

Restoring Hope... Rebuilding Lives

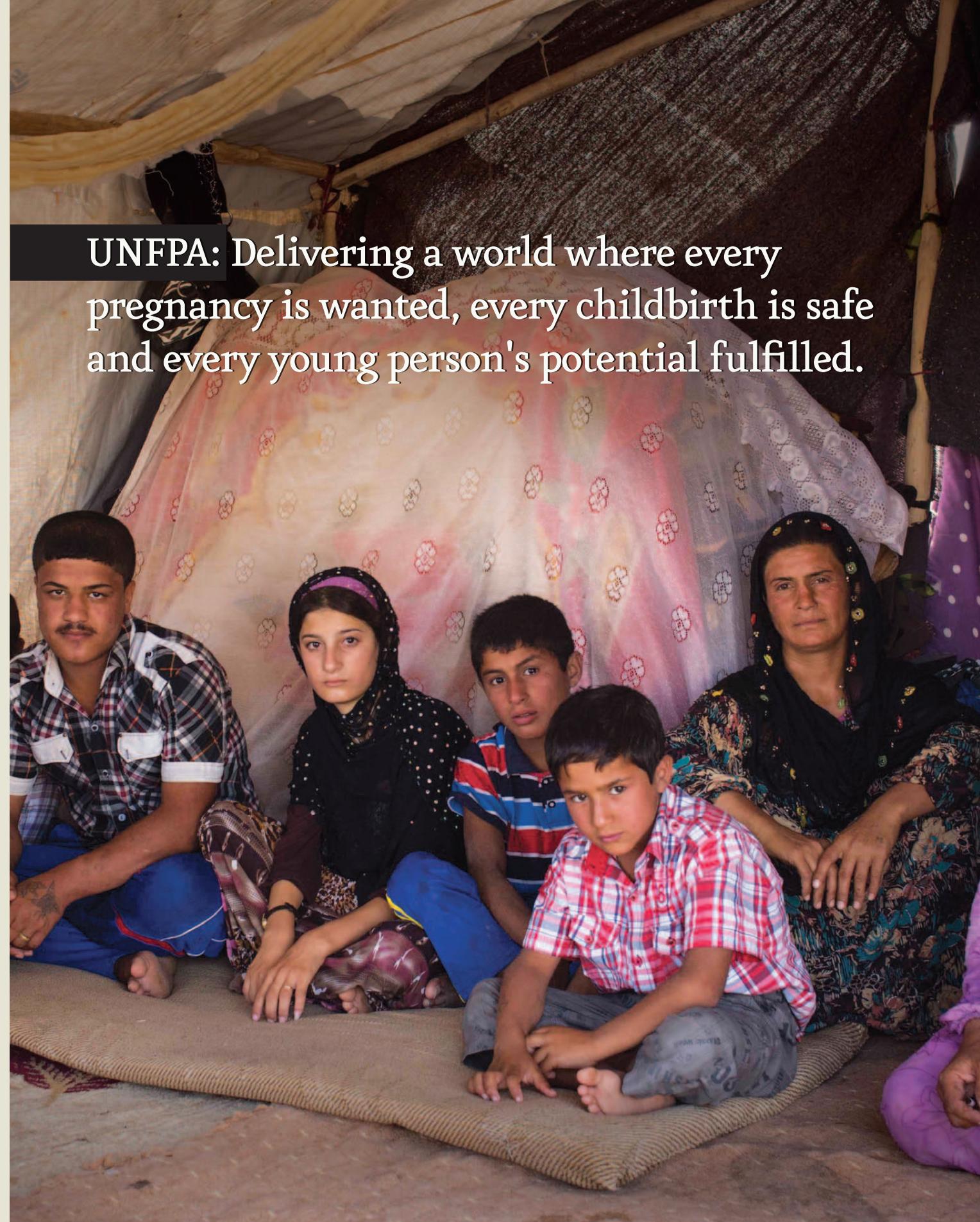
UNFPA REGIONAL SUPPORT FOR WOMEN AND GIRLS
AFFECTED BY THE SYRIA CRISIS



United Nations Population Fund



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



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UNFPA regional response to the Syria crisis

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

During conflicts, sexual and reproductive health needs are easily overlooked – yet these needs are often staggering.

In crisis situations, one in five women of childbearing age is likely to be pregnant. Without access to reproductive health services, these women face an increased risk of life-threatening complications. Many women also lose access to family planning, exposing them to unwanted pregnancies in perilous conditions.

Women and young people also become more vulnerable to gender-based violence (GBV), and the hygiene needs of women and girls are often neglected.

Syria is experiencing the biggest humanitarian crisis in the world. Today, more than 3 million people, the majority women and children, have been registered as refugees in neighbouring countries. There are also more than 12 million people inside Syria in need of assistance, including over 7 million displaced person. Of the total, more than 4 million women and girls of reproductive age, and around 500,000 pregnant women are at risk.

UNFPA works closely with affected populations, community-based organizations, local and international NGOs, governments and UN sister agencies to ensure that sexual and reproductive health is integrated into emergency responses, that protection measures for Syrian women are in place and that the needs of women and young people are being served.

UNFPA, with its partners, provides hygiene, reproductive health, obstetric and family planning supplies, deploys trained personnel and provides additional support to vulnerable populations through the implementation of three programmes:

Reproductive Health

Gender-Based Violence

Youth Participation



1

Reproductive Health

Women and girls need access to a full range of reproductive health services including ante and post natal care, safe deliveries, and family planning.



UNFPA, together with a wide range of partners, works to ensure access to reproductive health and rights, including family planning, by providing different types of services through its supported reproductive health clinics:

- Antenatal care with a skilled provider
- Delivery in a health facility, including routine care for the mother and newborn
- Postnatal care for the mother and newborn, including routine checkups and support for breast-feeding
- Provision of emergency obstetrical services, such as caesarean sections
- Care for medical complications that arise during pregnancy, childbirth and shortly after birth for the woman and her newborn
- Care for sexual transmitted diseases
- Care for women who experience a miscarriage or stillbirth.

UNFPA supports health systems in countries affected by the Syria crisis by providing technical support and supplies. The Fund has established a reproductive health voucher system inside Syria to enable women access to services free of charge, which also indirectly helps to maintain the health system. UNFPA support extends to ensuring sexual and reproductive health services are available both in camps and outside camps and to conducting awareness campaigns and outreach activities in camps and host communities.

The quality and equity of provision of services in public health facilities have been significantly affected with 57 per cent of public hospitals reported to be partially functioning or completely out of service (HeRAMS), while 63 per cent of public basic emergency obstetric care centres are non-functional.

(Strategic Response Plan for Syria, 2015)

Good sexual and reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system. It implies that people are able to have a satisfying and safe reproductive life, including the capability to reproduce, and the freedom to decide if, when, and how often to do so.

To maintain one's reproductive health, whether they are displaced or not, couples need access to accurate information and to a safe, effective and affordable contraceptive method of their choice. They must be informed and empowered to protect themselves from sexually transmitted infections. And when they decide to have children, women must have access to services that can help them have a fit pregnancy, safe delivery and a healthy baby.



Globally, an estimated 290,000 women die each year in developing countries from pregnancy-related causes, and 2.9 million newborns die in the first month of life. Nearly all of these deaths could be prevented with adequate medical care. However, since the crisis started, no maternal death has been reported in UNFPA-supported clinics.

(UNFPA, 2014)

Khawla, 30, was pregnant when she fled her hometown in Shingal district in Mosul. She had her baby boy in one of the Dohuk hospitals supported by UNFPA. The mother, who currently lives in a tent in Khanke camp for internally displaced persons, said: "having a safe delivery was my first priority."

(Dohuk - Iraq, 2014)



2 Gender-Based Violence

Gender-based violence can undermine the physical and mental health, dignity, and security of survivors yet often remains shrouded in a culture of shame and silence.



UNFPA is the lead among the United Nations agencies to further gender equality and women’s empowerment, to address the physical and emotional consequences of gender-based violence and to promote the right of all women and girls to live free of violence and abuse.

UNFPA works with partners to make quality, life-saving services available to GBV survivors, establishes strategies to prevent and mitigate the risks of GBV, supports safe spaces where women and girls can access psychosocial activities as well as other GBV response services, and works closely with ministries of health and other health providers to provide survivor-centred post-rape treatment.

UNFPA, in collaboration with other agencies, leads the GBV coordination groups in Jordan, Syria, Lebanon, Turkey and Iraq, providing strategic direction and technical expertise.

In the Kurdistan Region of Iraq, one in five women surveyed said they had directly received offers of money for sexual services, and one in ten women indicated that they had been pressured by government officials, organised gangs, police and other security personnel, NGOs, and by members of both the Syrian and non-Syrian communities to engage in physical relationships.

A third of female headed households surveyed by UNHCR said they never left the house or rarely, or only when necessary. Women are heads of household among one in four refugee families.

Violence against women and girls is one of the most prevalent human rights violations in the world. It knows no social, economic or national boundaries.

Gender-based violence undermines the health, dignity, security and autonomy of its victims, yet it remains shrouded in a culture of silence. Victims of violence can suffer sexual and reproductive health consequences, including forced and unwanted pregnancies, unsafe abortions, sexually transmitted infections, and even death.



Almost a third of the Syrian women in Lebanon have reported being exposed to violence in the Syrian conflict. Over a quarter of all those who experienced any sort of violence suffered physical injury and two thirds suffered psychological difficulties. These women often reported gynaecological problems, including severe pelvic pain and menstrual irregularity.

(BMC Women’s Health, 2014)

“Teenage Syrian girls are being forced into early marriages to save their families... There was no other choice.... My family was confronting economic problems, and I was a burden on them... I had to sacrifice my dreams of being a Syrian woman leader for their happiness... I am still alive, strong and able to continue to study... I am hopeful I can achieve my dreams and make change in my country and in the world”

Nour,* a 12-year-old girl from Aleppo, Syria.

* Name has been changed to protect her anonymity



3 Youth Participation

Syrian youth refugees are unable to participate fully in society, are usually unemployed and often unable to continue their education.



UNFPA partners with young people, helping them participate in decisions affecting them and strengthening their ability to advance human rights and development issues such as health, education and employment. UNFPA has established youth spaces and sponsors sports and cultural activities that are effective means of conducting peer-education programmes on such issues as reproductive health and GBV.

In Jordan, the prevalence of early marriage among all registered marriages for Syrians increased from 25 per cent in 2013 to 31 per cent in the first quarter of 2014.

(UNICEF, 2014)



More than 450,000 of the Syrians living in the four countries most affected by Syria crisis are between the ages of 15 - 24. Syrian youth refugees are unable to participate fully in society, are usually unemployed and often unable to continue their education. For girls, the barriers to participation are often higher than for boys.

But when empowered and given the right opportunities, youth are effective drivers of change.



Syrian refugees in Lebanon earn an average of 40% less than the country's minimum wage.

(ILO, 2014)

17 per cent of refugee youths in Lebanon often have thoughts of ending their own lives, and 24 per cent have thought of doing so on one or more occasions - a percentage that is even higher among female youth.

(UNFPA, 2014)

Mohammad Al-Zoubi, a 14-year-old Syrian refugee, in the 8th grade said, "I love going to school and I always score high grades among my classmates. My ambition is to become a professional football athlete, gymnasts' player and a teacher". Mohammed is keen to participate in the recreational activities and awareness sessions organised in the UNFPA youth centre in Zaatari camp. Mohammed is a member of the UNFPA's football team and he participates in tournaments organised by UNFPA's partners in the field.

(Zaatari camp - Jordan, 2014)



WAY FORWARD

- Sustain UNFPA-supported sexual and reproductive health and protection services available for Syrian women inside Syria and in neighbouring countries (camp and urban settings)
- Expand the reproductive health voucher system in Syria
- Provide comprehensive reproductive-health information and services, using a combined strategy of outreach services and community-based centres
- Provide socially and culturally accepted activities to empower women and youth in women’s spaces, and in youth spaces both in camps and urban settings
- Engage, empower and ensure the participation of Syrian refugees in health-related outreach programmes
- Promote and ensure protection measures for women and girls against gender-based violence
- Support awareness-raising and media campaigns for preventing gender-based violence and promoting safe motherhood.

DONORS & PARTNERS

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

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

IMPLEMENTING PARTNERS

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

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UNFPA IMPLEMENTING PARTNERS IN JORDAN: Ministry of Health (MOH), Institute for Family Health (IFH), International Medical Corps (IMC), International Rescue Committee (IRC), Jordanian Health Aid Society (JHAS), Family Protection Department (FPD), Un Ponte Per (UPP), Jordanian Women’s Union (JWU), Youth Peer Education Network (YPE), NCF (National Council for Family Affairs).

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