

## **Syria Country Office**

## **COVID-19 Humanitarian Response Flash Update #5**

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### **Situation Overview**

As of July 7, 2020, the Syrian Ministry of Health (MoH) has reported 372 COVID-19 cases across Syria: 232 active, 126 recoveries and 14 registered deaths. The first positive case was announced on 22 March 2020, with the first fatality reported on 29 March 2020. Although no movement restrictions have been imposed in Syria recently, the Syrian government is still taking active steps towards ensuring that precautionary measures are followed in public service facilities and universities.

The ongoing economic crisis has exacerbated humanitarian needs of the more than 11 million people across Syria in need. The poverty rate is over 90 percent. With the official exchange rate being 1,250 SYP for each USD1.00, the collapse of Syria's currency has compounded the crisis and continues to plunge more people into poverty. Unemployment is also high and exacerbated by restrictions to contain COVID-19. There are reports of Syrians obliged to borrow money to meet basic needs and eat less. Prices for food staples such as rice, sugar, flour have also seen high increases in the local markets. The national average food basket in June (SYP 84,095), is up 153% compared to December 2019.<sup>2</sup> Nine years of crisis have stretched livelihoods and services to the breaking point, especially in underserved and overburdened communities. Those who are displaced are facing a protection and poverty crisis, exacerbated by COVID-19. Millions of displaced people have lost their livelihoods, are taking on debt and are increasingly unable to meet their basic needs due to the regional economic crisis and the impact of COVID-19. There is increased risk of child labour, genderbased violence, early marriage and other forms of exploitation. Displaced people in camps or camp-like situations face additional risks as it may be difficult to practice regular handwashing, physical distancing and other key public health measures. Restrictions on movement and limitations on commercial activities in some areas of North-West Syria (NWS) and North-East Syria (NES), including on markets which had been introduced as a public safety measure to counter the spread of COVID-19, have contributed to the intensification of humanitarian needs, as well as the overall impact of the pandemic on the local economy. While humanitarian actors have adapted their activities and procedures to mitigate COVID-19 related risks, certain activities had to be suspended to protect the affected population, as well as humanitarian workers.<sup>3</sup>

Although reproductive health services, as well as essential Gender-Based Violence services are now more accessible than in previous months due to lifted restrictions, the pandemic is still severely disrupting access. People affected by humanitarian crises, particularly those displaced and/or living in camps and camp-like settings, are faced with challenges accessing health services that were otherwise available before the COVID-19 outbreak. Those who are most at risk and in need of immediate humanitarian assistance include pregnant and lactating women, widows, children, people with disabilities and people with chronic diseases.



### **Immediate Response**

Continuing to provide maternal and neo-natal health care and GBV prevention and response services aiming to ensure provision of essential and life-saving services to people in need, UNFPA is ensuring that implementing partners' (IPs) staff members adhere to precautionary and preventive measures against COVID-19, by using personal protection equipment, including hand gloves and masks, and that the environments where services are delivered are properly sanitizers. UNFPA continues coordination with the Ministry of Health (MoH), other key line ministries, and actively advocates for efforts to provide SRH services during COVID-19 pandemic. UNFPA response includes provision of maternal and reproductive health services for pregnant and lactating women, operation of women and girls safe spaces, distribution of RH and dignity kits (both male and female), community awareness raising and referrals to both RH and GBV services. UNFPA also continues to engage young people as partners and key agents of change and has been working hand in hand with IPs to support young people aiming to empower them to play vital roles in their communities during COVID-19 pandemic.

The Syrian Ministry of Health COVID-19 Cases Dashboard https://dataviz.vam.wfp.org/economic explorer/prices

UNOCHA and WHO | Syrian Arab Republic COVID-19 Response Update No.07 as of 5 July 2020



#### **Advancing Dignity and Protecting Women & Gender Based Violence (GBV)**

During this period, UNFPA supported the following:

- An online group of approximately **195 beneficiaries** has been created for the FPU<sup>4</sup>. Vocational training visual and audio materials on topics such as: hairdressing, cooking, sewing, life skills, literacy classes, recreational activities such as aerobics are disseminated by trainers weekly. Additionally, awareness-raising on topics such as COVID-19, stress management, raising children through different development stages etc. is being shared in the online group by social workers.
- To improve the quality of remote GBV case management and psychosocial support services due to the GBV risks exacerbated by COVID-19, UNFPA has initiated online GBV webinar modules, targeting GBV case managers on remote GBV service delivery. The webinars are being organized in a 5-week series. A total of 40 case managers have participated in the first four webinars covering topics such as: remote GBV service delivery during COVID-19, remote GBV case management, remote safety planning for Intimate Partner Violence survivors, GBV messaging and enhancing and mobilizing women and girls network remotely.
- Integrated GBV/RH services, individual counseling sessions, and awareness raising on COVID-19 continue to be provided by mobile teams.
- UNFPA caseworkers, across the 14 governorates, continue to provide individual psychosocial support (PSS) and GBV case management in the Women and Girls' Safe Spaces (WGSS'), with staff rotation measures in place and the use of mobile phones has been adopted for GBV case follow-up and coordination of services.
- **3 Community Wellbeing Centers** (CWCs)<sup>5</sup> continued to provide integrated GBV and RH services while ensuring the respect of precautionary measures against COVID-19.
- 46 Women's and Girls' Safe Spaces (WGSS) have continued operating and have maintained individual face-to-face psychosocial support and GBV case management with staff rotation to ensure COVID-19 prevention measures.
- GBV awareness-raising activities continue to be provided through social media platforms across 14 governorates by UNFPA implementing partners, covering topics related to COVID-19 prevention measures. Additionally, the messages have a GBV focus on intimate partner violence during lockdown, mental health awareness sessions, economic violence in relation to COVID-19, and GBV risk factors associated with COVID-19. 8713 people were reached by awareness-raising messages through social media channels/platforms.

<sup>&</sup>lt;sup>4</sup>A family Protection Unit functions as a shelter for women and girl survivors of more serious cases of GBV. The unit is open 24/7 to receive new and urgent cases and sometimes life-saving services, it also serves as a temporary residence for the women and children who sleep, eat, and receive services.

<sup>&</sup>lt;sup>5</sup> A community wellbeing centre is a space which offers comprehensive GBV prevention, awareness-raising and care services to women and girls, and general capacity building to enhance their livelihood opportunities and reduce their vulnerabilities. This is in addition to the provision of SRH and GBV services including PSS services to IDPs and host communities including integrating men and involving them in GBV prevention.

- In partnership with MoSAL, and as part of COVID-19 response, UNFPA has identified a total of 477 men, women, boys and girls hosted in 4 social care boarding centers, including homeless persons, persons living with disabilities. UNFPA started the first distribution of female and male dignity kits and sanitary napkins according to the needs in late June and will continue in July to cover all 4 boarding centers. UNFPA will continue to re-assess the needs to continue supporting through distribution of dignity kits.
- 1000 students, including 467 adolescent girls who had travelled from hard-to-reach areas in North-East of Aleppo were supported with hygiene and adolescent kits during their stay in temporary residences for the examination period.
- **805** households in Dara'a have so far received 7,000SYP through the e-voucher system, to which UNFPA is contributing in order to provide assistance targeting pregnant and lactating women in partnership with WFP and UNICEF.
- A joint UN COVID-19 socio-economic impact analysis has continued during the reporting period. The analysis seeks to analyze the potential impact on poor and vulnerable households, as well as the response and recovery measures needed to support the most vulnerable groups UNFPA has ensured that gender mainstreaming is adhered to for the entire cycle of the analysis, identified needs in terms of health services and protection needs for GBV risks, including the impact on vulnerable households and the poverty impact. The analysis will be utilized to identify the UN programmatic response.



### **Advancing Access to Reproductive Health (RH)**

During this period, UNFPA supported the following:

- UNFPA continues to provide family planning counselling and services. Contributing to the COVID-19 operation response plan, UNFPA has engaged key line ministries such as Ministry of Health (MoH) and Ministry of Information (MoI) to jointly develop media campaigns to raise awareness on COVID-19 and reproductive health services. UNFPA has prepared and published posters, flyers in addition to short videos in collaboration with MoH and MoI to raise awareness on COVID-19 prevention measures, especially for pregnant and lactating women.
- UNFPA is ensuring that implementing partners' staff members adhere to precautionary and preventive measures against COVID 19 by using hand gloves, masks and hand sanitizers when providing services. In addition, RH clinics are being disinfected and sterilized and measures are being taken to avoid overcrowding and protect women and girls from the risk of infection.
- UNFPA continues to conduct awareness-raising sessions on COVID-19 in RH static clinics and mobile teams, targeting women, adolescent girls, pregnant and lactating women. The sessions are being conducted in: Damascus, Rural Damascus, Dara'a, Sweida, Quneitra, Hama, Lattakia, Homs, Hama, Tartous, Aleppo, Al-Hassakeh and Deir-ez-Zor. The awareness raising methods varied from conducting individual sessions, distributing awareness brochures issued by WHO and broadcasting messages.



### **Enhancing the Livelihoods of Young People**

During this period, UNFPA supported activities as follows:

- A youth-led initiative titled 'Safe Distance' was implemented in Masyaf, Hamah. Young people, in collaboration with locals, produced media tools and messages to raise awareness on social distancing in a variety of places such as bakeries, grocery stores, supermarkets, etc. The initiative aimed to encourage people to practice social distancing as a crucial preventive measure to avoid COVID-19 infection. The initiative took place over 10 days, targeting approximately 1,200 individuals in total.
- 3 short videos<sup>6</sup> were produced by young people and posted on a social media platform (Facebook) in order to raise awareness on COVID-19 preventive measures and on activities that young people can participate in and invest their time on during self-quarantine.
- GBV, RH and healthy lifestyle awareness-raising activities were provided through social media platforms by UNFPA IPs. The sessions covered topics related to COVID-19 prevention measures and GBV with a focus on the young people's role in raising awareness on COVID-19 amongst their peer groups. Additionally, awareness raising session were conducted in the Youth Friendly Spaces (YFS)<sup>7</sup>, and through outreach teams, targeting young people while adhering to all precautionary and social distancing measures. **8,000 people** were reached by awareness-raising messages through social media channels/platforms.



### **Operational and Logistic Support**

- During this period, UNFPA's supply unit has completed the procurement of various types of personal protection equipment (PPEs) on behalf of the RH department in MoH. The following items were delivered to the MoH warehouse: 12,500 boxes of disposable gloves (each box contains 100), 10,000 alcohol and hand-gel sanitizers, 5,000 bottles of surface sanitizers, and 500,000 medical masks.
- 65,000 water, sanitation and hygiene kits were procured for COVID-19 response. Each kit consists of: soap, toothpaste, toothbrush, towel, wet wipes, and hand sanitizing gel.



# During the reporting period (1-30 June 2020), UNFPA achieved the following (GBV & RH & Youth):

- Beneficiaries for RH awareness raising, including COVID-19 related topics: 2,487
- Young people reached with awareness raising on COVID-19 related topics: 20,000
- RH static clinics: 85
- RH mobile teams: 72
- Psycho-social support and counseling on COVID-19 provided to: 46,694 beneficiaries

<sup>6</sup> First COVID-19 Awareness Raising Video
Second COVID-19 Awareness Raising Video

A Youth Friendly Space (YFS) mobilises communities to provide safe spaces for young people, with programming which could include education activities, life skills trainings, psychosocial support, awareness raising and referral to other services.

- Awareness raising on GBV and COVID-19 provided to: 16,890 beneficiaries
- Vocational training provided to: 552 women and girls
- Number of supported Women's and Girls' Safe Spaces operating: 46
- Number of Community Wellbeing Centers operational: 3
- Number of GBV mobile teams operating: 120
- Number of distributed sanitary napkins packs: 1,787
- Number of Dignity Kits<sup>8</sup> distributed: 4,740



# From the beginning of COVID-19 response (1st of April-30th of June), UNFPA achieved the following (RH & GBV & Youth):

Beneficiaries reached with PSS and counseling related to COVID-19: 142,920
 Beneficiaries reached with awareness raising sessions on COVID-19: 115,245
 Beneficiaries reached with sanitary napkins packs and dignity kits: 16,467



### **Coordination and Partnerships**

GBV sub-sector, led and coordinated by UNFPA, is currently leading and ensuring the prevention and response to GBV as well as ensuring that GBV mainstreaming with the current COVID-19 is synergized across all sectors. The key activities undertaken during this period are:

In coordination with the United Nations Department for Safety and Security (UNDSS) training unit, online awareness raising sessions were conducted for the GBV Sub-sector members on Gender and COVID-19. The sessions aimed to enhance knowledge and awareness of 53 participants from local partners on Gender Analysis and Response in the wake of COVID-19. In coordination with the UNFPA regional office, a series of online trainings for GBV members have been planned such as Clinical Management of Rape (CMR), Basic GBV, and GBV Mainstreaming for Non-GBV Actors.

#### **Next in response:**

• UNFPA has initiated discussions with WFP for expansion of the voucher system beyond Dara'a city and to cover additional vulnerable groups such as women of reproductive age living with disabilities, female heads of households at risk, visibly pregnant and lactating women and the elderly in all the governorates in Syria. Through this expansion, targeted groups will also be able to procure additional protection-related items such as torches, batteries, power banks for mobile phones among others. WFP is currently piloting a 3 month commodity voucher assistance through the General Food Assistance in Damascus and Rural Damascus .Through the expanded voucher system, UNFPA will provide an additional top up value to the food items that will be provided by WFP to enable these vulnerable groups to purchase essential hygiene items. Considering the distance to the markets, which might not be within reach for these vulnerable groups, UNFPA through a local partner seeks to also provide a top-up value on the vouchers to meet the transportation costs during distributions for those in need.

<sup>&</sup>lt;sup>8</sup> <u>UNFPA standard dignity kit items</u>

- In July, UNFPA will continue the distribution of 606 dignity kits to men, women, boys and girls hosted in 4 social care boarding centers, including homeless persons, persons living with disabilities.
- UNFPA will continue to provide online GBV capacity building webinars on remote GBV service delivery in the month of September for a period of 5 weeks targeting GBV case managers working with different UNFPA implementing partners.



### **Challenges**

- The most common challenge was the availability of internet connection amongst beneficiaries, which
  has limited the utilization of online platforms to provide services to people in need. To overcome
  this, UNFPA is currently exploring the possibility of designing a new service to provide beneficiaries
  with free internet bundles, while maintaining the beneficiaries' privacy (keeping their phone
  numbers private).
- Border closures, the volatility of the exchange rate (and banking challenges in Lebanon), and other factors that impact the import of certain medical supplies critical to an effective COVID-19 response are also a concern. Other materials, for example pumps, sterilization equipment and PPEs are in short supply in the local market, resulting in the inability of partners to procure items, or increased costs due to price hikes. The fluctuation of the exchange rate during this period led to a difficulty in procuring pharmaceutical products and essential equipment such as ultrasound with a stable price.
- UNFPA IPs have faced new challenges in procuring and purchasing the essential RH pharmaceutical items and medical supplies to support health facilities to provide comprehensive SRH and health services especially for women and adolescents due to the lack of medicines and pharmaceutical products in the local market.



### **Immediate Needs**

The financial gap for COVID-19 response is estimated at: \$1,200,000

# **Special Feature**

Giving Young People a Chance for a More Hopeful Future during the Syrian Crisis and COVID-19 Pandemic



"I came here to succeed despite all challenges", said Jamila, who is one of 1,000 students who came from rural Aleppo and hard-to-reach areas to Aleppo schools to submit their high school national exams, which will determine the rest of their future.

In the challenging Syrian context, where students are leaving their families to take exams in a place far from home and often passing through crossing points between two conflicting sides, thousands of young students are forced to live through conflict in Syria with limited access to essential services. In addition to several hurdles, COVID-19 is bringing a new threat to an already struggling country and its people, making delivering life-saving assistance even harder. The COVID-19 outbreak increased the hardships and worsened the economic situation for millions of Syrians, who have been struggling for the last 10 years due to the Syrian crisis. The students need to leave their families for several weeks and travel to nearby cities where they stay and do their exams. The journey requires crossing conflict lines after extensive coordination is done in order to make sure there will be no extra burden on students at the checkpoints. This year the trip is even harder as they need to take into consideration the protective measures against COVID-19 throughout the whole journey and comply with the necessary measures they are asked to have in place.

"Now the situation is getting harder. The quarantine will be in a school, neither in a hotel nor in a house, and the scene of the surrounding destroyed houses around is not a fake dramatic effect, it's a reality", Jamila continued telling UNFPA coordinator her story.

In response to this very challenging situation, UNFPA is supporting students who are coming from surrounding hard-to-reach areas to Aleppo schools by providing them with the basic needs such as hygiene kits while staying in a temporary residence.

"At such a time, while we must prepare for the exam, we cannot go out to buy our most basic needs. I am grateful to receive the hygiene kits", Jamila said.

UNFPA mobile teams in Aleppo are currently providing basic hygiene items such as: cleaning materials, underwear, towels, and solar chargers, as well as sanitary and personal care kits for 1,000 students coming from rural Aleppo.

"It was a huge burden, I would not be able to get those basic items since I am not allowed to go out",
Jamila expressed her deep appreciation in receiving the hygiene items.

UNFPA and partners are on the frontlines, working to protect and improve the lives of Syrian women, adolescents and young people, helping prevent the spread of COVID-19 and giving young people a chance for a more hopeful future.



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