEFICIARIES REACHED WITH REPRODUCTIVE HEALTH SERVICES
- BENEFICIARIES REACHED WITH GENDER-BASED VIOLENCE SERVICES
- BENEFICIARIES REACHED WITH YOUTH SERVICES

COUNTRY REPORT TURKEY

WITH THE LARGEST NUMBER OF REFUGEES WORLDWIDE, TURKEY CONTINUES TO PROVIDE MUCH NEEDED ASSISTANCE TO DISPLACED SYRIANS THROUGHOUT THE COUNTRY.

Turkey hosts the largest number of refugees and asylum-seekers in the world, which includes more than 3.5 million Syrians registered with UNHCR.

Most refugees in Turkey are situated in host communities around the country, which has stretched the absorptive capacities of many host communities and resulted in tensions between refugees and host community members.

As the refugee crisis in Turkey becomes more protracted, delivering support to national and local systems, with a strong focus on supporting women, children and youth, is more vital than ever to reinforce the country's resilience.

UNFPA Turkey continues to provide essential reproductive health and gender-based violence services to Syrian communities in need in Ankara, Gaziantep, and Istanbul, addressing assistance gaps and organizing far-reaching programs that serve to protect vulnerable members of the community.

REPRODUCTIVE HEALTH

INDICATOR	SINCE JANUARY
Beneficiaries reached with reproductive health services	104,104
Family planning consultations	34,890
Ante-natal care consultations	10,506
Post-natal care consultations provided	4,837
Primary healthcare facilities	35
People trained on RH-related topics	500

GENDER-BASED VIOLENCE

INDICATOR	SINCE JANUARY
Functional women and girls safe spaces (WGSS)	35
Beneficiaries reached with GBV programming / services	144,213
Population reached with Dignity Kits	146,464
Beneficiaries provided with GBV case management	1,175
Beneficiaries reached with GBV awareness messages	39,606
People trained on GBV-related topics	230

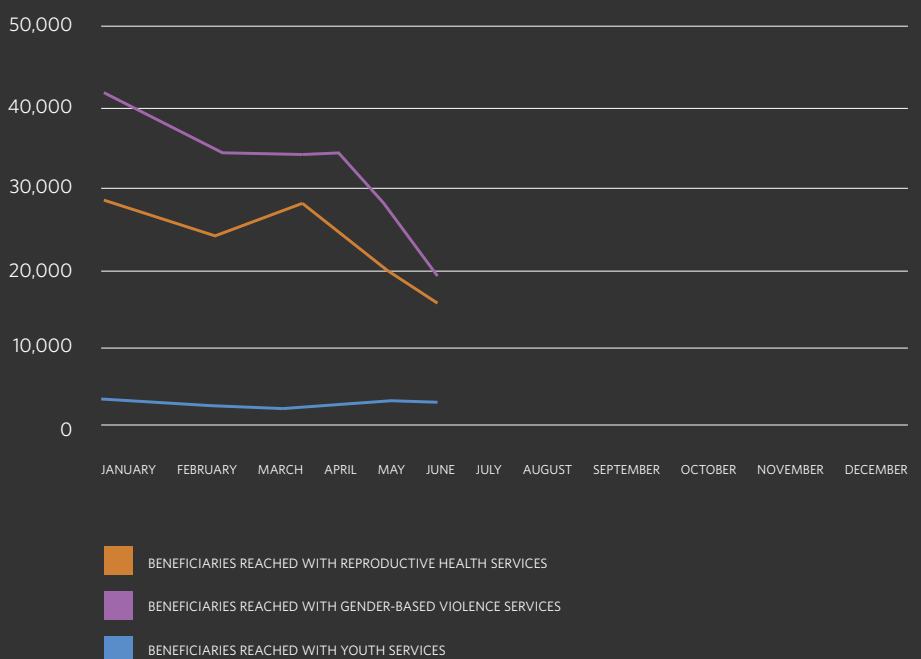
YOUTH SERVICES

INDICATOR	SINCE JANUARY
Functional youth centres	4
Beneficiaries reached with youth programming	10,985

OTHER

INDICATOR	SINCE JANUARY
Refugee service units	5

LONG-TERM OVERVIEW OF SERVICE DELIVERY (monthly, non-cumulative)



HIGHLIGHT

THE TURBULENT SEARCH FOR A NEW BEGINNING

FOR SALAM, A LIFE WITHOUT VIOLENCE WAS OFTEN SEEN AS AN ELUSIVE DREAM THAT WOULD NEVER MATERIALISE. TODAY, WITH THE RIGHT SUPPORT, THAT DREAM HAS BECOME A REALITY.

When Salam first decided to get married, she had high hopes for the life she was starting. At the time, the Arab Spring was in its throes and a sense of rebirth and optimism filled the air in Syria.

By the time the crisis in Syria hit in full force, she was already a mother, but her entire world was beginning to unravel. She had discovered that her husband had a hidden abusive side that turned her household into a daily torment — a side that only became more dominant in the geopolitical chaos that ensued following the crisis.

“He was beyond abusive to me, but what truly broke my heart was that his abuse did not spare my children,” explains Salam. “He would beat us, call us names, and often forbid us from leaving the house. The war outside often seemed less cruel than the one we fought daily within our own home. I simply had to get away.”

Salam eventually learned that her husband had taken a second wife, which she considered the last straw that broke her marriage. She demanded a divorce, which he verbally accepted but never pursued legally.

Salam made the risky choice of fleeing Syria and made her way illegally into Greece and then Macedonia. The harrowing journey took months, during which she came face-to-face with the stark reality of humanitarian conflicts and the dangers they posed to those without protection, particularly women and girls.

“The madness I escaped paled in comparison to what I faced on this journey,” explains Salam. “As a woman alone with children to feed, I was an open target for abuse and exploitation. Poverty, rape and violence often go hand-in-hand. It was at that point that I decided to take refuge in Turkey, where I’d been told many like me had managed to find some semblance of peace.”

By the time she reached Turkey, Salam was in a dire state, both physically and mentally. She had begun to experience a variety of health problems, including chronic fatigue and sporadic aching throughout her body.

She managed to find her way to a women and girls safe space supported by UNFPA, where she immediately confided in a

case manager about her situation. She also expressed her intent to legally divorce her husband and securing some financial support to start a new life for herself and her children.

“The case manager immediately referred me to another institution to receive legal counseling, and she also scheduled an appointment for me to receive psychosocial support,” recalls Salam. “They also helped me secure some basic financial support and a stable job, which was beyond necessary at that stage in my life.”

As of June 2018, Salam has regained her freedom after finalizing divorce proceedings. She has managed to find stability in Turkey, where she currently works in collaboration with one of the programs supported by UNFPA, and continues to receive psychological support to recover from the trauma of her journey.

“The road to healing can be long and unpredictable, but I feel liberated and feel hopeful for the first time in years,” says Salam. “Sometimes it is hard to imagine that I found my way here given all that we have been through.”

“As a woman alone with children to feed, I was an open target for abuse and exploitation. Poverty, rape and violence often go hand-in-hand.”

Salam from Aleppo Governorate, Syria

Salam has been receiving services at a women and girls safe space operated by UNFPA Turkey.



COORDINATION

UNFPA CONTINUES TO LEAD THE GBV AREA OF RESPONSIBILITY (GBV AOR), ENSURING THAT MINIMUM STANDARDS ARE IN PLACE TO PREVENT AND RESPOND TO GENDER-BASED VIOLENCE IN EMERGENCOES.

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.

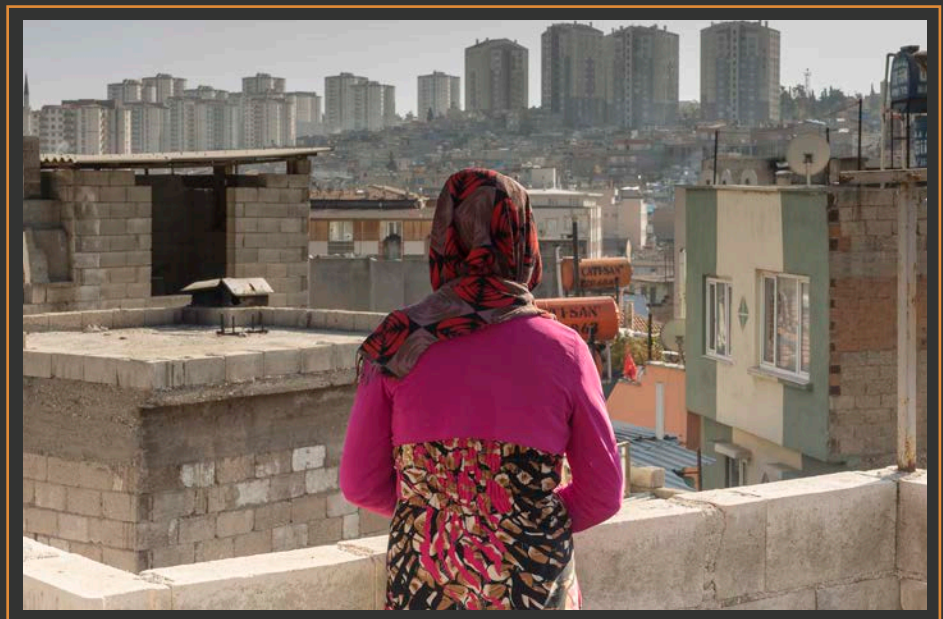
In the Whole of Syria, UNFPA leads the GBV coordination mechanisms in Syria, in Turkey with Global communities and in Jordan with Relief International. In Iraq, UNFPA and IMC lead the GBV subcluster. In Jordan and Lebanon, UNFPA co -leads the refugee GBV response with UNHCR.

During the month of June, the WoS GBV coordination mechanisms worked with Food security, water and sanitation, health, nutrition, shelter/non food items, and the mine action sectors to produce fact sheets reflecting actions and commitments that each sector are taking to reduce the risks of GBV in their response. GBV coordinators also attended the global protection conference, providing an opportunity to highlighting the work that has been produced in Syria, notably the adolescent girl strategy and the GBV assessment tools for the humanitarian needs overview.

The National Protection Working Group in Turkey held a meeting to review the inter-agency referral form on GBV survivors. Members were asked to provide feedback in order to review the document, which will be shared with members once finalised. Moreover, an inter-sector working group meeting was attended for the West Coast coordination in Izmir on 8 June 2018. UNFPA provided national protection working group consultation outcomes and their operationalization at the field level with an aim to create a national work plan and to extend the work plan to Izmir.

In cross-border Turkey, the GBV Sub-Cluster (SC) continued to disseminate the new systems to ease the request for referral pathways by non-GBV actors. This included a presentation for the Education and Shelter/NFI Clusters and sharing of relevant materials. In addition, an external consultant provided consultations to GBV SC members on: best practices, materials currently in use, successful methodologies, gaps, challenges and contextual constraints related to community based awareness. The GBV SC also organized a learning session on GBV capacity building for supervisors based in Gaziantep; 14 participants from 14 organizations attended. Furthermore, the GBV SC, in collaboration with RH Working Group, revised its CMR protocol and the related summary version in preparation for a new training in Syria planned for July. Finally, the GBV SC completed the Mid-Year review of GBV projects, originally included in HRP.

The main activities of the RH working group (WG) in cross-border Turkey focused on technical guidance, coordination and distribution of supplies. Preparation of training packages for the clinical protocols continued among WG members with discussions on a few of the drafts. Inter-agency training initiatives have also been identified and several meetings were held to set standards for implementation (protocol modules, duration, profiles of participants and trainers, etc.). Moreover, the SRH training module for the training of Community Health Workers was finalized and shared with the WHO task force. Finally, two big distributions of RH supplies were carried out in Afrin and in Idlib, delivering RH kits and family planning commodities to 59 facilities.



DONORS & PARTNERS

THE WORK WE DO WOULD NOT HAVE BEEN POSSIBLE WITHOUT THE GENEROUS SUPPORT OF OUR DONORS & PARTNERS, MANY OF WHOM HAVE BEEN SUPPORTING OUR OPERATIONS SINCE THE BEGINNING OF THE SYRIA CRISIS.

CURRENT DONORS

Austria, Canada, Denmark, The European Commission, Finland, France, Italy, Japan, Republic of Korea, Norway, Sweden, and the United Kingdom.

Private sector: MBC and Samsung Electronics, and TOMS.

United Nations: Friends of UNFPA, 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 Catholic Archbishopric – Relief and Development Center (RDC), Syrian Commission for Family Affairs and Population, SCS, SEBC.

In Lebanon: Ministry of Public Health, Ministry of Social Affairs, Lebanon Family Planning Association for Development & Family Empowerment (LFPAD), Amel Association, International Medical Corps, KAFA (“Enough Violence and Exploitation”), INTERSOS, Makkased Philanthropic Association of Beirut, Development Action without Borders-Naba’a, RET Liban, NABAD, Heartland Alliance, Relief & Development, Maarouf Saad Social and Cultural Foundation, Danish Refugee Council (DRC).

In Jordan: Ministry of Health (MOH), Institute for Family Health (IFH), International Medical Corps (IMC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Jordanian Women’s Union (JWU), Youth Peer Education Network (YPE), NCFA (National Council for Family Affairs), Questscope.

Jordan Cross-Border: Relief International, Syrian American Medical Society (SAMS).

In Iraq: AL Massela, Harikar; Zhan and Civil Development Organisation.

In Egypt: Ministry of Health and Population (MOHP), Ministry of Youth and Sport (MoYS), Arab Medical Union (AMU), Care International.

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 Policies (MoFSP), ASAM (Association for Solidarity with Asylum Seekers and Migrants), HÜKSAM (Hacettepe University Women’s Research and Implementation Center), KAMER (Women’s Center Foundation), CVF (Community Volunteers Foundation), Osmangazi University, PYD (Positive Life Association), SPoD (Social Policies, Gender Identity, and Sexual Orientation Studies Association), Bilgi University, Red Umbrella, MUDEM, Harran University.

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

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RELEVANT RESOURCES

www.unfpa.org

www.ocha.org

www.unhcr.org

<http://syria.humanitarianresponse.info>

