

Another year has passed in Syria, with no end in sight of the conflict. The suffering of more than four million Syrian women and girls of reproductive age, of which half a million are pregnant, continues. Women have become more vulnerable to exploitation as they are socially, psychologically and economically insecure. Many are at risk of not having access to safe deliveries, or emergency obstetric care, because of shortages of qualified staff, lack of supplies and medicines or equipped facilities, and difficulties in access.

Millions of people have been displaced by violence in Syria, carrying the psychological marks of the trauma that they lived through in their country and during their escape; hundreds of thousands have been killed and the entire region has been destabilized as conflict and instability have spread to Iraq, Lebanon and beyond.

The United Nations has called on the international community to substantially increase its funding for housing, food, health care and the basic needs for refugees to minimize their vulnerability and to maintain a minimum level of support and dignity. The United Nations continues to advocate for those who remain inside Syria under extremely hazardous conditions to not be left alone to their fate. During the month of December, the United Nations agencies launched two major strategic plans, requesting over \$8.4 billion to help nearly 18 million people in Syria and throughout the region. The Syria Strategic Response Plan 2015 (SRP) would require \$2.9 billion in funding to address acute humanitarian needs inside Syria, aiming to provide 12.2 million people with protection, life-saving assistance and livelihood support. The Regional Refugee and Resilience response Plan (3RP) is asking for \$5.5 billion in funding to support the emergency humanitarian operations in refugee-hosting countries as well as to provide host community support with longer-term programmes aimed at boosting economic and social resilience.

In order to ensure long-term humanitarian relief and help Syrians in hard-to-reach areas who are trapped behind borders, the United Nations Security Council renewed for twelve months its authorization to use routes across conflict lines as well as specified border crossings, with notification to the Syrian authorities, through the unanimous adoption of resolution 2191 (2014).

### SYRIAN ARAB REPUBLIC

UNFPA-assisted partners reached around 40,000 women of reproductive age in Damascus, Rural Damascus, Homs, Aleppo, Deir-ez-Zor, Tartous, Lattakia, Ar-Raqqa, Hama and Dar'a with reproductive health and GBV services. On the occasion of the International Day of HIV/AIDS, UNFPA organized a one-day policy dialogue for 80 participants representing different related ministries and partners to advocate for the importance of prevention and treatment of HIV/AIDS during the crisis. The Fund conducted a field mission to Lattakia and Tartous, which host 744,000 internally displaced persons, including 186,000 women of reproductive age. The mission included discussions with partners on monitoring the humanitarian response.

### LEBANON

UNFPA organized 120 awareness sessions on family planning targeting 1,875 Syrian refugees and Lebanese women, distributed delivery service cards to 3,500 Syrian and Lebanese women and 1,800 leaflets on sexual and reproductive health, domestic violence and child marriage and distributed 200 copies of the manual "Communication with Violence Survivors: Improving Health Care Response" and 500 copies of the family violence law manual targeting lawyers. UNFPA reached around 6,000 Syrian refugees with reproductive health and GBV-related messages and distributed around 1,300 dignity kits and 2,400 sanitary pads to Syrian and Lebanon women.

### JORDAN

UNFPA supported around 18,000 women and girls with reproductive health services, provided GBV-related services to 28,000 Syrian refugees. The Fund supported the safe deliveries of 300 women in UNFPA reproductive health clinics in January and conducted 81 youth activities benefiting 877 Syrian youth in camps and at UNFPA-supported clinic.

### EGYPT

UNFPA supported GBV training of 30 Syrian female community health workers in Damietta. About 300 Syrian youth were recruited for a football tournament in 10th of Ramadan and 6th October. UNFPA distributed communication and education material to 600 households in greater Cairo on child marriage, GBV and sexual harassment. UNFPA in collaboration with local NGOs held two-day GBV awareness-raising activities for 1,000 Syrian refugees living in Borg El-Arab and Montaza in Alexandria.

### IRAQ

UNFPA supported the delivery of 278 babies, supported Syrian refugee women with 1,300 winterization kits in Dohuk, Basirma and Qushtapa camps and launched its first-of-a-kind basketball and volleyball tournaments for girls. The UNFPA-supported youth spaces in Duhok and Erbil and started a new round of Y-Peer trainings and provided training courses to 188 refugee youth

### TURKEY

UNFPA in partnership with three local NGOs started providing reproductive health and GBV counseling services to Syrians living in and out of camps in Mersin and Sanliurfa. UNFPA distributed 2,000 hygiene kits in Suruç temporary camp through the Disaster and Emergency Management Presidency of Turkey and sent 4,000 kits to Sanliurfa to be distributed through the International Middle East Peace Research Center (IMPR) to Syrians living in out of camp settlements. UNFPA procured 8,000 intra-uterine devices, 900,000 condoms and 62,700 oral contraceptive pills to be distributed according to a plan prepared with the Ministry of Health. UNFPA conducted an assessment in Suruç temporary camp where around 8,000 Syrian refugees from Kobane are residing in a primary school.



Syrian women fled from Aleppo due to the fierce war, receiving health services through SFPA mobile clinics at Lattakia shelter.

Credit: Kinda Katranji | UNFPA, 2015.



Syrian refugee women participating in a crochet course in Nergiz women's centre in Kawargosk camp in Erbil, Iraq. UNFPA through its partners aims to invest in and empower Syrian refugee women, including through recreational activities.

Credit: Veronica Njikko | UNFPA, 2014.

## UNFPA: Confronting Hardships... Reaching and Assisting Syrian Women

UNFPA-supported service providers talk about the challenges they faced in assisting their clients during the recent harsh weather.



"I am feeling secure and pleased after my baby and I received free-of-charge required medicines", Huda, a 23 year old mother said after receiving reproductive health services from the UNFPA-supported mobile clinic during their visit to shelters for internally displaced families in Damascus, Syria.

Credit: Kinda Katranji | UNFPA, 2015

With many IDPs living in unfinished buildings and shanty shelters with limited access to electricity, clean water or heating facilities, many Syrian women are suffering from their displacement, often enduring cold, dark and harsh nights. Tragedy has already befallen them yet nature does nothing to ease their pain. "A bullet to the chest without armor, that's what a cold storm of this proportion feels like for people with little shelter," said a Syrian woman refugee, a mother of five children living in Saida in Lebanon, during the severe January storm.

Dr. Quteiba Shehab a gynaecologist serving at the Syrian Family Planning Association (SFPA) mobile clinic supported by UNFPA in Damascus shares an eyewitness account: "They are burning whatever is accessible nearby - plastic, wood, or even clothes." Winter storms crippled infrastructure making it even harder for many service providers to reach those in need... but nothing could stand in the way of their commitment.

Dr. Shehab illustrates how committed one has to be, recalling, "When I was inside the mobile clinic, leaving towards the shelters in Sahnaya, I was unable to feel my frozen feet, due to the extraordinarily cold weather that day. Furthermore, the car was moving sluggishly to avoid any sliding on the roads inside Damascus and towards rural Damascus where the roads were mostly closed. Yet our strong belief in helping the women in need there made us abundantly strong and able to go ahead and carry on."

The displaced people of Syria are protected by the will and hearts of many of the courageous service providers and volunteers who devote themselves to aiding others. Maysara Mushaweh who works with an SFPA, UNFPA-supported, mobile clinic, elaborates on confronting the challenges of the harsh winter: "Despite the fact that not all staff of the SFPA were capable of reaching the office during the latest snow storm, we as a mobile clinic team insisted on finding a way to continue our usual work aiming to provide the medical services to the deprived IDPs located in Sahnaya, (Rural Damascus)."

Om Nidal, currently residing in Sahnaya (Rural Damascus), commented on her experience with the UNFPA-supported clinic, "I am very blessed and grateful to receive the UNFPA hygiene kit and in particular when it includes a small winter blanket and winter socks."

Heroes like Dr. Quteiba and Maysara are not alone, others in Iraq, Lebanon and Jordan are devoting their efforts to relief. In Iraq the number of beneficiaries of UNFPA-supported reproductive health services in the camps and host communities during the ten days of the storm were over 1,200 Syrian women. In Jordan, service providers worked around the clock, enabling the UNFPA-supported clinic at Zaatar camp to provide 24-hour service during the storm.

"The work never stopped," Dr. Fares a gynaecologist added. "I stayed at the clinic for 48 hours, in which I delivered around 22 babies." Wa'd

Jaddou, 24-year-old midwife at the UNFPA-supported clinic, was a member of the team that slaved over night to help combat the devastation of the storm. "I stayed here for 48 hours; but it took me hours to arrive, as it was rainy and windy. My father took me to the bus assembly point where I took the bus with my colleagues and started our journey to the camp. The road was slippery so it took us double the time to arrive to Zaatar camp", says Wa'd.

When parts of Lebanon got hit with a snowstorm, most UNFPA services were paralyzed because travel was nearly impossible since one could not walk and there was no vehicle access.

Nina Masri, a service provider in the Akkarouna region in Lebanon recalls the tragedy of a Syrian displaced family when they lost a child due to the cold weather conditions and poor shelter. She recounted the parents' decision "to send their boys to sleep at neighbor's house, while they kept the little girl, who was breastfeeding, with them in the shelter." After the little girl's death, Ms. Masri states that she and her social worker colleagues decided to "stand with this family, who did not only go through the hardship of displacement but, worse, the loss of a child. We started, and still are rehabilitating the shelter, placing a ceiling, supporting winterization of it, putting on a door and windows."

Service providers like Wa'd, Dr. Fares, Maysara, Dr. Quteiba and Ms. Masri are much sought after. They fill the day with positivity and work with integrity. Diligently treating female patients to the best of their capability and making sure that they keep high standards, they love their jobs and are an asset to providing protection from the consequences of both man-made conflict and natural disaster. The resilience of the service providers is one of the fundamental reasons that UNFPA is able to provide the support it does.

