



2014 Syrian Arab Republic Humanitarian Assistance Response Plan (SHARP)

15 December 2013

Participants in the Syria Humanitarian Assistance Response Plan Jan-Dec 2014

Ministry of Agriculture and Agrarian Affairs, Ministry of Education, Ministry of State for Environment Affairs, Health Ministry, Ministry of Foreign Affairs, Ministry of Higher Education, Ministry of Local Administration, Ministry of Social Affairs, Ministry of Water Resources, Syrian Commission for Family Affairs, Syrian Arab Red Crescent, National NGOs, Action Contre La Faim-Spain, Adventist Relief Agency, Danish Refugee Council, FAO, Help e.V, International Medical Corps, International Organisation for Migration, Mercy Corps, Oxfam-GB, Première Urgence, Secours Islamique France, UNICEF, UNDSS, UNDP, UNESCO, UNHCR, UN-Habitat, RC/UNMAS, Office of HC, UNFPA, UNRCO, UNRWA, WFP, WHO

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EXECUTIVE SUMMARY

As the crisis continues humanitarian needs inside Syria are increasing across all sectors while affected populations are now experiencing the worst winter in many years. The result of the on-going crisis is further massive population displacement and growing humanitarian needs. The UN estimates that 6.5 million people are internally displaced and a total of 9.3 million¹ people are in need of humanitarian assistance, 46% of whom are children². These figures include at least 270,000 of the 540,000 registered Palestine refugees who have also been displaced within Syria³. Negative impacts on food security are witnessed in several parts of the country, and this combined with deteriorating underlying factors such as water, sanitation and healthcare services has contributed to a growing risk of malnutrition among women and children. There are critical gaps in essential healthcare delivery particularly in trauma care, primary healthcare and reproductive healthcare services. The decreasing availability of and access to safe water needs to be urgently addressed in conjunction with poor sanitation and hygiene practices which can increase the risk of an outbreak in communicable diseases. Psychosocial distress and mental health concerns, the erosion of livelihoods, asset losses, and deteriorating coping mechanisms urgently need to be addressed. The shortage of adequate and dignified shelter and basic household items remains a major concern, as is hindered access to education, falling enrolment rates and the availability of safe learning spaces.

The SHARP remains complementary to government led humanitarian response and other appeal frameworks such as those issued by the ICRC and IFRC. The humanitarian response under this plan will be implemented in full coordination with the Government of Syria and in accordance with UN General Assembly Resolution 46/182 (“Strengthening of the Coordination of Humanitarian Emergency Assistance of the United Nations”) and the Guiding Principles in its Annex. Humanitarian partners renew their commitment to deliver humanitarian aid with full respect to the sovereignty of the Syrian Arab Republic. This plan also underscores the need to ensure the timely delivery of humanitarian assistance.

The plan fully respects the sovereignty of the Syrian Arab Republic. It also recognises the state’s responsibility to enhance the protection of all affected people, in accordance with the UN Charter, relevant norms and principles of international law, international human rights law and international humanitarian law.

In cooperation with the Government of Syria, humanitarian actors, i.e. United Nations (UN) agencies, the International Organisation for Migration (IOM), and international non-governmental organisations (INGOs) registered in Syria, are launching the 2014 Syria Humanitarian Assistance Response Plan (SHARP) for the period from 1 January to 31 December 2014, in order to address the continuing increase in large-scale humanitarian needs throughout all 14 governorates.

There have been significant improvements in aid delivery efforts including inter-agency convoys and the operationalisation of field hubs which have boosted field programming. Yet challenges of insecurity and limited partners remain. The UN will continue working with Syrian partners and humanitarian actors to deliver larger amounts of humanitarian assistance with greater speed and efficiency.

Protection objectives are pursued through activities across all sectors of the humanitarian response. In the context of the humanitarian crisis in Syria, and in particular for the 2014 SHARP, this refers to the protection of all affected civilians including men, women, and children, and other groups with specific needs from violence, exploitation, discrimination, abuse and neglect. In the course of implementing protection activities, the UN will work in partnership with the government to empower state institutions to uphold humanitarian norms and principles. The UN will also continue to advocate for greater respect towards international humanitarian law and international human rights law, with relevant stakeholders. The scope of beneficiaries covered by protection and community services sector is: wide-ranging, encompassing all civilians affected or threatened by the crisis; and targeted, focusing on groups with specific needs, particularly internally displaced people (IDPs), Palestine refugees, migrant workers, women at risk, adolescents and children, people with disabilities and the elderly.

For purposes of the 2014 SHARP, gender-based violence (GBV) means the prevention and response to violence against women, violence against girls and violence against boys.

¹ The Government of Syria estimates that 5.7 million people are internally displaced.

² The planning figures derive from and are triangulated from a range of sources

³ The proportion of Palestine refugees displaced within Syria will be included under the term “internally displaced persons”

³ For simplicity, Palestine refugees displaced within Syria will be included under the term “internally displaced persons”

The 2014 response plan identifies 5 overarching strategic objectives:

1. Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law.
2. Increase the provision of appropriate life-saving emergency services and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.
3. Expand early recovery, and restoration/stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.
4. Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.
5. Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

In consultation with concerned line ministries and SARC, UN agencies, IOM and INGOs have identified critical activities to be undertaken across the 14 governorate in order to strengthen complementarities and further upscale programming. Implementation will be coordinated closely with the SARC and with the respective line ministries and other relevant Syrian authorities in accordance with agreed mechanisms.

The scope of humanitarian response continues to grow with increased cooperation and support from the Syrian Government. Partnerships have grown, although a further increase is required to address the magnitude of needs. There have been efforts to ensure a more expedited process for the issuance of visas for UN international staff, though more needs to be done to better facilitate INGO staff visas. Approval has been granted to facilitate the opening of 3 new humanitarian hubs in Aleppo, Qamishley and Sweida to ensure a more effective access to hard-to-reach areas.

UN agencies, IOM and INGOs working under the 2014 SHARP seek US\$ \$2.27 billion through 122 projects to respond to an estimated 9.3 million people across the country who are in need of critical life-saving humanitarian assistance and protection. Donors have generously supported the humanitarian response in Syria. As of 15 December 2013, the SHARP 2013 has received 74% percent of requirements or a net sum of \$1.046 billion, out of the total funding requirement of \$1.4 billion. The funding provided to the Syrian humanitarian response represents the highest level of funding of any humanitarian appeal to date, though still falls short of addressing the magnitude of needs.

Table I: Requirements per sector

Syria Humanitarian Assistance Response Plan (SHARP) 2014
as of 15 December 2013

Sector	Requirements (\$)
COORDINATION	50,814,214
EARLY RECOVERY AND LIVELIHOODS	71,054,434
EDUCATION	103,163,335
EMERGENCY TELECOMMUNICATIONS (ETC)	1,584,010
FOOD AND AGRICULTURE	1,118,741,037
HEALTH	233,376,172
LOGISTICS	12,060,910
NON-FOOD ITEMS (NFIs) AND SHELTER	420,903,819
NUTRITION	29,999,820
PROTECTION AND COMMUNITY SERVICES	73,493,864
STAFF SAFETY SERVICES	6,183,984
WASH	154,773,755
Grand Total	2,276,149,354

Compiled by OCHA on the basis of information provided by appealing organizations.

Table II: Requirements per organization

Appealing Organization	Requirements (\$)
ACF - Spain	1,066,570
ADRA	6,328,753
DRC	55,248,463
FAO	43,576,000
IMC	1,075,670
IOM	68,137,610
OCHA	8,045,138
OXFAM GB	11,600,000
PU	10,477,440
Tdl - It	535,963
UN Resident Coordinator's Office	20,162,010
UNDP	52,737,550
UNDSS	3,494,000

Appealing Organization	Requirements (\$)
UNESCO	3,450,000
UNFPA	33,293,734
UN-HABITAT	13,465,670
UNHCR	273,414,937
UNICEF	222,192,134
UNMAS	4,762,898
UNRWA	310,000,000
WFP	947,118,662
WHO	185,966,152
Grand Total	2,276,149,354

Compiled by OCHA on the basis of information provided by appealing organizations.

PROGRESS UNDER SHARP 2013

Sector achievements

A number of key milestones have been achieved as at the end of November 2013 by humanitarian actors in full cooperation with the Government of Syria. Significant progress towards delivery of the revised 2013 SHARP (which aimed to reach an estimated 6.8 million people in need by December 2013), has been achieved in an extremely challenging operational environment.

Key milestones as of October 2013 include:

Food and agriculture sector

- WFP, with partners, including the Syrian Arab Red Crescent (SARC) and 25 local NGOs⁴, provided food rations to almost 3.4 million people across all 14 governorates of Syria during the October 2013 cycle: 85 percent of the target. Approximately half of all food distributions take place in areas of active crisis. 85,000 people received agricultural inputs assistance enabling them to restart production activities and to generate income.

WASH sector

- Through the dedication and constant efforts of Ministry of Water Resources (MoWR) staff and water institutions, 70% of Syrians are being provided with safe water in line with Syrian water standard No. 45.
- UNICEF and partners, in collaboration with MoWR, SARC and national NGOs,⁵ have enabled more than 10 million people to access safe water, including approximately 1.65 million people through the installation of generators and 8.8 million through water purification supplies. An estimated 35 percent of beneficiaries reached were located in areas affected by the crisis or areas with presence of armed groups.
- WHO provided disinfection chemicals and water purification units in areas where water-borne diseases were reported (Dara'a, Der Ezzor, Al Hassakeh, Aleppo and Rural Damascus), along with sterilizers for medical waste management.

Health sector

- The health sector provided approximately 3.6 million people with health consultations, treatments and interventions, and an additional 2.3 million people with emergency health kits, burn kits and other kits.
- Between January and October 2013, the WHO provided health services and distributed medicines and equipment to 2,119,122 beneficiaries, while an additional 1,559,150 beneficiaries received kits in all 14 governorates.
- Between March and June, WHO and UNICEF supported the Ministry of Health (MOH) to reach 1,086,218 children (between six months and 15 years old) through measles, mumps and rubella (MMR) campaigns. As of 26 November 1,138,259 beneficiaries received the MMR vaccination.
- UNICEF increased its mobile medical teams from 22 to 51 which together with centres in Damascus, Quneitra and Rural Damascus provided 246,546 internally displaced children with medical check-ups (the target is to reach 570,000 IDP children by the end of this year).
- UNFPA assisted the MoH, SARC and SFPA health facilities and mobile teams in Aleppo, As-Sweida, Damascus, Deir-ez-Zor, Homs, Idleb and Rural Damascus with life-saving reproductive health supplies to meet the needs of 1.8 million women, including for emergency obstetric care services. In addition 80,000 dignity kits

⁴ Al-Ihsan; Al-Ta'alouf; Mn Aji Halab; Ahl Al-Kheer; Hefz El-Ne'ma; Lamset Shefa; Orphans Project; Al-Birr and Social Services – Ar-Raqqa, Dar'a, Homs, Idleb, Qamishly; Rural Damascus; Al Ahdath Protection Society; Islamic Charity; Agha Khan; Social Care Society; Armenian Catholic Church; Homs Islamic Orphan; Shabab Al-Kheer; Al-Ikha'a Charity; Al-Mabarar Charity; Shabab Ar-Raqqa Al-Tatoweii; Ahl Al-Sham Initiative; Kiswa Charity; Social Case Society; Al-Botul.

⁵ Ahel Alkher, Al Birr, Al Ihsan, AlNama, Child care, For Aleppo NGO, Khaled Ibn Al-Waleed, Syrian Family Planning Association (SFPA), The Islamic Association Charity for Relief and Development – Aid (Aoun), Yadan Bi Yad, Secours Islamique – France (SIF).

were distributed to vulnerable populations in affected areas. UNFPA also delivered 168,000 intravenous fluids to health facilities nationwide together with MoH hospitals serving vulnerable IDPs.

- WHO has increased the capacity of health worker in surveillance and response, health information management, infection control, first aid, diagnosis and management of diarrhea, brucellosis, tuberculosis, acute and severe malnutrition, diabetes and to address mental health. Through an expanded network of national NGOs working in health, capacity building initiatives were also undertaken to provide a more effective response.

Polio response

- A national polio campaign was launched on 24 October 2013, targeting 2.2 million children under 5 years of age with the oraltrivalent polio vaccine (2,210,121 received the polio vaccine of which 758,257 were children under the age of five). There are plans for a second round of vaccinations in December 2013. Additionally, four to six national campaigns will be conducted in 2014 to interrupt the circulation of the wild virus. In infected areas, there will be door-to-door campaigns with shorter intervals. Efforts were made by WHO to increase the sensitivity of the acute flaccid paralysis (AFP) surveillance system at the national level to detect, report and analyse AFP cases for the presence of the wild polio virus.
- A six-month ‘Emergency Response to the Middle East Polio Outbreak’ strategic plan has been developed by WHO and UNICEF in cooperation with respective health ministries and other UN partners. The plan calls for multiple rounds of supplementary immunization activities, reinforced surveillance, robust communication and social mobilization activities, and technical assistance to support operations.

Nutrition sector

- UNICEF, WFP, WHO and partners, including MoH, SARC and national NGOs⁶ have reached 266,680 children under five years with nutrition supplements to prevent and treat malnutrition. They trained 440 health staff and community health volunteers on nutrition in emergencies, and the management and treatment of moderate and severe acute malnutrition.

Shelter/NFI sector

- Shelter sector agencies completed the rehabilitation of 105 collective shelters in 2013 (as of 30 September) benefiting some 31,500 individuals. Of the 105 shelters rehabilitated, UNHCR and partners rehabilitated 67 and IOM rehabilitated 38. Rehabilitation work currently is underway at an additional 121 collective shelters.
- For IDPs living outside of collective shelters, sector partners jointly developed a Private Shelter Upgrade Project focused on improving the physical conditions of private shelters (mostly unfinished buildings) while sealing-off partially damaged houses and providing WASH kits. This project is being carried out in Rural Damascus, Sweida, Dara’a, Homs, Hama, Lattakia and Aleppo. The need for this intervention increased in 2013, and especially in Aleppo, as a result of the government policy to evacuate IDPs from school buildings: in Aleppo alone, UNHCR and partners are upgrading 70 unfinished private buildings, benefitting some 4,000 families.
- Winterization measures in both the collective shelter rehabilitation and Private Shelter Upgrade projects benefitted more than 50,000 people (8,000 families).
- NFI sector partners reached more than 3.2 million people, across all 14 governorates, with core relief items (CRIs). UNHCR dispatches 200-300 trucks a week directly to distribution points or to SARC warehouses. Distribution of assistance is carried out by SARC and/or in cooperation with NGOs partners with geographical advantage. Additional partnerships developed to reach IDPs in areas such as Raqqa and Dara’a Governorates.
- Sector agreement on a standardized package of Core Relief Items (CRIs) to include mattresses, blankets, plastic sheets, diapers for children/elderly/disabled, sanitary napkins, hygiene kits, kitchen sets, and jerry cans, as well as winterized core relief items such as warm clothing, high thermal blankets, additional plastic sheets, solar lamps and other essential relief items. To support the local economy, NFI sector partners continue to

⁶ Al Ihsan, Al-Ta'alof Charity, Circassian charity association, Insha'at, SAHPD, Dummar charity, Small Roses Society, Social care charity association - Hefz El Nemah, SFFA.

encourage wherever possible, local procurement, although the majority the CRIs have to be purchased internationally as a result of domestic supply constraints.

- Financial assistance was provided to 24,648 families (131,642 individuals) by UNHCR. Beneficiaries are selected based on protection and vulnerability criteria, e.g. women-headed households, elderly, persons with disability, and with serious medical problems. In Hassakeh, where access is significant challenge, financial assistance has been provided to some 47,000 individuals in place of CRIs.
- NFI sector partners introduced a decentralized approach in order to be closer to beneficiaries and to enhance rapid response, outreach and monitoring capacity and to have more flexibility if the security worsens.

Protection and community services sector

- Protection and community service programs implemented by UNHCR and partners reached over 150,000 persons, through 8 community centres (in Aleppo, Damascus, Rural Damascus, Dara'a, Sweida and Tartous Governorates). A range of legal and social services were provided including psychosocial activities in a protective and calm space. A community mobilization program was rolled out in 8 governorates through a network of outreach and support volunteers. Through this mechanism, more than 40 community-based initiatives were implemented supporting affected populations to implement solutions to address their concerns in a participatory manner.
- 460,000 children have been supported by UNICEF and partners with psychosocial support activities to cope with the distress and disruption caused by violence and displacement. In addition, child protection sector partners (UNICEF, IMC, UNHCR, DRC, IOM) trained over 200 volunteers, social workers, teachers, doctors and counselors on psychosocial activities, child-friendly spaces, early childhood development, child labour, domestic violence, trafficking and child recruitment.
- More than 78,650 survivors of GBV assisted with psychosocial support, psychological first aid, medical counseling and vocational skills programs through mobile teams and clinics run by UNFPA, UNHCR, DRC, IMC and IOM. In addition awareness-raising and specialised training sessions on GBV prevention and response and trafficking were implemented.
- IOM supported the emergency evacuation and repatriation of 861 vulnerable stranded migrant workers.
- Protection assessments, visits and referrals in official IDP communal shelters were undertaken by UNHCR.
- Psychosocial support training was provided by IMC, DRC, IOM and UNHCR to IDP collective shelter managers, frontline workers and social workers.
- UNHCR implemented a capacity strengthening programme in protection for sector partners which included training on humanitarian principles and international humanitarian law, needs assessments, the code of conduct for humanitarian workers and protection in emergencies.
- Training in protection mainstreaming was implemented by UNHCR for the protection, shelter/NFI, food, shelter, WASH, early recovery and livelihoods sectors in cooperation with the global protection cluster.

Education sector

- UNICEF and the MoE launched a "Back to Learning" campaign to promote enrolment and provide school bags with stationery supplies to 1 million children across all 14 governorates. Additionally, UNICEF worked to develop a self-learning materials pack that will assist in providing an education to children who are unable to go to school.

No lost generation strategy

Significant efforts have been made over the past two years to support education and protection interventions for Syrian children. Their needs are increasing exponentially however, due to a massive surge in the number of out of school children over the past year. A concerted effort is needed to expand existing support.

To respond to this need, and building on the groundwork established by successive iterations of the SHARP and the Regional Response Plan (RRP), a "No Lost Generation" strategy was developed to ensure that a generation of Syrian children whether living inside the country or abroad as refugees are provided with the protective environment and learning opportunities to reclaim their childhood. It notes that the future of this generation depends on strategic assistance to support their education, and to physical and psychological protection

The strategy aims to shed light on the gravity of the education and protection situation facing Syrian children, to make visible this invisible tragedy and to reverse current trends. It acknowledges the severe psychological impact that a protracted emergency of this nature can have on children and its long-term implications. The strategy outlines a multiyear, comprehensive approach to education and protection for all Syrian children, both inside Syria and in neighbouring countries, as well as for the communities hosting them. It covers both immediate humanitarian response interventions as well as longer term support that will build the resilience of children, communities and the education and protection systems and infrastructure that are so critical to their futures.

Palestine refugees

- UNRWA serves Palestine refugees across all humanitarian sectors with relief operations focusing on food, NFIs, health (including tertiary and hospital care), WASH, shelter and emergency education. The Agency has retained its capacity of 3,700 staff and 150 installations, and operates in Damascus, Aleppo, Dara'a, Homs, Hama and Latakia. An additional office is planned for Tartous in 2014.
- Cash assistance for food and NFIs remains the most critical relief modality, with approximately 420,000 Palestine refugees affected or displaced by the crisis receiving emergency cash grants throughout 2013.
- In-kind assistance was also deployed to support the most vulnerable Palestine refugee families, with 148,000 NFIs (including hygiene kits, tents, bedding, cooking equipment and clothing) and 119,000 food parcels.
- UNRWA also implemented a psycho-social support programme focusing on school children and internally displaced refugees;
- Distance, televised and online learning materials were developed for Palestine refugee children unable to access schools.
- 9,029 hospital treatments; 457,946 out-patient consultations; 3,334 pre-natal and birthing services provided to Palestine refugees from January to September, 2013.
- Use of 41 alternative buildings to re-open schools damaged or made inaccessible by crisis.

Early recovery and livelihoods sector

- UNDP has focused on enhancing the resilience of communities through quick impact projects, with a special focus on vulnerable groups (youth, women-headed households and people with disabilities). Projects include labour intensive emergency employment for repairing basic community infrastructure and improving service delivery (such as cash-for-work schemes to collect solid waste and remove debris), and the provision of emergency support to restore and stabilise disrupted livelihoods (start-up grants, assets replacement and targeted vocational training). These, and community psycho-social support and social cohesion initiatives are currently implemented in Al-Hassakeh, Damascus, Dara'a, Deir-ez-Zor, Hama, Homs, Rural Damascus and Tartous.

Joint humanitarian convoys in to hard-to-reach areas

- From 31 January to 12 December 2013; 2.9 million people have been reached through 42 joint humanitarian convoys facilitated by OCHA, the logistics cluster and SARC, in hard-to-reach areas in Aleppo, Ar-Raqqa, Dara'a, Deir-ez-Zor, Hama, Homs and Idlib governorates, to provide a one-off delivery of emergency assistance. These operations have required intense coordination and advocacy on the ground to ensure the safe passage of the relief.

Services for the humanitarian community (logistics & telecommunications)

- In 2013, the logistics cluster transported over 19,000 m³ of relief items to locations inside Syria on behalf of 15 organizations (ACF, DRC, FAO, IOM, IMC, Mercy Corps, Premiere Urgence, Secours Islamique France, UNDP, UNFPA, UNHCR, UNICEF, UNRWA, WFP, and WHO). The cargo transported includes essential shelter, WASH, agriculture, health, education, protection and food items.
- In 2013, the emergency telecommunications cluster (ETC) prepositioned equipment to outfit two inter-agency hubs inside Syria (Homs and Tartous), as well as setting up basic Inter-agency services in Homs. The ETC was able to provide shared data services for the UN Agencies and NGOs operating in Damascus, as well as guarantee a dedicated bandwidth for four agencies, IOM, OCHA, UNDP and UNICEF.

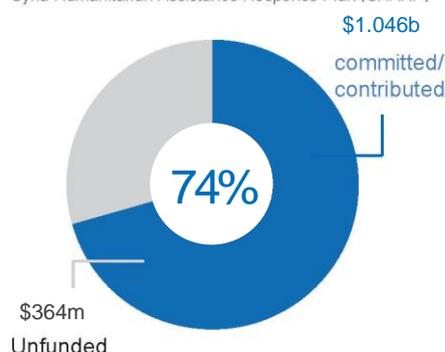
Review of humanitarian funding

SHARP FUNDING BY SECTOR

Requirements by sector (million \$)	Per cent funded by sector	Funded million \$	Unmet million \$
Food & agriculture 618	83%	512.2	105.7
NFIs and Shelter 343	14%	47.8	295.3
Health 177	62%	109.5	67.7
WASH 68	77%	52.6	15.8
Education 46	82%	37.4	8.3
Early Recovery & Livelihoods 43	16%	6.7	36.4
Protection & Community Services 35	58%	20.1	14.6
Coordination 27	109%	29.7	0
Staff Safety Service 25	27%	6.9	18.5
Logistics Cluster 14	72%	10.4	4
Nutrition 11	35%	3.7	6.8
ETC Cluster 2	0%	0	2

The above does not include US\$ 158.2 M not yet allocated to specific sectors

\$1.41b FOR SYRIA
Syria Humanitarian Assistance Response Plan (SHARP)



The original requirement for the 2013 SHARP was \$563,462,615. It was revised in June 2013 to \$1,406,996,224. Funding received to date is \$995.5 million or 71% of the revised requirement as at 13 December. This funding represents the highest percentage in absolute terms compared to other appeals.

TOP 10 CONTRIBUTORS TO SHARP

Contributor	million USD
United States	314.7
United Kingdom	202.6
European Commission	120.5
Kuwait	71.6
Germany	54.4
Central Emergency Response Fund (CERF)	40.4
Canada	36.9
Australia	28.0
Japan	17.7
Russian Federation	8.6

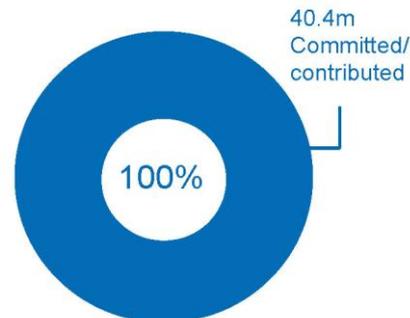
The best-funded sectors are coordination and support (109%), food and agriculture (83%), Education (82%) and WASH (77%). Emergency telecommunications did not receive any funding, while non-food items (NFIs) and shelter received 14% and early recovery 16% of requested funding. That said, funding towards food and agriculture masks a significant imbalance between funding within the sectors food and agricultural component. The under-funding of some sectors has reduced both the number of people who have received assistance, and in some cases it has degraded the depth of the intervention. Organizations have thus had to triage preventative programming in favour of life-saving activities. While some agencies have been able to mitigate these effects through the reallocation of funding

streams, others have been forced to reduce programming with a range of impacts.

CERF Funding

Allocations from the Central Emergency Response Fund (CERF) have provided UN agencies and their partners with flexible and timely funding that has enabled them scale up their response to effectively respond to significant time-critical and/or life-saving humanitarian interventions. The CERF channelled \$40 million to the Syria crisis in 2013 and total of \$81 million since the start of the crisis. The most recent CERF allocation of \$20.4 million funds activities in all sectors across the country.

CERF Syrian Arab Republic 2013
date: 2 Dec 2013



ERF Funds

As of 23 October 2013, the Emergency Response Fund (ERF) has allocated \$22 million for projects in Syria. There has been a targeted effort to use this as a tool to strengthen the capacity of local NGOs and widen access in hard-to-reach areas. The rationale of the ERF is to fill funding gaps rapidly and strategically, and to serve as a feasible funding channel for donors that do not wish to identify their recipients directly or manage the mechanics of multiple contracts.

HUMANITARIAN NEEDS OVERVIEW

Impact of the crisis

Drivers and underlying factors

Escalating crisis

A number of factors, including violence, attacks on social and economic infrastructure, and disruption of public services, are the central drivers of the humanitarian crisis. Unilateral economic and financial sanctions have further exacerbated the humanitarian situation. Certain densely populated areas have witnessed alarming levels of civilian casualties and destruction to homes and infrastructure thus raising concerns of human rights violations. As of October 2013, the UN estimates that more than 6.5 million people are internally displaced within Syria, including 270,000 displaced Palestine refugees. The UN Security Council (UNSC) noted in a Presidential Statement on 2 October 2013⁷ that several million people, in particular internally displaced persons, nearly half of whom are children, are in need of immediate humanitarian assistance. It further noted that without increased humanitarian assistance their lives would be at risk. Escalation in the use of inflammatory rhetoric and an increase in the targeting of certain components of the Syrian society due to their religious or ethnic affiliation is adding a layer of complexity to the crisis, as sectarian elements within the crisis may jeopardize the social cohesion of the different communities in Syria, and trigger regional sectarian tensions.

Deepening economic crisis, shrinking resilience and coping mechanisms

A deep economic recession, fluctuating national currency, unilateral economic and financial sanctions, spiking food and fuel prices and disruption of markets has contributed to the extreme vulnerability of the population in Syria. In addition to increasing poverty, economic disparity and rising unemployment, there is a large proportion of youth who are unemployed and increasingly disillusioned, thus leading to high-risk coping strategies. The country is facing a critical 'brain drain' of professionals, including teachers, doctors and skilled labourers, as people leave for other countries.

The economic decline is largely the result of a combination of rising fuel prices, widespread insecurity, access constraints, power shortages and impact of unilateral economic and financial sanctions. Initial estimates show that more than 20,000 businesses have closed.⁸ These unilateral economic and financial sanctions have further constrained Syria's capacity to collect revenue through exports, and has challenged the importation of essential goods and services. International financial institutions have been reluctant to service Syrian individuals and private businesses thereby negatively impacting the import-export capacity of the private sector. The Syrian Pound has depreciated by 155 percent, between March 2011 and October 2013⁹.



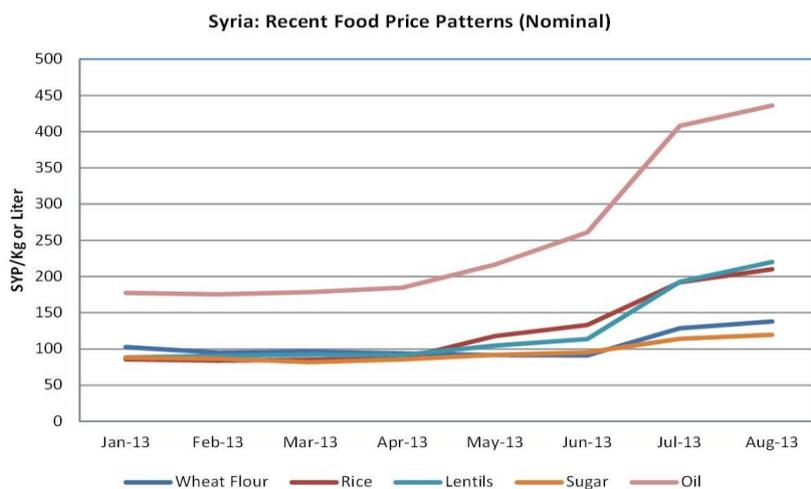
Source: FreeCurrencyRates. The graphs and data above are based on latest intra-day rates or daily fixed rates (whichever is available).

⁷ UN Security Council, Statement by the President of the Security Council, 2 October 2013, S/PRST/2013/15.

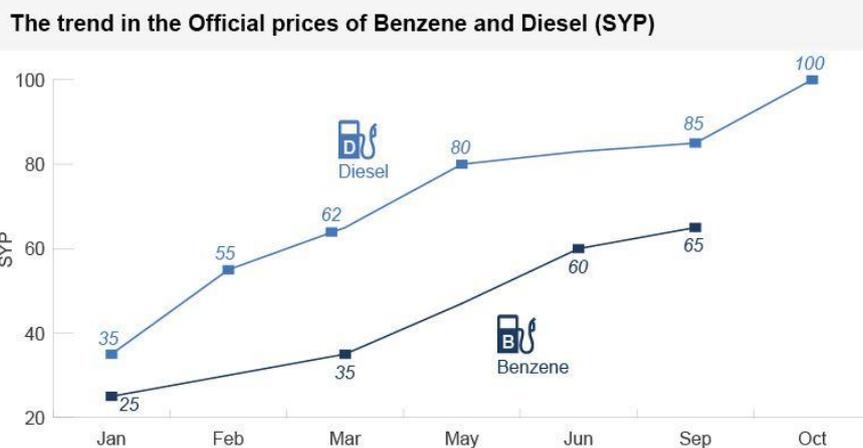
⁸ Human Development Index for Syria, 2013.

⁹ Official market rate.

Purchasing power has declined in the face of skyrocketing food, fuel and medicine prices. In July 2013, projections indicated that food-price inflation reached as high as 100 percent in some areas of Syria. WFP market price monitoring data reflects an increase of 30-60 percent in the price of basic imported commodities, such as oil, rice and lentils during the first half of 2013, with even more significant price rises between June and August, including up to 94 percent for lentils over this period. The official price of fuel has skyrocketed from SYP 35 to SYP 100, an increase of 185% between January and October 2013. Similarly, the price of diesel has jumped from SYP 25 to SYP 62, an increase of 148%, during the same period.¹⁰ Patients who were previously reliant on the private health system and able to cover their medical fees in 2010 are progressively becoming dependent upon an overburdened and subsidized public health system. The provision of life-saving services including medicines and medical supplies for those suffering from non-communicable diseases (NCDs) is especially constrained for displaced populations and those residing in hard-to-reach areas.



Source: Food and Agriculture Sector - preliminary needs analysis (7 Oct 2013)



Source: Logistics Cluster - WFP Fuel Prices Table – October 2013

The millions of people who have been displaced as a result of the crisis to areas within Syria or outside the country, are typically compelled to leave behind many of their assets, thereby increasing their reliance on host communities support and humanitarian aid to survive. This heightens their vulnerability and exposure to a range of risks. Host communities and displaced persons have resorted to negative coping mechanisms, including removing children

¹⁰ Syria Logistics Cluster Fuel Analysis – October 2013

from school, reducing quality and quantity of foods consumed, residing in crowded and unclean shelters, begging, child labour and other risky income-generating activities to cope with the crisis. The Joint FAO/WFP Crop and Food Security Assessment Mission (CFSAM) in July 2013 found agricultural workers engaged in disruptive coping mechanisms, such as the sale of household assets and livestock, and in some cases of forced early marriage and temporary work for armed groups. WFP beneficiaries increasingly report resorting to begging in order to survive – from 5 to 9 percent in March to May 2013.¹¹ Given the declining capacity of host communities to cope with the crisis themselves let alone support displaced people, secondary and additional displacement is expected.

Increased disruption of health and social services

The crisis has disrupted the capacity of the government and private health centers and clinics in affected areas to provide basic health and social services to the population, contributing to increased mortality and morbidity, higher risk of outbreak of communicable disease, increased risk from vaccine-preventable diseases, increased vulnerability to mental health and psychosocial distress and disorders and incidence of malnutrition and decreased child and reproductive health outcomes. Extreme stress on infrastructure systems and severe deterioration of urban functionality have left many towns and large parts of cities without markets and social and public services. These systemic disruptions have also become a cause of further displacement.

If the crisis continues, the current health situation is anticipated to deteriorate further and significantly disrupt vaccination coverage rates. Interruption to the regular distribution of vaccines, increased wastage due to difficulties in maintaining the cold chain and access constraints have reduced vaccination coverage rates and increased vulnerability to communicable diseases such as polio and measles.

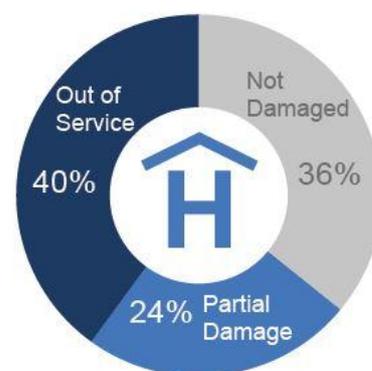
As of November 2013, 17 cases of polio of foreign origin were confirmed in Deir-ez-Zor governorate, one case in rural Damascus and one in Aleppo, marking the first time since 1999 that polio has been reported in Syria. Previously, a polio-free country due to its effective polio eradication programme employing a routine immunization system, Supplementary Immunization Activities (SIAs) and an Acute Flaccid Paralysis (AFP) surveillance system, the immunization rates have dropped and, currently, there is widespread circulation of the wild polio virus in the country.

According to a Ministry of Health (MoH) report in October 2013, 64 percent of public hospitals and 38 percent of public healthcare centres are either damaged or out of service due to the crisis. Forty-nine percent of primary healthcare centres which provided reproductive healthcare services are reported as not functional in the affected governorates. Eight of the 23 health centres operated by UNWRA across Syria have been forced to close due to crisis-related damage or insecurity, and a further 7 are working on reduced hours. A disruption to fuel and electricity has forced many hospitals to operate on reduced capacity or to close, despite an increased caseload of patients. There remains a critical shortage of life-saving medicines and medical supplies, including medicines needed for treatment of chronic diseases.¹² Prior to the crisis, Syria met 90% of the demand for medicines with domestic production. Substantial damage to pharmaceutical plants has led to a 65-70 percent decline in domestic production while unilateral economic and financial sanctions limit substantially the importation of medicines and medical supplies.

Dispatching humanitarian medical supplies, when they are available, to areas in which there is presence of armed groups is challenging. The health workforce has been significantly reduced as many numbers of doctors are outside of Syria.¹³ Affected governorates lack qualified medical expertise particularly for trauma, anesthesia and specialised laboratory personnel. For those health workers that have remained, it is difficult and dangerous to report to duty under the current circumstances, with a significant number of public health workers from the public system reportedly directly affected by crisis (127 killed and 111 injured).

According to the Ministry of Education (MoE)¹⁴, approximately 3,004 schools have been damaged or destroyed and 1,068 schools are being used as shelters for displaced persons, while other schools cannot be reached by the MoE. The MoE estimates at least 1.9 million children have dropped out of school since the onset of the crisis, approximately 1.1 million of whom remain in Syria (UNHCR Syria Regional Refugee Response). For much of

64% of public hospitals have been affected by the conflict



Source: Ministry of Health October 2013

¹¹ FAO/WFP: Joint Crop and Food Security Assessment Mission to the Syrian Arab Republic, July 2013.

¹² WHO Regional Situation Report: Syrian Arab Republic, Jordan, Lebanon, Iraq Issue 14, 24 April-23 May 2013.

¹³ According to the Office of the Prime Minister, September 2013.

¹⁴ Government of Syria, Ministry of Education, October 2013.

2013, 76 out of 118 schools in Syria supported by UNRWA were closed due to damage or insecurity, while a further 10 operated as emergency shelters for displaced Palestine refugees. As a result, only 35 percent of Palestine refugee children regularly accessed school in the first half of 2013; though encouragingly, this number rose to over 60 percent at the beginning of the new semester in 2013. UNRWA has been granted the use of 41 government buildings in safer areas as alternative school locations.

The Ministry of Water Resources (MoWR) estimates a decline of approximately 40 percent in clean water available in the country overall, but in some cases, water production has dropped down to zero percent (production for a limited number of days and at certain times), contributing to the overall decline in health conditions as people depend on unsafe water sources. In Al-Hassakeh, the interruption of the power supply to water treatment plant was directly correlated with incidence of diarrhea cases in Al Shadadeh village. The availability of safe and clean water is severely limited in areas where extensive damage has occurred to the water and sanitation infrastructure, such as Aleppo, Ar-Raqqa, Damascus, Deir-ez-Zor, Homs, Idleb and Rural Damascus. An estimated 35 percent of water treatment plants have been damaged while the national production of water treatment chemicals has come to a halt. Most water utility/feeder establishments depend upon provision of the chemicals needed for potable water production by humanitarian actors.

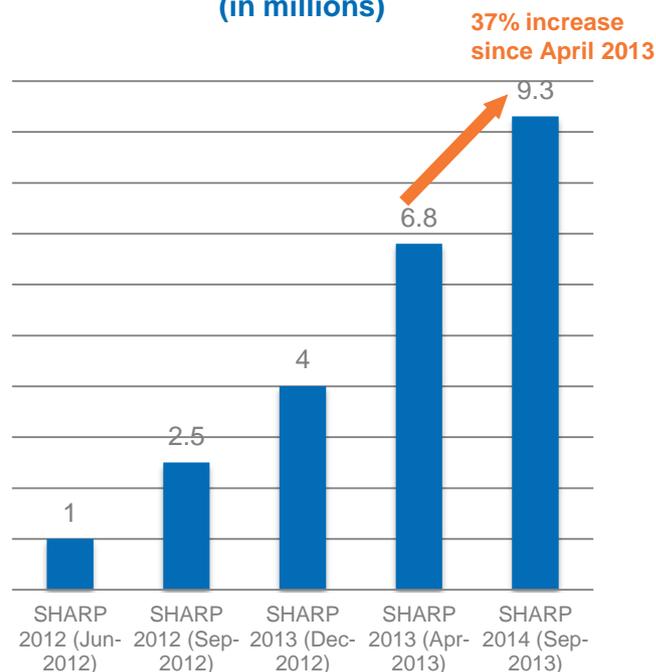
Lower efficiency at water treatment plants has increased the level of discharge of untreated wastewater which is associated with high risk of ground and surface water contamination. The MoWR warns of an eminent environmental disaster related to the safe breakdown of waste water management and hospital waste disposal. Meanwhile, solid waste disposal and collection has been disrupted across the country, and in particular in large cities. In parts of Aleppo, Deir-ez-Zor, Homs, Idleb and Rural Damascus, solid waste management has emerged as a huge public health concern due to lack of garbage collection.

Scope of the crisis and demographic profile of the affected population

The UN estimates 9.3 million people are in need of humanitarian assistance inside Syria, more than 6.5 million of whom are internally displaced.¹⁵ Close to half of the people remaining in Syria (44% of an estimated 21.3 million people) require humanitarian aid, a 37 percent increase since April 2013.

Internally displaced persons, host communities, and other communities are directly impacted by the crisis, as are at least 270,000 Palestine refugees. The magnitude of humanitarian needs are mainly concentrated within active crisis zones, areas of large scale displacement, and final destination/receiving areas. Areas that are currently hosting displaced populations are experiencing increasing strain on public and basic facilities. Some IDPs are concentrated in areas with limited or no crisis-related damage and with some level of urban functionality to enable access to basic social services, health and markets. Internally displaced families who have lost their income sources, the urban poor who are mainly dependent upon markets, subsistence farmers, small-scale herders, casual labourers and petty traders are among the most affected groups.

Number of people in need (in millions)



People are expected to continue to move away from areas that have experienced significant, damage and deteriorated basic and health services, to seek safety and assistance elsewhere. In parallel, the number of people in need inside Syria is expected to increase as the concentration of population overwhelms local basic and health services capacity, access to food and water decreases and alternative livelihood opportunities become less.

¹⁵ The planning figures represent estimates derived from triangulation across a number of sources.

Syrian Arab Republic: People in Need and IDPs by Governorate (as of 16 December 2013)

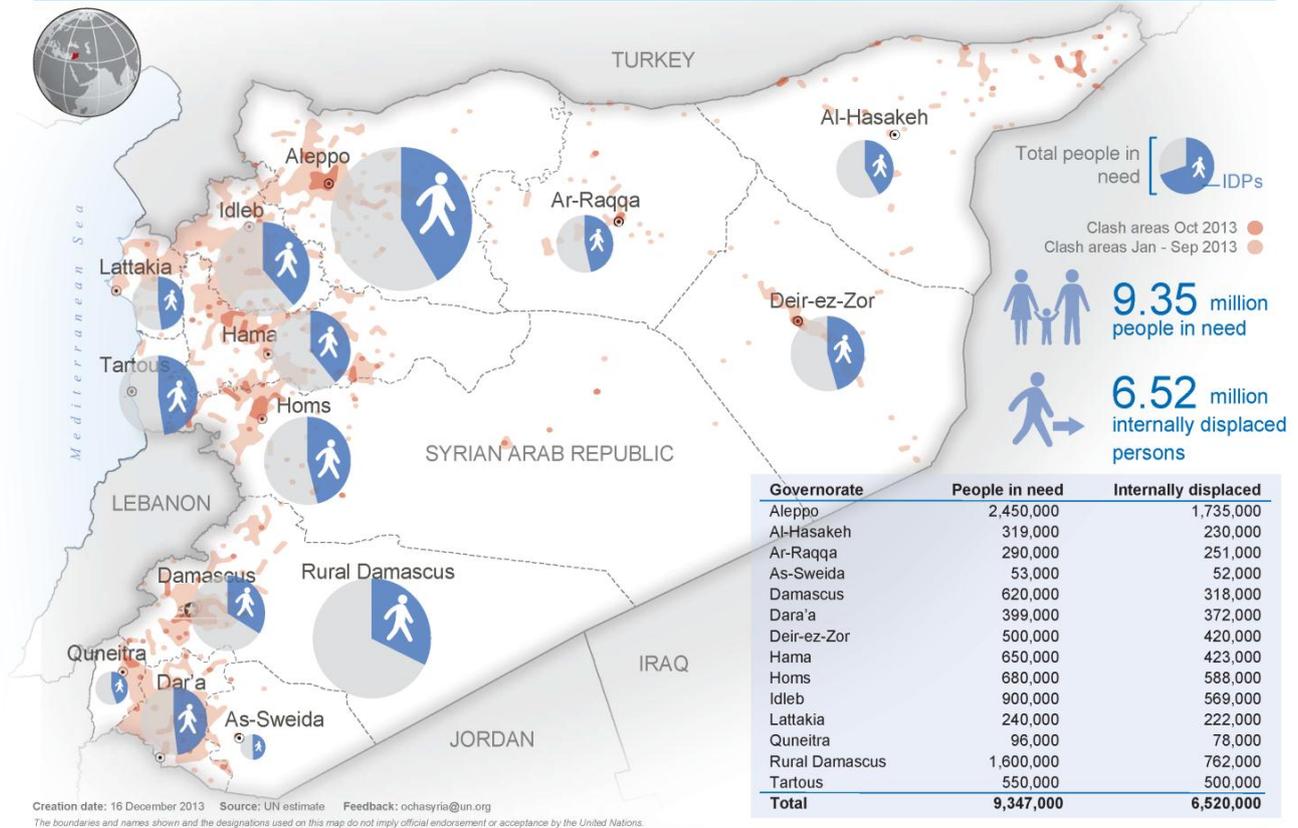


Figure 2: Statistics of the population

6.5 million Internally displaced people (UN Estimates, October 2013)

31%

9.3 million People in need of humanitarian assistance (UN Estimates, October 2013)

44%

4.27 million Children in need of humanitarian assistance (UN Estimates, October 2013)

22%

Source: UN Estimates, triangulated from a number of sources¹⁶

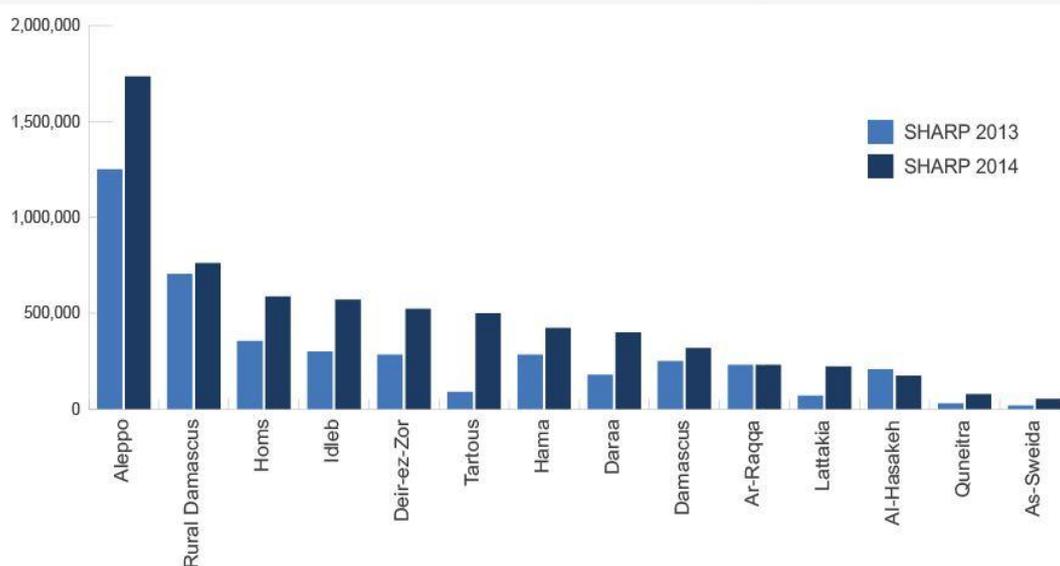
¹⁶ The planning figures represent estimates derived from triangulation across a number of sources.

Crisis-affected population groups

Internally displaced people

According to the Ministry of Local Administration (MoLA), as of November 2013, only 2.9 percent of IDPs, namely 188,379 individuals (34,968 families), are accommodated in the 938 available official collective shelters. The remaining and overwhelming majority of IDPs are hosted by neighbours, families and friends, or they live in unofficial shelters, unfinished buildings, makeshift accommodation, with limited protection from the elements. Less is known about IDPs residing outside official collective shelters mainly due to access challenges and the dispersed nature of other IDP living arrangements. Areas which are no longer facing violence have seen people trying to re-establish their lives. Most IDPs left their homes with only a few possessions and very limited financial resources and must rely upon increasingly on overburdened host communities and humanitarian assistance, including on the provision of emergency assistance of core relief items.

Internally displaced persons (IDPs) Comparison between SHARP 2013 and SHARP 2014



Source: UN Estimates, triangulated from a number of sources

Injured, due to the crisis

Due to a steep increase in the number of people injured as a result of the crisis, including due to injuries from explosive remnants particularly in the past six months, approximately 575,000 people in Syria, as of end of September 2013, were estimated to have been injured directly or indirectly and are in need of urgent healthcare.¹⁷ The concurrent disruption of the health system has resulted therefore, in an urgent need for life-saving interventions, including trauma care and management, life-saving medicines, supplies and equipment.

Persons with disabilities and the elderly

The number of persons with disabilities has increased as a direct result of the crisis. Extremely vulnerable to human rights violations, persons with disabilities face difficulties in leaving crisis zones, once displaced, they face particular challenges in accessing adequate shelter, tailored assistance and services to address specific needs. They are at risk of neglect, exclusion and abuse as a result of their condition, and particularly young men with disabilities who are the most disproportionately affected as a result of the crisis. The elderly and, in particular, unaccompanied elders are gradually and increasingly in need of enhanced assistance and protection especially in collective shelters and during the cold weather.

¹⁷ The calculation is based on WHO casualty rate calculation where injuries are estimated to account for 5 times the number of the dead.

Palestine refugees in Syria

As of September 2013, Palestine refugees remain one of the most directly affected groups within the crisis. Rates of displacement which are in excess of 50 percent, are significantly higher than those of the wider Syrian population, as Palestine residential areas have become the scenes of confrontations among armed groups. UNRWA now estimates that at least 270,000 Palestine refugees have been displaced, while 440,000 Palestine refugees require urgent humanitarian assistance, representing at least 80 percent of the Palestine refugees in Syria.

In addition, UNRWA estimates that approximately 46,000 Palestine refugee homes have been damaged or destroyed, while over 10,500 Palestine refugees are currently sheltering in UNRWA and non-UNRWA facilities across Syria. Safer areas have been inundated with over 270,000 internally displaced Palestine refugees, causing widespread overcrowding and an unsustainable increase in the cost of rental accommodation. Many refugees have been forced into a pattern of repeated and traumatic displacement, as the shifting lines of the crisis engulf areas that had previously been considered safe. Many Palestine refugees lack the social safety nets and the means to endure the crisis without significant and lasting harm to their wellbeing.

Children

Half of the affected population inside Syria are children, and approximately 4.27 million children are affected by the crisis. This includes children who have been displaced; lost homes, family members, friends and possessions; suffer from health or nutrition concerns; do not attend school (an estimated 1 million); suffer abuse; have been recruited into armed groups and/or witnessed violence firsthand. Opportunities for children to grow into productive adults are increasingly constrained with deteriorating access to basic education, water and sanitation, healthcare and other basic necessities.¹⁸

Women and girls

Women, particularly pregnant and lactating women are increasingly becoming vulnerable as the crisis limits access to basic services, including to reproductive healthcare services, and they are exposed to reinforced negative practices and perceptions. Societal norms, attitudes and beliefs have become more pronounced leading to increased incidence of forced early marriage and other forms of sexual and gender-based violence and exploitation. Increased restrictions on mobility outside the home in some areas of the country affect access to opportunities, such as employment and education. Evidence from field activities such as shelter visits and cash distributions indicate an increase in female headed households among affected population¹⁹.

Host communities

Official government figures indicate that more than 85 percent of IDPs live with relatives and extended family members. The impact on host families includes over-crowding in houses and apartments (sometimes up to 14 persons living in a room), and severely strained monthly budgets. This indicates a need for flexible community and household support including electricity, water, sanitation, skills training and livelihoods. As the crisis becomes more protracted, host families are less able to meet the burden of caring for additional family members or the IDPs they are currently hosting. With food scare and expensive, half of an average family's expenditure now goes towards purchasing basic food items thereby creating an unsustainable situation for many families, and results in the need for humanitarian assistance in order to effectively cope. Host communities in rural and urban centers are under tremendous pressure, particularly those living in remote towns and villages, as the capacity of the social support structures which have supported IDPs since the start of the crisis deteriorate.

Migrant workers

As of June 2013, the International Organization for Migration (IOM) estimated that there are over 6,800 extremely vulnerable migrant workers in Syria seeking assistance, the majority of whom are unaccompanied female migrants working for Syrian families. Migrant workers in Syria are particularly vulnerable due to absence of consular assistance, loss of documentation, exposure to exploitation physical, verbal and sexual abuse and limited access to healthcare. Under the current circumstances, migrant workers are at high risk of labour exploitation and human trafficking.

¹⁸ UNICEF: Syria's Children-A Lost Generation? A crisis report, March 2013.

¹⁹ WFP food monitoring at accessible food distribution locations confirms that almost half of families interviewed are headed by women.

Status of affected population – identified needs

Key threats to life and dignity

<i>Sector</i>	<i>Key Needs/Threats/Concerns</i>
Protection and Community Services	Violence against civilians Sexual and gender-based violence Displacement Explosive remnants Child protection concerns, including kidnapping, recruitment of children, unlawful detentions and family separation Lack of access to personal or property identification documentation Lack of access to social services and psychosocial support for vulnerable groups Specific risks facing Palestine refugees Land, property and housing rights
Food and Agriculture	Inadequate food combined with a reduction in agriculture production and livestock losses.
Health	Trauma injuries Disease outbreaks Lack of availability of medicines needed for life-saving treatments including for severe chronic diseases Targeting of hospitals Psychosocial malaise Gaps in basic and comprehensive emergency obstetric care Disruption to routine immunisations for vaccine-preventable diseases
Education	Targeting and occupation of schools by armed elements Disruption of schooling
Nutrition	Increasing number of acute severe malnutrition Increase in micro-nutrient deficiencies
WASH	Lack of means of adequate sanitation, hygiene and waste management in affected areas Disruption to water supply Increased risk of contamination of drinking water
Early Recovery and Livelihoods	Stressed livelihoods given limited coping mechanisms Damage to basic and social infrastructure
Shelter and NFIs	Overcrowded, insufficient and limited availability of adequate shelter Lack of basic household items

Protection needs

The protracted crisis, violence, attacks on social and economic infrastructure and disruption of public services are affecting the lives and safety of the civilian population. Unilateral economic and financial sanctions are also contributing. The entrenchment of violence in some densely populated areas exposes civilians to increased risks. As the crisis intensifies, many groups of people are at special risk. The crisis has curtailed people's ability to move in certain areas and it has disrupted their access to basic services or seek humanitarian assistance.

Increased displacement affecting Syrians and Palestine refugees is leading to serious impacts including; separation of families in the course of displacement; loss of civil identification documents which limits their access to s basic services; loss of their typical means of livelihood which in some cases leads to harmful practices; and crowded living conditions in host communities and collective shelters; and the protracted nature of displacement exacerbates vulnerability, tensions and safety risks. Individuals without documentation including those who lost or failed to register civil events (births, marriages etc.) are at risk and vulnerable to harassment, exploitation and other dangers. The status of property left behind by IDPs combined with the loss and/or destruction of their civil and property documentation is a significant concern.

The crisis is leading to increased incidences of sexual violence, domestic violence and forced early marriage. There is a concern that these incidents are under-reported due to societal norms, lack of specialised services and limited community awareness. Therefore, there is need for more trained and specialised medical staff, medicine and updated medical protocols together with community awareness and advocacy at large to ensure a more effective response.

Children are exposed to different forms of risks including; physical harm neglect and separation from their families, dropping out of school, limited access to services, child labour, kidnapping, recruitment and use, sexual exploitation, trafficking, and violent abuse. Reports indicate that children are increasingly being targeted in the crisis as a means of pressuring others, including their parents. The disruption of formal mechanisms for birth registration, a pre-crisis element of the national child protection system in Syria, places children at greater risk of exploitation, recruitment or use, and child labour.

The risk of injuries and death from explosive remnants remains high.²⁰ Children are in particular danger due to their natural curiosity and high mobility hence raising the immediate need for awareness raising and risk education. Furthermore, in affected areas explosive remnants prevent people from accessing basic services.

Critical gaps in essential healthcare delivery

As the crisis deepens, the adverse impact on the most vulnerable is increasing. Even where those in need can access health services, positive health outcomes are undermined by the effects of protracted stress and lowered resistance. With the growing risk of communicable diseases in the context of decreased immunization coverage, disrupted access to clean water and sanitation, as well as suboptimal nutrition, the direct impact is borne not only by those who suffer from chronic diseases, pregnant and lactating women, the elderly and displaced, but the population at large.

The number of injured people has continued to rise and is expected to reach 575,000 by the end of October 2013.²¹ In parallel, conditions are exacerbated by a disrupted health system: 64% of public hospitals have been affected out of which 24% are damaged and 40% are out of service. The number of primary healthcare centres out of service has increased: out of a total of 1,921 primary healthcare centres across the country, 674 (35%) have been affected, of which 31 (1%) have been damaged, 440 (23%) are out service and 203 (11%) are closed due to insecurity. While UNRWA has continued to provide health and hospitalization services to 540,000 Palestine refugees, its health centres have been similarly affected, with 7 of 23 closed due to damage or insecurity.

Fuel and electricity shortages have forced many hospitals to operate on reduced capacity or close despite being overburdened by ever-growing number of patients. More than 70 percent of health centres in Ar-Raqqa, Deir-ez-Zor and Homs are either damaged or out of service. Two thirds of pre-crisis ambulance capacity is out of service, thus impacting referrals.

With pharmaceutical plants substantially damaged the local production of medicine has been reduced by 65 – 70 percent, whereas prior to March 2011, 90 percent of medicines in Syria were produced domestically. Added to this is the side effect of unilateral economic and financial sanctions which has negatively impacted the availability of medicine and medical supplies. There is a critical shortage of life-saving medicines and medical supplies, including

²⁰ UN Mine Action Service

²¹ Estimation derived by the health sector.

for non-communicable diseases such as diabetes, hypertension, asthma, epilepsy and cancer (the annual estimate as per the priority medicine list for Syria indicates need to a value of USD468 million).

In addition, fluctuation of the Syrian Pound has negatively impacted the ability of the population to pay for health services, especially the most vulnerable groups (IDPs and families in hard-to-reach areas). The significant rise in the price of medicines (25% - 50%) that was announced recently by the pharmacist syndicate is also of great concern. As a result of this situation, today the same patients who were able to cover their medical fees in 2010 are progressively becoming dependent on subsidized services. Prices of some medicines sold on the black market have risen steeply and are not available to the majority of the population, especially in the rural areas where the communities are traditionally economically worse off than in the cities.

Six health centres for Basic Emergency Obstetric Care (EmOC) are reportedly out of service in Aleppo, Ar-Raqqa, Deir-ez-Zor, Quneitra, and Rural Damascus. Out of 32 MoH and Ministry of Higher Education (MoHE) hospitals which provide Comprehensive EmOC, 3 are reportedly inaccessible by women and no information is available for such public facilities in Ar-Raqqa and Dara'a. Many women of reproductive age face challenges in accessing vital reproductive healthcare services including information regarding where and when to seek care, the availability of safe transportation and the high financial cost of services. These jeopardise timely interventions particularly in the case of child-birth. The MoH reports that only half (51%) of the 1509 primary healthcare centres provide reproductive healthcare services. Out of 40 basic EmOC centres, only 15 are operational in Tartous, Al-Hassakeh, As-Sweida, Damascus, Dara'a, Homs, Idlib and Lattakia. As women are unable to safely and consistently access reproductive healthcare services, birth via caesarian section surgery has increased.

The health workforce has been significantly reduced as many health professionals have left the country. Affected governorates lack qualified medical expertise particularly for trauma, anaesthesia and specialized laboratory personnel. For those health workers that have remained, it is difficult and dangerous to report to duty under the current circumstances.

The capacity of national NGOs operating in heavily affected areas has been significantly overstretched and in some cases they have been forced to discontinue their services due to security concerns.

Increased risk of mortality and morbidity from vaccine-preventable diseases, especially for children, was registered in the past six months. Following negotiations with the MoH, an official agreement was made to include reporting sites from north and north-eastern governorates into the WHO Emergency Warning Alert and Response System (EWARS), which reports directly to WHO focal points through private physicians and NGO service providers. As of October 2013, 368 sentinel sites were operational, (500 at the end of the implementation period in June 2014). Although already present throughout the country there is a need to further expand this system if the threat of outbreaks and the impact thereof is to be averted.

Over the last two years, there has been a significant decrease in the Expanded Programme on Immunization (EPI) coverage and there is therefore a high risk of outbreaks of vaccine preventable diseases such as measles.

To combat the wild polio virus currently circulating in Syria, a minimum of 6-8 national Oral Polio Vaccination (OPV) campaigns targeting children under 5 years of age will be required. In addition, a 'birth dose' of OPV will be added to the routine vaccination schedule as part of the holistic EPI approach. Efforts will be made by the SARC, international and national NGOs and community workers to increase coverage particularly in areas of limited access for international humanitarian actors. Surveillance activities will need to be intensified and well-targeted media campaigns and messaging will be essential to ensure confidence of the population in the vaccine and campaign.

Individuals are increasingly exposed to outbreaks of communicable diseases such as diarrheal diseases and leishmaniasis due to overcrowded living conditions, especially for IDPs, and diminished availability of water. From April to October 2013, the per capita water supply has decreased to one third the pre-crisis levels (50-70 people share one toilet) and has contributed to poor hygiene conditions.

The number of cases with complications of non-communicable diseases (NCDs), including hypertension, diabetes, cancer, epilepsy, asthma and renal failure, are increasing due to a lack of adequate treatment.

The protracted crisis has led to increased rate of mental health and psychological distress. An estimated 0.6 – 10 percent of IDPs living in collective shelters have special needs²² and require a range of health services, including physical rehabilitation, wheelchairs, crutches, assistive and prosthetic devices and splints. IOM reported that at

²² IOM assessment conducted in 41 shelters in Damascus, Hama, Homs and Lattakia, 2013.

least 4,573 persons with disabilities and/or special needs necessitating physical rehabilitation live in Homs governorate, as of September 2013.

Deteriorating food security situation nationwide

The food and agriculture sector in Syria now estimates that 6.3 million people are in critical need of food and agriculture assistance, an increase of more than 50 percent since June 2013. Food security conditions have been further compromised by the increasingly damaging impact of the crisis. Even higher levels of population displacement have been recorded. Significant disruptions to economic activity across various sectors have been observed leading to massive job losses and deepening poverty. The agriculture sector has suffered major setbacks with a decline in production and depletion of livestock. Steep depreciation of the Syrian Pound combined with a rapid rise in inflation has further eroded household capacities to meet basic needs and cope with the crisis.

Reduced agricultural production, impediments to marketing available produce and disrupted capacities to import sufficient food to meet domestic demand have all limited food availability. A joint WFP and FAO Crop and Food Security Assessment Mission (CFSAM)²³, undertaken in May and June 2013, found that less land was cultivated for cereal production relative to the previous five-year average, owing to: increased production costs; reduced availability of key inputs (including equipment, seeds, fertiliser, and labour); crisis-related interruptions; physical damage to land and farming equipment; and internal population displacement. Both pre- and post-harvest grain losses exceeded previous annual averages, and primarily is the result of damage to harvesting equipment and storage structures. Less than one-third of government wheat collection centres were found to be operational in June²⁴. It is estimated that the crisis has cost close to US\$2 billion in agricultural losses thus far²⁵.

The CFSAM report projected the 2013 wheat harvest to yield up to 2.4 million metric tons only (a 40 percent reduction on the annual average for the ten years prior to 2011²⁶), leaving the cereal balance sheet in shortfall after expected imports. More recent reports from MAAR estimate the harvest at 3.18 million tons, also well below the average. A reduced harvest combined with limited import capacity will leave the country unable to meet domestic consumption demands. As the damage continues to be inflicted on agricultural infrastructure, this is likely to endanger production beyond the current season necessitating longer-term measures to rebuild food production systems.

The livestock sector has been severely affected by reduced access to feed sources, high animal feed costs, and despite government efforts, reduced veterinary supplies and services. The CFSAM estimated sheep and cattle losses up to 35 and 25 percent respectively, while poultry production is estimated to be down by more than 50 percent. MAAR is further investigating to obtain a more precise understanding into the nature of livestock losses. Unable to cope, vulnerable herders are selling their animals below market value thereby losing a critical source of both food and income. Reduced access to veterinary services, combined with uncontrolled livestock movement poses severe threats to animal and human health within Syria and across the country's borders, due to the increasing spread of transmissible animal diseases and zoonosis.

The deepening economic crisis, depreciation of the currency, rising inflation, and the on-going impact of unilateral economic and financial sanctions, have curtailed the expansion of producer and consumer subsidies. The provision of basic social services has also been affected by significant damage to public infrastructure, particularly in areas heavily affected by the crisis. While still broadly functional, the productive capacities of public bakeries that supply subsidised bread to a large proportion of the population are now declining amid physical damage to mills and bakeries, and drastically reduced food and non-food inputs.

With road transport increasingly expensive and insecure, the movement of both food and non-food cargo to certain areas has been hampered. One result has been localised breakdowns of the food supply-chain, thereby suddenly and drastically compromising availability in some areas.

The increasing intensity of the crisis and proliferation of armed groups have led to additional population displacement, particularly in Homs, Idleb, Aleppo and the north east. The United Nations Office for the Coordination of Humanitarian Affairs (OCHA) estimates that some 6.5 million people, including at least 270,000 Palestine refugees, may now be displaced inside Syria²⁷, an almost 50 percent increase in just three months from the 4.25 million estimated in June. In recent months, population displacement has been particularly high in rural

²³ Special Report: Crop and Food Security Assessment Mission (CFSAM) to the Syrian Arab Republic, WFP and FAO, at the request of the Ministry of Agriculture and Agrarian Reform (MAAR): July 2013

²⁴ Special Report: Crop and Food Security Assessment Mission (CFSAM) to the Syrian Arab Republic, WFP and FAO: July 2013

²⁵ FAO

²⁶ Special Report: Crop and Food Security Assessment Mission (CFSAM) to the Syrian Arab Republic, WFP and FAO: July 2013

²⁷ UN estimate presented at the 24 September SHARP 2014 strategic planning workshop in Damascus

areas exposing those more likely to be reliant on agricultural livelihoods to disruption. This is leading to increased movement of people to major urban centres which strains the delivery of social services.

Increased population displacement has contributed to high and rising poverty as a result of disrupted livelihoods, the loss of productive assets and damaged infrastructure. Farm and livestock-dependent livelihoods have been particularly affected: at least 50 percent of jobs in the poultry sector and 70 percent in the cotton industry were lost by June 2013²⁸. Preliminary results from the Joint Rapid Food Needs Assessment (JRFNA) suggest that some 8 percent of surveyed families have lost their primary breadwinner, with about 11 percent now headed by women.

Job losses and lower incomes have significantly reduced household purchasing power. Private consumption is believed to have contracted by almost 50 percent during the second quarter of 2013, relative to the same period last year. High and rising inflation has also been a key cause. The CFSAM found that by June 2013, the real price of wheat flour had almost doubled since 2011. A similar trend was observed for non-food items, including for diesel, in which a 200 percent increase was experienced in January 2013²⁹. The high cost of electricity and fuel has left poor families unable to meet their energy needs, a critical concern for the winter season. Since then, food prices have increased further indicative of the extent to which markets have been disrupted. In July 2013, the Syria Needs Assessment Project reported that food-price inflation was as high as 100 percent in some areas³⁰. WFP market price monitoring data suggests that the prices of basic imported commodities such as oil, rice and lentils increased by 30 – 60 percent between June and August 2013 alone, while prices of subsidized foods, such as sugar, was also found to have increased substantially. The implication for poor households is a majority of available income is spent on food, as confirmed by WFP programme monitoring and preliminary JRFNA findings.

Both the quantity and quality of foods consumed by the most vulnerable have reduced. More than 90 percent of respondents interviewed by the JRFNA reported that Syrians have changed their eating habits since last year. Many households reported a decrease in food intake (to an average of only two meals per day) and opting for cheaper and less nutritious foods. A majority of WFP beneficiaries interviewed consume carbohydrates almost exclusively and have limited consumption of fruits, vegetables, meat and dairy products due to high costs. Women and children with particular nutritional needs are expected to be the worst affected. In many areas it has been observed that infants and young children are not receiving adequate nutritious foods needed for optimal growth and development, with most families reportedly limiting the amount of complementary foods provided at this critical stage to only one meal per day. An increasing number of children demonstrating symptoms of malnutrition have been admitted to health centres.

The erosion of coping mechanisms and shrinking resilience has been observed by WFP programme monitoring. Symptoms include selling assets, withdrawing children from school and requesting assistance from friends and relatives. Furthermore, there is evidence that the number of coping strategies adopted has reduced over time, suggesting that families are exhausting their resources and have increasingly few options to meet their needs.

Food security among Palestine refugees has also continued to decline throughout 2013. UNRWA estimates that at least 50 percent of the Palestine refugee population in Syria has been displaced, depriving this already vulnerable group of their livelihoods, assets and shelters. The vast majority of displaced families have been forced to seek private shelter in safer areas of Syria, significantly reducing the funds available for food and resulting in significant overcrowding. Social safety nets, savings and other assets have been either lost or exhausted, constraining the funds available for food purchases. Tens of thousands of Palestine refugees also remain in crisis-affected areas and lack access to regular food supplies as a result. Palestine refugees have limited social networks, higher underlying rates of poverty and fewer coping mechanisms to deal with the situation. UNRWA now estimates that at least 440,000 Palestine refugees across Syria require on-going emergency food assistance. Multiple displacements combined with high existing levels of poverty have left Palestine refugees also in need of priority assistance.

Supplemented by information from the CFSAM, preliminary results from the JRFNA and other sources, the most vulnerable groups with greatest need of assistance include: the internally displaced; the unemployed and the poor in urban centres; casual labourers; host communities; and small-scale farmers and herders. It is further expected that those typically most vulnerable to the effects of crisis and the displaced will have suffered disproportionately in Syria. These include: children (particularly those below the age of five years), women, the elderly, people with disabilities and the chronically sick.

²⁸ Special Report: Crop and Food Security Assessment Mission (CFSAM) to the Syrian Arab Republic, WFP and FAO, at the request of the Ministry of Agriculture and Agrarian Reform (MAAR): July 2013

²⁹ Special Report: Crop and Food Security Assessment Mission (CFSAM) to the Syrian Arab Republic, WFP and FAO: July 2013

³⁰ Regional Analysis Syria: Part 1 – Syria, Syria Needs Assessment Project: July 2013

Needs persist in all 14 governorates across the country. Disproportionate increases in vulnerability have taken place in areas more affected by the current events and subsequent population displacement and physical damage to infrastructure, as well as in hard-to-reach areas, where humanitarian deliveries have been greatly challenged. As such, priority districts are likely to be concentrated in the Aleppo, Rural Damascus, Dara'a, Deir Ezzor, Idlib and Homs and additional governorates that overlap with zones projected with the fastest growing poverty rates³¹.

Decreasing availability of water, sanitation and hygiene practices compounded by deterioration of living conditions leading to risks of communicable disease outbreaks

The availability and supply of safe water has drastically decreased by 40 percent from pre-crisis levels, and has resulted in a significant increase in the cost at which clean water is produced in many areas - even to the point of surpassing the amount charged. For example, production of 1m³ of clean water costs approximately SYP 85 compared to the SYP 2.5 charged for purchase of this amount of clean water. Pre crisis, the *per capita* consumption of water was approximately 110 litres per person per day (l/p/d) on average while post-conflict this figure has reduced to 50 l/p/d or less due to lack of availability of resources and/or accessibility in order to repair & maintain networks. The MoWR places the total damage to water and sanitation infrastructure to over 2.5 billion US dollars. This is a conservative figure and the sector and with the Ministry considers the damage and funding needs for repairs to be much higher (a comprehensive damage needs assessment is required to be carried). In addition the unilateral economic measures, rising fuel and spare part prices are not helping ease this challenge the ministry and partners are facing. According to the Ministry of Water Resources, an estimated 35% of water treatment plants have been damaged, while national production of water treatment chemicals has come to a halt as the unilateral economic measures. As the payment of water bills is very low (10 percent of pre-crisis revenue rates), water authorities have become unable to meet the maintenance, rehabilitation and repair costs of water networks. Thus far, the MoWR has remained committed to the payment of salaries for 60,000 civil servants but delays occur sometimes in hard-to-reach areas like Raqqa, The MoWR estimates a turnover of 15 percent in employment rates within the Ministry, primarily due to factors related to the crisis which poses a concern for capacity.

Solid waste management is a critical concern across the country. Pre-crisis hygiene knowledge and practices do not translate to current crisis conditions which include deteriorated availability and access to safe and clean water and health services. Communities, the private sector and local capacities must engage with municipalities to support services to minimize disease outbreaks.

Lower efficiency of waste water treatment plants due to break down of power supplies, Operation and maintenance, has increased the level of discharge of untreated wastewater having a tremendous impact on the environment, with high levels of ground and surface water and private illegal oil refineries located in some areas, which began to have a negative effect on the environment causing pollution. The MoWR and the MoE warns of an eminent environmental disaster if the breakdown of municipal and household waste water management systems and the lack of control on the above mentioned oil refineries

Fuel availability and rising prices undermines interventions to increase the capacity of local water provision systems, such as provision of generators and pumps, as local government and communities do not have the resources to maintain the fuel supplies.

Increasing damage to water and sanitation facilities, overcrowded living conditions and inappropriate hygiene practices contribute to a high risk of outbreak of communicable diseases. The winter season is accompanied by a predicted increase in Acute Respiratory Infections (ARIs), due to increased vulnerability, reduced purchasing power, indoor pollution during the winter months and restricted access to treatment and care. Children under five years are likely to be the most affected, particularly those residing in overcrowded accommodations. A significant increase is predicted beyond the 11.5% of cases reported in 2008. Other diseases associated with increased risk during the winter include tuberculosis, which remains a major health burden, particularly in the North with 3,000 cases registered in 2013, influenza, meningitis, bloody diarrhoea, measles and skin diseases. Leishmaniasis has now reached epidemic proportions, especially in the North. The mass population displacement has spread the disease further than normal boundaries and threatens to expand transmission in neighbouring countries where the sand-fly vectors already live.

Due to the disruption of the existing routine disease surveillance system, there is an increasing reliance on the complementary surveillance system established by WHO, called the Early Warning, Alert and Response System (EWARS) through which the sector is able to mitigate and respond to reported outbreaks of the diseases in highly affected governorates such as ARIs, leishmaniasis, tuberculosis, influenza, meningitis, bloody diarrhoea, measles and skin diseases.

³¹ Socioeconomic Roots and Impacts of the Syrian Crisis, The Syrian Centre for Policy Research: January 2013

Mental health and psychosocial distress

The crisis is negatively impacting the psychosocial wellbeing of significant portions of the population, especially among IDPs, displaced Palestine refugees and people living in areas directly impacted by the crisis. UNHCR identified significant psychosocial distress through assessments official collective shelters for IDP and focus group discussions with IDPs. Identified cases are provided specialized treatment and follow-up. Pre-crisis referral and coping mechanisms have been weakened or are no longer functional, and there is a severe shortage of mental health professionals.

An increasing number of people are seeking psychological assistance, particularly men and boys directly exposed to the violence, and women suffering from a number of direct and indirect effects of the violence. According to UNFPA's minimal initial service package (MISP) guidelines, around 10-15% of pregnant women can be exposed to pre- and postpartum depression under typical circumstances, with an expected surge during crisis. Mobile clinics report an increase in the number of individuals seeking assistance in this field, including children under the age of five suffering from bedwetting and young men who have been exposed to torture and who are suffering from mental health disorders. One third of the children affected by the crisis in Syria reportedly have psychological distress and post-traumatic disorders, with boys and girls equally affected.³² Children are prone to unusual crying/screaming, disruption in sleep patterns, sadness, bedwetting and unwillingness to go to school. Attending school creates a sense of normality and routine for children, which is crucial to the healing process associated with crisis. Reports from IDP shelters and staff on the ground indicate high rates of psychological distress among children and adolescents.

Access to education

Enrolment data released by the MoE³³ demonstrates that enrolments in grades 1-12 decreased by 35 percent between the 2011-2012 school year compared to the previous 2012-2013 school year, representing approximately 1.9 million children. The Ministry estimates that about 900,000 of these students have left the country, while 1 million still reside in Syria yet they do not attend school. An additional 1.26 million either do not attend or do not attend school regularly and are at a high risk of dropping out. Of those who are enrolled, only 62 percent are actually attending classes³⁴. UNRWA records showed that 35% of enrolled Palestine refugee children were able to regularly attend class in the first half of 2013, although encouragingly this figure rose to over 60% by November. While no figures are available for the current school-year (2013-2014), it is expected that enrolment figures will drop further. Registration figures for the school-year 2012-2013 do not show any particular difference between boys and girls however anecdotal evidence suggests that more girls drop out of school than boys. The education sector will continue to target girls and support vocational training, as the provision of education related to livelihoods and employment is particularly important as many adolescents and youth risk dropping out of school.

Pre-crisis, less than 10 percent of children in Syria attended pre-school. This already low figure has dropped further as a result of the crisis. While 168,000 children attended pre-school in 2011-2012, only 52 percent, or 86,000, did so in 2012-2013³⁵. In Aleppo, Dara'a, Idleb and Quneitra, less than 20 percent of the children who were enrolled in pre-school in 2011-2012 re-enrolled the next school year.

Anecdotal evidence suggests that many internally displaced children face difficulties in registering at schools in their new locations. The 2013 UNHCR shelter visit program reported school attendance to be significantly lower than national averages. In 21 collective shelters for IDPs visited in Damascus, more than 50 percent of the children were not in schools while in the 20 collective shelters for IDPs visited in Rural Damascus more than 90 percent of children were not in school. Palestine refugee children are particularly vulnerable, with about 44,000 out of 66,000 children affected by the closure of UNRWA schools during the first half of 2013.

Syria is also faced with a shortage of safe learning spaces and supplies. Schools are no longer safe havens as they have been damaged, are being used as shelters or are occupied by armed elements. The number of printing facilities has declined which has resulted in a short supply of textbooks. In addition, many students left their cities and villages without any of their possessions, including books, bags and school uniforms as well as documents and school records.

³² Child Protection Working Group: Syria Child Protection Assessment, Sept 2013

³³ Government of Syria Ministry of Education, September 2013.

³⁴ Calculations based on MoE attendance percentage show that as of May 2013, only 2,024,192 out of the 3,287,932 were attending classes (a difference of 1,263,740).

³⁵ Excludes Ar-Raqqa governorate, as data is not available.

Registration figures show that the MoE has lost more than 52,500 teaching staff (22 %) and 523 school counselors (18 %) ³⁶ since the beginning of the crisis for grades 1-12. The movement of teachers within and outside the country has led to acute shortages of staff in some areas, and a surplus in others. Al-Hassakeh governorate, for example, has lost more than 1,600 teachers. Noting the standard of 35 students per teacher in Syria, this indicates that 56,000 students in this governorate require a new teacher. Governorates which are currently hosting high numbers of IDPs have additional school staff. Lattakia governorate, for example, currently has an additional 4,799 IDP teachers and administrative staff. In an attempt to give as many children as possible access to education, 1,615 schools nationwide are currently operating on double shifts (morning and afternoon sessions); 602 of which are in Aleppo, 186 in Rural Damascus, and 183 in Lattakia.

Malnutrition among children and women

The confluence of risk factors including worsening food security, a poor pre-crisis nutrition situation, poor/sub-optimum infant and young child feeding practices, poor hygiene practices, deteriorating access to water, sanitation and health services combined with inequalities between rural and urban populations all contribute to a heightened risk that the nutritional status of children under-5 and other vulnerable groups is deteriorating, and that community based nutrition interventions are urgently required. Based on 9.3% acute malnutrition or wasting rates (SFHS 2009), an estimated 300,000 children aged 0-5 years are suspected of being at risk of acute malnutrition across Syria and 1.7 million children under-5 and pregnant and lactating women are at risk of micronutrient deficiencies.

Various reports from children's hospitals and health clinics in the northeastern region of Syria and Rural Damascus are showing an increase in the number of children diagnosed with moderate and severe acute malnutrition. A study undertaken by the Hama Health Department at primary healthcare centers in late September 2013 found an average of 38 percent of children under-5 were underweight, 6 percent were severely wasted and 19.3 percent were stunted. In September the Al Kheir NGO found an alarming 22 percent of children under 5 in Aleppo City had either moderate or severe acute malnutrition.

Approximately 871,000 children under-5 are estimated to need multiple micronutrient supplementation ³⁷, and 225,000 are at risk of under-nutrition. Approximately 300,000 pregnant and lactating women are at risk of micronutrient deficiencies and need to be targeted with appropriate feeding practices.

Lack of adequate and dignified shelter and lack of basic household items

As of November 2013, official collective shelters accommodated 2.9 percent of the estimated 6.5 million IDPs in Syria, namely 188,379 individuals (34,968 families). An additional 10,500 displaced Palestine refugees were accommodated in UNRWA and non-UNRWA administered collective shelters, representing 3 percent of the total displaced population. An additional 10,500 displaced Palestine refugees were accommodated in UNRWA and non-UNRWA administered collective shelters, representing 3.9% of the displaced population. Some official collective shelters located in schools were evacuated in line with the school year so that they could re-open as per the policy of the government. While the government identified alternative shelter for evacuees through opening other public buildings not all were able to be supported. The limited capacity of official collective shelters has led to IDPs living in conditions below the minimum standard (3.5 square meters per person). In some cases, IDPs live in tents in the yard of collective shelters. Additionally water and sanitation facilities in official collective shelters need to be repaired and expanded in order to meet minimum standards. Security concerns combined with administrative constraints and procedures have impeded shelter rehabilitation.

The majority of IDPs reside with host communities whose capacity to continue to provide support is diminishing as their resources decline. The plight of the displaced is further exacerbated as most have left with very few items. They require basic household items, including winterised items. Host families and communities must be supported through community based interventions to support coping mechanisms.

Information, outreach and the monitoring of shelter needs in governorates and communities must be strengthened, and in particular regarding property ownership, levels of damage, and access to basic social and health services. Intermediate support to areas of origin where security and clashes no longer exist is critical to ease pressure on public buildings.

A significant proportion of the IDP population remains in their governorate of origin even though they are displaced. They reside in finished and unfinished private buildings, or they rent in cities. Rents are said to be increasing

³⁶ For Ar-Raqqa, no data currently exists on teaching staff and counsellors. This governorate has therefore been excluded from this figure. For teachers, As-Sweida and Quneitra have been excluded, as no data is available.

³⁷ Nutrition sector estimate based upon 13.4% of the displaced population of 6.5 million.

between 200-300% and safe neighbourhoods in cities of Aleppo, Hama, Homs and Rural Damascus, among others, are running out of rental accommodation due to flux³⁸.

Loss of livelihoods and deteriorating coping mechanisms

The protracted crisis and unilateral economic and financial sanctions are eroding family and community coping strategies which have served as a critical safety net for Syrians since the beginning of the crisis. Deteriorating economic activity, access to basic social services and food is undermining community resilience.

Many small businesses and large factories have closed and as a consequence, an enormous number of employees have lost their jobs. This leaves affected people without enough resources to buy basic commodities, including food. Disruption of businesses, distortion of local markets and the local economy, and a high number of unemployed youth also has a negative impact on the social fabric of communities. Local market rehabilitation, support to medium, small and micro-enterprises and targeted early recovery in neighbourhoods where insecurity no longer exists would provide emergency short-term job opportunities and stimulate local early recovery.

Considerable damage to basic services and socio-economic infrastructure puts a strain on host communities as well as contributes significantly to the dramatic collapse in human development in Syria. Syria's human development index (HDI) score lost 20.6 of its value compared to 2010.³⁹ Labour-intensive public services projects such as solid waste collection and infrastructure repairs for social services present quick and localized solutions to improve the availability of basic services and enable families to generate income to meet their basic needs. People with disabilities, youth and women-headed households, are likely to be further marginalized by crisis. They require tailored programming to avail adequate livelihoods opportunities to meet their immediate needs and limit exposure to negative coping mechanisms.

Humanitarian Access

The UN estimates that around 2.5 million civilians in need of humanitarian assistance live in areas which are hard-to-reach for the coordinated humanitarian response inside Syria.

Throughout 2013, road access across several governorates has been constrained by the crisis. Increasing rates of criminality, illegal checkpoints, and the presence of different armed groups on some intra-governorate roads have had a negative impact on access and the delivery of humanitarian assistance. In addition, few operators are willing to go to certain locations, and this contributes towards a higher cost of transportation.

The scale of humanitarian needs in Syria far exceeds the number of humanitarian actors, particularly international NGOs and national NGOs registered with the government. As of October 2013, sixteen international NGOs are registered inside Syria and 70 national NGOs (operating through 118 branches) are authorized to cooperate with the UN agencies. There is urgent need for specialized, technical capacity to be deployed to address humanitarian concerns across all sectors.

Humanitarian relief shipments are required to follow the same procedures as shipments of commercial goods, as of October 2013, large quantities of relief items were awaiting clearance. Recently the government introduced new procedures which should facilitate timely and speedy delivery of humanitarian assistance throughout the country. The clearance of telecommunications equipment needs to be processed speedily, especially now that the UN is able to open additional hubs.

Assessment Planning

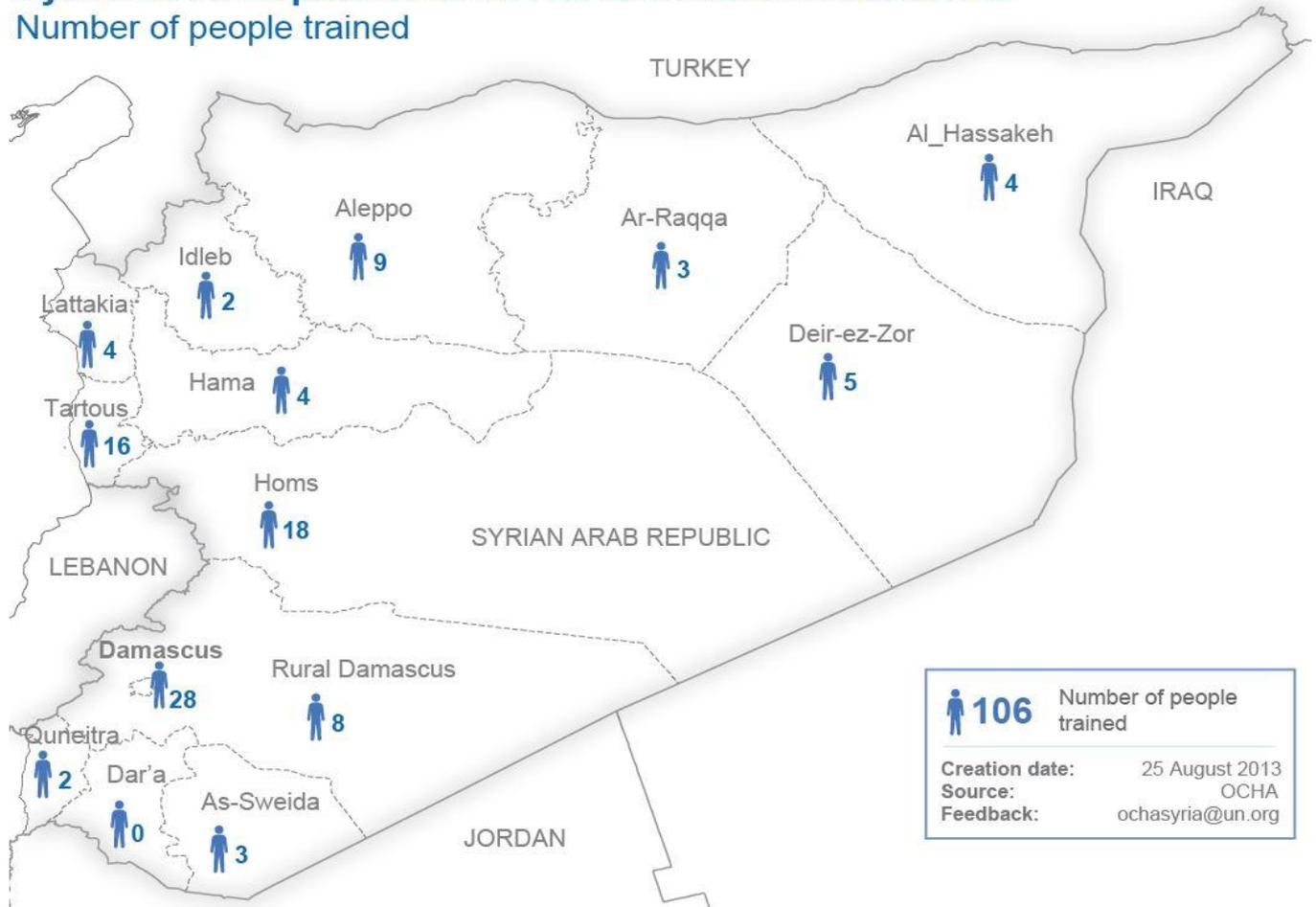
The recently approved Joint Humanitarian Assessment (JHA) aims to provide a comprehensive overview of needs across Syria, including the prioritisation of the affected populations and geographical areas. A recently concluded Joint Rapid Food Needs Assessment (JRFNA) greatly informed the sector's response. Other assessments are planned, to address key gaps in information such as in nutrition. Further, plans are in place to enable a harmonised and coordinated approach to the assessment across all sectors. An assessment registry has been established to maintain a repository of all assessments

³⁸ UN-Habitat, October 2013.

³⁹ Human Development Index for Syria, 2013.

Syrian Arab Republic: Joint Humanitarian Assessment

Number of people trained



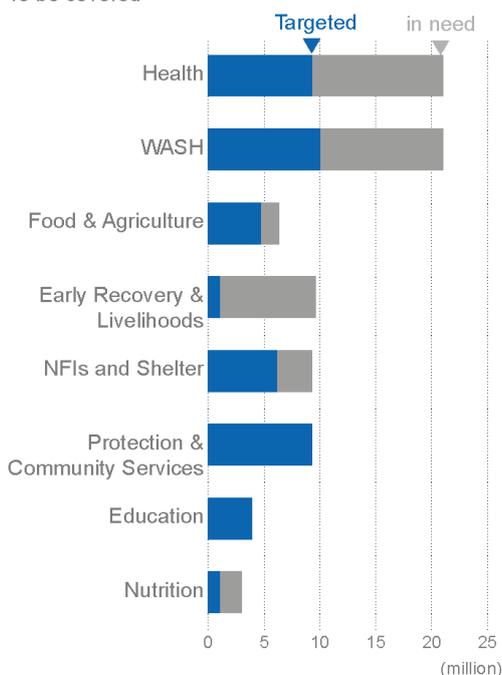
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

2014 HUMANITARIAN STRATEGY

People in need and targeted

Beneficiaries

To be covered



Coordination, Logistics Cluster, Staff Safety Service and ETC Cluster are common services/support sectors.

Food and Agriculture: 4.7 million including 440,000 Palestine refugees to be assisted by the food and agriculture sector which represents an increase of the target by 43% from 2013

Health: 9.3 million people will be targeted by the health sector by a number of interventions including delivery of essential medicine and medical kits, including reproductive health kits, immunization, response to the outbreak of communicable diseases.

Shelter/NFIs: 6.12 million IDPs and other affected persons will be assisted with distribution of NFIs and shelter interventions such as emergency shelter, winterization support, cash assistance, and other core relief items

WASH: 10 million people have sustainable access to safe water through provision of chemicals and rehabilitation of water infrastructure

Protection: The protection sector will target **9,3 million** people in 2014

Nutrition: The nutrition sector will target **1 million** affected persons with activities including screening for malnutrition for children under- 5 years of age.

Education: The education sector aims to reach **3.9 million** people,

Early recovery: The early recovery sector aims to reach **1 million**

Scope of the strategy

1. **Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international humanitarian and human rights law and international law.**

Key actions:

- Advocacy and awareness raising to promote respect for international humanitarian law, international human rights law and international law principles.
- Ensuring timely response for persons with specific vulnerabilities.
- Strengthening capacity of all stakeholders, including by mainstreaming of protection as a cross-cutting issue into all areas of humanitarian response and strengthening community-based initiatives and social cohesion.

2. **Increase the provision of life-saving emergency protection and assistance and support the delivery of essential services for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.**

Key actions:

- Continued provision of emergency food assistance, safe access to potable water, serviced waste water services and improved waste collection, health, education, NFI distribution & other essential services to

address immediate needs. Also ensuring the monitoring of changing needs, prioritization of appropriate assistance and a targeted response for persons with specific vulnerabilities.

- Strengthen the provision of health services through targeted interventions such as trauma management, supply of life-saving medicines and medical supplies, reinforced outbreak prevention, surveillance and response and capacity building of health workers, safe access to potable water and sanitation services.
- Winterisation support such as warm clothing, high thermal blankets, additional plastic sheets, solar lamps and other essential relief items and provision of CRIs to include mattresses, blankets, plastic sheets, diapers for children/elderly/disabled, sanitary napkins, hygiene kits, kitchen sets, and jerry cans.

3. Expansion of early recovery efforts and the restoration of livelihoods

Key actions:

- Enhancing the resilience of local communities and the affected population through the creation of emergency employment opportunities and the use of community grants to rehabilitate basic and social infrastructure.
- Strengthening coping mechanisms of the affected population through the restoration of disrupted livelihoods.
- Enhancing the resilience of vulnerable groups (child-headed families, youth, female-headed households, elderly, Palestine refugees and persons with disability) through targeted rehabilitation and livelihood support as well as community-based initiatives.

4. Enhancing the operational capacity and coordination of national and international humanitarian responders to facilitate the delivery of humanitarian assistance to affected populations:

Key actions:

- The establishment of humanitarian hubs and sub-offices for INGOs.
- Increased access to hard-to reach areas, areas not reached with humanitarian assistance for a variety of reasons and areas with presence of armed groups.
- Ensuring timely facilitation for the delivery of humanitarian assistance: The UN will advocate for: the continued delivery of relief supplies, including medical supplies and trauma/surgical kits into hard-to-reach areas; and simplification in procedures by which to receive government clearances for humanitarian trucks and convoys. The UN will also advocate for the smooth facilitation of UN and partner field missions.
- Improving needs assessment and analysis: The UN will continue to advocate for effective and timely collection of needs data to provide a better understanding of the evolving humanitarian situation to support the response inside Syria. Information collection and analysis will be strengthened at the governorate and city level through among others, inter-agency joint comprehensive assessments, sector specific assessments and multi-sector city and neighbourhood profiles to ensure credible baseline information, to support monitoring and flexibility in programme implementation and to ensure timely delivery to affected populations.
- Pooled Funding: Pooled Funds mechanisms, such as the CERF and the ERF, will continue to play an instrumental role in providing support to emergency response, gaps and coverage of needs, including critical data collection and analysis particularly in hard-to reach areas.

5. Strengthening preparedness and response by humanitarian actors to address a further deterioration of the humanitarian situation

Key actions:

- Periodic review of program criticality of staff to enable life-saving assistance to continue within a challenging environment.
- Strengthening of agency specific remote management mechanisms and capacity building of national staff.
- Preparedness and response to possible outbreaks of communicable diseases.
- Working with communities to put in place a community psychosocial support framework.

Prioritisation of needs

Prioritisation is a key element of the 2014 SHARP, aimed at enhancing the understanding of priority humanitarian needs at the district level. Sector actions/projects are informed by the following broad categories:

- Sector-specific thematic considerations based on sector strategy.
- Projects promoting greater reach to affected populations in hard-to-reach areas will be given priority, in order to be able to expand the current scope of assistance.
- Community engagement approaches with local stakeholders, will be applied where possible, to further increase the effectiveness of more fine grained needs assessments and optimize relief response to local demands.
- Intersectorial linkages of the projects involving more than one sector.
- Geographic prioritization is a key consideration for project selection. Each sector has developed specific indicators to define their areas of geographic priority based on evidence of identified need.
- Prioritisation of vulnerable segments of the population per district: while there is recognition of the limited data to effectively map and define vulnerability based on clear indicators, sectors will develop specific (proxy) indicators to define vulnerable categories of people in need of special attention and targeting, such as households/populations who have been displaced, households/populations who have lost their sources of income, women-headed households, child-headed households, unaccompanied/separated children, women and girls at risk of gender-based violence.

Criteria for project selection

The 2014 SHARP recognizes the enormity of immediate life-saving needs, and is cognisant of the fact that there is an expansion of humanitarian needs across all sectors. The disruption in basic services and reduction in resilience and coping mechanisms is seen as a major driver of the current situation. It is also noted that needs are spread across all geographic locations throughout Syria, and that there are segments of the population who deserve special attention.

Notwithstanding the significant increase in the number of beneficiaries, this SHARP will promote a cost effective and sustainable approach, and in this regard, project selection will be guided by the following broad criteria;

- **Coherence:** Projects must demonstrate clear linkages between specific priorities and strategic objectives to ensure an effective response.
- **Relevance:** of humanitarian assistance provided.
- **Cost-effectiveness:** Budgets must be realistic and feasible relative to each agencies operational capacity and absorption capability.
- **Inter-sectoral linkages:** There must be a clear demonstration of linkages between sectors to strengthen the effectiveness of the response. Overlaps should be eliminated in the event that there are no complementarities.

Cross-cutting and context-specific issues

Protection: Protection mainstreaming will be promoted across all sectors by incorporating protection principles in humanitarian assistance and promoting access, safety and dignity in humanitarian aid. Protection principles that must be taken into account in all humanitarian activities are: (1) Avoid causing harm - (2) Equality - and (3) Relevance of humanitarian assistance provided.

Gender: SHARP 2014 aims to mainstream gender equality programing by ensuring that immediate humanitarian response includes an analysis of the different needs of women, girls, boys and men.

Environment: This strategy prioritizes the need to preserve the environment by promoting a consciousness among humanitarian actors of the potential negative impacts of humanitarian action, and what steps may be needed to mitigate the negative effects on the environment

Coordination mechanisms to support implementation of 2014 SHARP

Government/Humanitarian Country Team

- The Humanitarian Country Team (HCT), composed of UN agencies and international NGOs operating in Syria, meets monthly with the Syrian High Relief Committee. This forum is co-chaired by the Minister of Social Affairs and the Deputy-Minister of Foreign Affairs and Expatriates, and reviews progress, address gaps and coordinates future courses of action.
- The Ministry of Foreign Affairs and Expatriates (MoFAE) coordinates the humanitarian response between and within the various sectors of the government. The main coordination structure between the government and the humanitarian community is the Steering Committee, which is chaired by the Deputy-Minister for Foreign Affairs and Expatriates.
- At the technical and operational level sectoral representatives from line government departments, the UN and other humanitarian counterparts meet regularly. Humanitarian agencies submit periodic progress reports on achievements and constraints in humanitarian deliveries to Syrian authorities.
- The UN RC/HC has established weekly meetings with representatives of the MoFAE to discuss achievements, challenges/bottlenecks of the humanitarian response.

UN/INGOs Coordination Mechanisms

- Under the leadership of the UN RC/HC the UN Country Team (UNCT) and the HCT provide strategic and policy guidance to programming, as well as review progress against targets.
- An inter-sector working group comprising eight sector and two clusters provides operational guidance and support to the humanitarian operation in Syria led by the Office of the HC.
- Ten sector groups have been established, namely: food and agriculture (WFP/FAO/MARN/MOSA), Education (UNICEF/MoE), emergency telecommunication (WFP); health (WHO/MoH); NFIs/shelter (UNHCR/MoLA/SARC); nutrition (UNICEF/MoH); early recovery and livelihoods (UNDP); logistics (WFP), protection and community services (UNHCR/MOSA), and WASH (UNICEF/MoWR). Sectors include governmental counterparts, SARC, UN agencies, international organisations, INGOs and local NGOs. In addition, several technical working groups have been created, such as the child protection working group chaired by UNICEF, the mental health and psychosocial working group chaired by UNHCR/IOM/IMC, and the financial assistance sub-group chaired by UNHCR under the shelter sector working group led by UNHCR/MOLA.
- These coordination mechanisms are complemented by UN field hubs (Homs and Tarotus) and sub-national coordination mechanisms. Strengthening sub-national coordination mechanisms and links to national level coordination will assist the future transition of the sectors to the government.

Response monitoring

This strategy encompasses a systematic monitoring of the humanitarian response to ensure accountability against results and commitments articulated in the SHARP. Such a system will track progress towards strategic priorities and objectives outlined in the Plan. The monitoring framework aims to provide a basis for informed decisions on gap-filling, addressing shortcomings, adjusting strategies or other relevant steps to ensure continued effectiveness. Furthermore, it offers an opportunity to develop and strengthen two-way feedback mechanisms with affected people on their perceptions of the humanitarian response. The monitoring and reporting framework will be informed by the direct monitoring efforts of agencies, third-party monitoring and secondary data collection/review mechanisms to enable standardized reporting on needs, response delivery, and gaps under the Plan.

The framework will be linked to enhanced intra- and inter-sector needs assessment processes which will help to better define beneficiary targets and response priorities. UN agencies, INGOs, SARC and other humanitarian partners will conduct sector specific, inter-sector comprehensive needs assessments and city-based monitoring in close coordination with line ministries, governorates and local authorities. This will improve the strategic needs analysis inter alia to ensure credible baseline information, and will support monitoring and flexibility in the implementation of the strategy.

The mainstreaming of cross-cutting issues such as gender, protection and the environment will contribute towards better monitoring of the humanitarian response. A gender mainstreamed approach will ensure the active involvement of women and men in the design of project and decision-making to the extent possible. The review projects should ensure that the different needs of women and men are met. A protection mainstreamed approach should ensure among others that security and protection concerns in the distribution of assistance have been adequately addressed. An environment mainstreamed approach should ensure that the preservation of the environment through the promotion of awareness among humanitarian actors to mitigate any potential negative environmental impact of activities.

The framework puts in place periodic reporting at the activity and results level. Activity level reporting will feed into monthly reporting requirement by agencies to the government. Results reporting as per indicators and targets in the SHARP will be undertaken on a quarterly basis to help better track and define results, challenges, lessons learnt and opportunities from the humanitarian response.

STRATEGIC OBJECTIVES AND INDICATORS

STRATEGIC OBJECTIVE 1: Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law

Indicator	Target	Monitoring responsibility & method
Sectorial mainstreaming of protection	2,443,100 m	PCS sector
# of persons reached by protection awareness-raising initiatives	7 (all sectors)	PCS + sectors on Shelter/NFI, WASH, Health, Education, Food, Nutrition, Early Recovery & Livelihoods
# of children and adolescents (boys/girls) and adults benefitting from learning and recreational activities and counselling services	88,800	PCS sector
# of individuals referred for GBV response services (including clinical, legal and social)	20,000	PCS sector
# of individuals benefitting from psychosocial support services, including # of children and adolescents (boys/girls); # of adults (men/women), # of elderly	505,000	PCS sector
# of GBV survivors screen, accessed or referred for specialised services	70,000	PCS sector

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items

Indicator	Target	Monitoring responsibility & method
Number of people benefiting from monthly relief food assistance and cash assistance (disaggregated by sex)	5.3 million Including 440,000 Palestine refugees receiving food assistance	Food & Agriculture sector reports
Number of people reached (disaggregated by sex) with essential medicines, equipment and supplies for primary healthcare, and communicable and non-communicable diseases	7,500,000 people	Health sector reports
Number of health centres supported with RH kits, essential reproductive health medicines, equipment and supplies to support basic Emergency Obstetric care	200 health centres supported with RH kits	Health sector
Percentage of coverage with routine vaccination for children under five	90%	WHO/UNICEF
Number of children under 5 (disaggregated by sex and age) provided with assistance to prevent/treat malnutrition through screening and treatment for moderate or severe malnutrition	400,000 children screened for malnutrition, 40,000 children referred to OTPs/SFP for treatment of SAM and MAM	Nutrition sector reports
Number and percentage of target population with access to sufficient quantity of safe drinking water through multiple options	At least 10 million people with sustainable access to safe water	WASH sector reports

Indicator	Target	Monitoring responsibility & method
Number & percentage of target population with access to supplies & knowledge on essential personal & HH hygiene/health	At least 3 million people are reached with appropriate hygiene supplies & training to support improved hygiene practice where needed	WASH sector reports
Number of households benefiting from emergency shelter assistance, in rehabilitated collective shelters, upgraded shelter and cash assistance	143,000 families including NFI& Shelter sector Palestine refugee families. reports	
Number of IDPs and other affected persons assisted with NFIs	4,680,000	NFI& Shelter sector reports
Number of school-age children (disaggregated by sex and age) attending remedial classes or catch-up programs	1,365,000	Education Sector Reports

STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/ stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.

Indicator	Target	Monitoring responsibility & method
Number of people supported receiving loans, start-up grants, and businesses revived through livelihood resources to cope with shocks	4,000	Early recovery sector
Number of people receiving vegetable packages and poultry packages	210,000	Early recovery sector
Number of persons with disabilities benefitting from rehabilitation services, livelihood support, and benefitting from physiotherapy services and/or receiving disability aids	5,000	Early recovery sector
Number of people benefitting through rehabilitation of productive infrastructure in agriculture and livestock	5,000	Food and Agriculture sector reports
Number of classrooms rehabilitated or temporary learning spaces constructed	1,040	Education sector reports
Number of water production, treatment and supply networks; and waste water treatment systems rehabilitated and restored	All 14 Governorates	WASH sector reports

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Indicator	Target	Monitoring responsibility & method
Number of local humanitarian actors oriented in humanitarian principles	200	HCT
Number of local and international and national NGOs accessing ERF funding	25	OCHA reports
Number of humanitarian convoys providing essential supplies to hard- to reach areas	50	OCHA reports
Coordination mechanisms functioning at national and sub-national levels	5	OCHA Reports
Number of humanitarian hubs opened/operationalized	4	UNCT/Logistics Cluster/UNDSS
Number of NGO' volunteers, mobile teams and clinics	80	Health sector reports

involved in emergency referral system		
% of sector projects that integrate protection mainstreaming principles and guidance	ALL	NFIs/shelter, Education, Food and Agriculture, Early recovery and livelihoods, Nutrition, Health, Logistics

STRATEGIC OBJECTIVE 5: Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

Indicator	Target	Monitoring responsibility & method
Business continuity plan in place in case of evacuation	1 UNCT plan and agency-specific plans	UNCT/OCHA
Contingency plans for critical areas developed, including stock prepositioning	4 Hubs with adequate contingency stock and emergency capacity	HC/HCT, All sectors
Number of new sentinel sites reporting regularly on EWARS	600	Health sector reports
Number of assessment/survey reports published and disseminated amongst stakeholders	Quarterly/annually	Food and Agriculture, Nutrition

SECTOR RESPONSE PLANS

FOOD AND AGRICULTURE



Summary

Food insecurity is increasingly widespread across Syria. A preliminary analysis of results from a recently concluded Joint Rapid Food Needs Assessment (JRFNA) suggests that 9.9 million people, or approximately half the country's current population, are vulnerable to food insecurity and unable to access sufficient food to meet their basic needs. **Of these, an estimated 6.3 million are highly vulnerable and in critical need of sustained food and agriculture assistance (an increase of more than 50 percent since the last estimate of 4 million presented in June 2013).**

In response, the Food and Agriculture Sector in Syria plans to scale up, broaden and deepen its response to support up to 4.7 million people across all 14 governorates during 2014. This includes: WFP emergency food assistance for 4.25 million of the most vulnerable victims of the crisis (including the internally displaced, host communities, the unemployed and urban poor, small-scale farmers and herders and casual labourers), 945,000⁴⁰ of whom will also receive FAO support to livelihoods and agricultural production; and UNRWA food- and cash-based support for 440,000 vulnerable Palestine refugees..

In complement to Sector efforts and in coordination with its members, the Red Cross and Red Crescent Movement plans to provide food assistance to a further 1 million vulnerable Syrians. Of all 6.3 million people estimated to be in critical need, the remaining 600,000 are expected to receive support from a range of local charities, relief committees and NGOs providing some food assistance from other funding sources.

Response Strategy

Considering the above, the Food and Agriculture Sector response strategy has been designed to contribute to the Strategic Objectives of the overarching humanitarian response in Syria, through the pursuit of five key priority areas for action:

1. *Enhance vulnerability analysis and monitoring to strengthen needs-based response planning and implementation, with a focus on the most vulnerable groups (linked to inter-agency Strategic Objective 1)*

Active efforts will be made to enhance vulnerability analysis and promote access to assistance by the most vulnerable (including those with special protection concerns), with a view to contributing to advocacy and maximizing the needs-based nature of sectoral action. The Sector will coordinate regular assessments and food security monitoring to track the food security situation in a number of locations. Data collected and analytical reports will inform implementation and any necessary adaptation of the response to reach areas of greatest need. This will contribute to the efficiency and effectiveness of early warning mechanisms, allowing for swift adaptation of programmes in a rapidly changing environment. Linkages between the food security surveillance system and

⁴⁰ The 945,000 people targeted by FAO with agriculture support will potentially overlap with the food assistance response. Hence this target number is not included in the 4.25 million to avoid double counting.

similar activities by the Nutrition Sector will be established, in acknowledgement of the deteriorating nutrition situation across the country.

2. *Provide life-saving assistance to meet the immediate food needs of the most vulnerable crisis-affected groups (linked to inter-agency Strategic Objective 2)*

The combined effects of population displacement, eroded livelihoods and income-generating opportunities, lost assets, high and rising inflation, disruption to commodity markets and supply-chains, and reduced food availability nation-wide, have critically and abruptly compromised the food security of affected groups. The Food and Agriculture Sector seeks to mitigate the impact of this trend by providing regular unconditional assistance to help affected households meet their basic food needs. This assistance will be distributed in the form of food or cash transfers, or a combination of both.

WFP will target up to 4.25 million vulnerable Syrians during 2014. These will be provided with a basic monthly family food basket consisting of key dietary staples (within defined food groups collectively comprising a balanced diet) selected on the basis of traditional consumption patterns and expressed beneficiary preferences. The family food ration has been scaled to meet the needs of a five-member household. Approximately 70 percent of target beneficiaries will receive an additional ration of fortified wheat flour and/or baked bread in areas where the effects of the crisis have compromised availability and reduced milling and bakery capacities.

Synergies will be explored with the Nutrition Sector, to maximise geographic convergence of food assistance and nutrition support with a view to preventing acute malnutrition. These will manifest through the provision of fortified and nutritious foods, where possible, and supporting household food production in ways that facilitate a diversification of the diet.

In cases of rapid and previously unforeseen population displacement, WFP will distribute (where possible) specialized ready-to-eat food rations that are immediately consumable by affected groups during the initial days of their displacement when they are unlikely to have other means to access basic food needs or to cook dry food rations.

UNRWA will target a total of 440,000 vulnerable Palestine refugees affected by the crisis inside Syria. As most Palestine refugees reside in areas with constrained but functioning markets, a combination of cash and in-kind food assistance will be provided. The package of assistance will be adjusted by geographic location, depending on local food availability, humanitarian access and displacement status; however, cash assistance will remain the primary food assistance intervention. UNRWA has established a network of financial institutions across Syria that is capable of providing rapid, targeted and regular cash assistance. Furthermore, cash assistance can reach areas where physical access is not possible for UN staff. As it is distributed through financial institutions, the risk of theft or diversion while in transit is negligible, while the fungible nature of cash grants beneficiaries the dignity and independence to manage their humanitarian needs.

3. *Support livelihoods and agricultural production (linked to inter-agency Strategic Objective 3)*

In order to urgently and expeditiously increase food availability and improve food security, the Food and Agriculture Sector seeks to implement a range of activities that will preclude further erosion of livelihoods, revive income-generating opportunities and increase local agricultural production.

After two consecutive years of reduced cereal production, another year of low staple food production would be catastrophic, causing further food price hikes and greater food import and humanitarian requirements. Farmers urgently need agricultural inputs, such as seeds and fertilizer, in order to plant during the 2014 spring/summer and autumn seasons. Those who miss these will be unable to harvest wheat until the summer of 2015. In response, FAO will provide cereal seeds and fertiliser to a target of 50,000 households (350,000 people).

Livestock is the main asset in rural areas and provides the bulk of proteins consumed in the country. The protection of remaining animal assets is therefore essential. The provision of feed will help to preserve surviving herds particularly during the lean season from January to April. In order to contain and avoid outbreaks of livestock diseases, veterinary care must be made available and cold chains for vaccines re-established. Routine veterinary treatments (such as deworming and anti-parasites) will have a significant positive impact on animal production. FAO plans to directly assist 40,000 small herder households (280,000 people) with animal health and husbandry interventions.

The crisis has severely disrupted food supply networks and physical access to markets. At the same time, food prices and unemployment continue to rise and diminish household purchasing power. Traditionally cheaper sources of vitamins and animal protein such as vegetables, chicken and eggs have reduced in supply and increased in cost. Increasing backyard food production will be crucial to improving access to more nutritious foods

(especially amongst the displaced and host communities) and allowing beneficiaries to complement other food sources, diversify diets and increase incomes. FAO plans to assist 30,000 vulnerable households (210,000 individuals) with backyard kitchen garden and poultry production (where possible).

Water supply is critical in the drought-prone regions and along the Euphrates River (especially in Al-Hassakeh, Al-Raqqa and Deir Ezzor), part of the country's breadbasket. Where security permits, productive infrastructure (including irrigation canals, water troughs and market roads) requires urgent repair to help restore and expand food production.

In cooperation with the Ministry of Agriculture and Agrarian Reform (MAAR), FAO will target a total of 135,000 vulnerable farming households (for a total of approximately 945,000 beneficiaries). Some activities will be jointly implemented by FAO and WFP where possible and appropriate. In these cases, agricultural inputs and technical expertise will be made available by the former; the latter will provide targeted food or voucher interventions during the lean season in order to protect household food consumption prior to the harvest.

4. *(A) Enhance the capacity of local actors to deliver life-saving humanitarian interventions and to engage in early recovery and resilience building programmes (linked to inter-agency Strategic Objective 4)*

The Sector will identify opportunities and coordinate efforts to build the capacities of partners at all levels and to support existing community coping mechanisms. Partnerships with international NGOs will be pursued to support capacity building strategies, particularly for early recovery and resilience building interventions. Field-level trainings will be conducted for partners directly involved in the distribution of relief items to beneficiaries. Mainstreaming protection and ensuring the application of humanitarian principles will be prioritised. Operational capacities will be further strengthened through the provision of critical physical assets, such as ICT equipment and vehicles, to support the delivery of humanitarian assistance. Where needed and feasible, technical support will be provided through staff secondments.

It should be noted that, alongside a proliferation of the crisis since its onset, the scale of WFP's emergency response has successfully expanded to reach more than three million beneficiaries across the country in a single month. This has both necessitated and been contingent upon developing the capacities of an increasing network of local cooperating partners. These efforts will be continued and expanded in 2014.

(B) Enhance the preparedness and resilience of local communities to respond to shocks in the food and agriculture sector (linked to inter-agency Strategic Objective 4)

In the context of Syria, preserving and protecting productive assets and options for food security is critical. The regular and systematic distribution of a basic family food basket will provide vulnerable families with a minimum safeguard against the impact of external shocks to food and/or agricultural systems. Activities implemented under priority areas 2 and 3 will be designed to improve community resilience to cope with the effects of the on-going crisis where possible. Examples will include the repair and construction of crop storage facilities and the diversification of food and income sources through the promotion of backyard vegetable and poultry production. Increasing the availability of improved seeds will result in greater production of future crops, allowing households to generate additional income by selling the surplus.

5. *Ensure an adequate preparedness level to respond to immediate shocks and emergencies (linked to inter-agency Strategic Objective 5)*

The Sector will additionally contribute to inter-sectoral efforts to strengthen preparedness in the event of further deteriorations in the humanitarian environment, such as supporting a decentralization of the humanitarian architecture across Syria (including through the establishment of humanitarian hubs) and participating in contingency planning processes.

Successful implementation of the Food and Agriculture Sector response strategy will additionally reduce the adoption of negative strategies to cope with the effects of the crisis, thereby supporting the objectives of other sectors.

Geographic Coverage

Geographically, the sector's response will address priority needs in all 14 of Syria's governorates. Other obstacles to accessing many locations have isolated populations in affected areas and, in some cases, precluded humanitarian deliveries for protracted periods. The Food and Agriculture Sector will prioritise available resources to these areas as and when access may be secured. As limitations on access across the country are likely to remain a key challenge, the Sector will further engage in all efforts to advocate for better access with all parties.

Coordination

In close consultation with, the Ministry of Social Affairs, MAAR and, for UNRWA, the General Authority for Palestine Arab Refugees (GAPAR), Sector members will coordinate on policy and technical matters. The Syrian Arab Red Crescent will remain a key operational partner, while an essential element of the Sector's strategy will involve expanding and diversifying its cooperating partner base in order to maximize reach and pool the full variety of competencies necessary for successful implementation.

While it is commonly understood that the total volume of needs already surpasses the scale of current responses, the Food and Agriculture Sector itself will continue to be used to maximise coverage and minimise gaps to the extent possible. This is done by sharing information, delineating responsibilities and improving coordination amongst its membership.

The Sector will additionally maintain engagement in other collaborative opportunities, including regular multi-level government counterpart meetings, inter-sectoral events and all information management services.

Gender and Protection

This strategy will be implemented with due reference to protection issues in Syria. Vulnerability analyses will seek to identify the most vulnerable groups and those with specific protection requirements, to facilitate priority attention for assistance. Programme monitoring will help to identify risks and violations where these might exist. The Sector's operational footprint will continue to promote the 'protection by presence' phenomenon. The provision of emergency food and agriculture assistance already underpins protection and stability, helping to lower violence, reduce exploitation, provide a key source of dignity and normalcy, and increase social cohesion. Moreover, a principled, humanitarian approach will be pursued so that the sensitivities of assisting various groups displaced in various communities are respected when delivering assistance to prevent further exacerbation of tensions.

While emergency food assistance is not targeted on the basis of sex, the Sector will seek to facilitate its receipt by women and female-headed households, amongst other traditionally vulnerable groups, by affording priority attention at distribution sites. Results may also reasonably be expected to help forestall any exacerbation of gender gaps. Owing to the more severe limitations and greater burdens faced by women during times of crisis and displacement, they are more likely to resort to detrimental coping strategies. Furthermore, their specific nutrition needs tend not to be met when household food consumption is restricted, since they are typically marginalized in food allocation and often eat last and less. These trends may be mitigated by the regular provision of food assistance. Furthermore, where the provision of emergency assistance contributes to saving lives and maintaining family composition, fewer women will be forced to assume the burden of family provider, under disproportionately challenging circumstances.

In rural populations, female-headed households are amongst the most vulnerable. With little or no income, scarce savings and high recurring expenses, their resources are fast depleting. In 2012, the Joint Rapid Food Security Needs Assessment (JRFSNA)⁴¹ reported that coping strategies adopted by small farmers and female-headed households included reducing food intake, eating lower quality and less expensive foods, buying food on credit, taking children out of school, sending children to work, selling livestock and other assets, and cutting back on medical and education expenses. More recent assessments have found that female-headed households have been more severely affected by the crisis than those headed by men, given a range of pre-existing conditions that reduce coping capacities and increase dependence on external support. These include limited access to property ownership and rights (especially land), income (translating into gender wage gaps), and agricultural inputs. In response, FAO will pay special attention to the needs of female-headed households by providing specific inputs to help improve household food availability, diversify diets and generate incomes, including through backyard poultry and livestock-raising, and the establishment of kitchen gardens.

⁴¹ Joint Rapid Food Security Needs Assessment (JRFSNA), FAO, WFP, MAAR, June 2012

STRATEGIC OBJECTIVE 1: Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law.

Cluster objective 1:

Enhance vulnerability analysis and monitoring to strengthen needs-based response planning and implementation, with a focus on the most vulnerable groups

Top-priority activities:

Activity	Locations	Indicator	Target
Establish a food security monitoring system to track food security situation in critical areas	Select locations in all 14 governorates	Number of assessment / survey reports published and disseminated amongst stakeholders	Quarterly
Monitoring and post-distribution monitoring at distribution sites, to track implementation progress and identify challenges for programme adaptation	Select locations in all 14 governorates (subject to active Sector operations and access)	Percentage of monitoring visits achieved against the plan	80%
		Percentage of distribution points monitored against total distribution points operated	30%

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Cluster objective 2:

Provide life-saving assistance to meet the immediate food needs of the most vulnerable crisis-affected groups

Outcome-level indicators and targets

Household Food Consumption Score (FCS): 80 percent of assisted households have an acceptable FCS

Top-priority activities:

Activities	Locations	Indicator	Target
Distribution of monthly relief food assistance to the most vulnerable Syrian families affected by the crisis	Priority locations in all 14 governorates	Number of monthly food distributions conducted	12
		Number of beneficiaries provided with a monthly family food ration (reported by gender and age group)	5,250,000
		Percentage of food distributed against the plan	100%
Distribution of monthly relief food assistance to the most vulnerable Palestine refugees affected by the crisis	Damascus, Rural Damascus, Aleppo, Dara'a, Homs, Hama, Lattakia, and Tartous	Number of monthly food distributions conducted	12
		Number of beneficiaries provided with food assistance (reported by gender and age group)	440,000
		Percentage of food distributed against the plan	100%
Distribution of monthly relief cash assistance to the most vulnerable	Damascus, Rural Damascus, Aleppo,	Number of monthly cash distributions conducted	12

Activities	Locations	Indicator	Target
Palestine refugees affected by the crisis	Dara'a, Homs, Hama, Lattakia, and Tartous	Number of beneficiaries provided with cash assistance (reported by gender and age group)	440,000
		Percentage of cash distributed against the plan	100%

STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/ stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.

Cluster objective 3:

Support livelihoods and agricultural production

Top-priority activities:

Activities	Locations	Indicator	Target
Distribution of agricultural inputs	Priority locations in all 14 governorates	Quantity of seeds distributed	12,500 MT
		Number of beneficiaries	350,000
Distribution of animal feed and provision of veterinary services		Quantity of feed distributed	20,000 MT
		Number of animals treated	TBC
		Number of beneficiaries	280,000
Distribution of vegetable and poultry packages		Number of packages distributed	30,000
Maintenance and repair of essential agricultural infrastructure		Number of infrastructure repaired	TBC
		Hectares of land irrigated	TBC

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Cluster objective 4A:

Enhance the capacity of local actors to deliver life-saving humanitarian interventions and engage in early-recovery and resilience building programmes

Top-priority activities:

Activity	Locations	Indicator	Target
Identification and engagement of new members to facilitate implementation of the Sector response plan	Country-wide	Number of new national or international organizations implementing emergency food and agriculture responses	TBC
Develop a capacity building strategy for sector partners that includes a gap assessment	Country-wide	Capacity building strategy developed	TBC
Training for partners and counterparts on food security issues and responses	Select locations of all 14 governorates	Number of partner / counterpart trainings conducted	TBC
		Number of partner / counterpart staff trained	TBC

STRATEGIC OBJECTIVE 5: ENSURE ADEQUATE LEVELS OF PREPAREDNESS TO RESPOND TO FURTHER EMERGING HUMANITARIAN NEEDS.

Cluster objective 5:

Ensure an adequate preparedness level to respond to immediate shocks and emergencies

Top-priority activities:

Activities	Locations	Indicator	Target
Contingency planning for critical areas, including prepositioning of relief items	Applicable locations, potentially in all 14 governorates	Percentage of relief items delivered against the contingency plan	100%
		Number of beneficiaries assisted with early responses to sudden crises	TBC

Projects

Government bodies	High Relief Committee
Appealing Agency	WORLD FOOD PROGRAM (WFP)
Project title	Emergency food assistance for vulnerable crisis-affected families across Syria
Objective	To provide life-saving assistance to meet the immediate food needs of the most vulnerable crisis-affected groups
Beneficiaries	Total: 4,250,000 Vulnerable crisis-affected populations across the country Children: 2,380,000 Women: 972,400
Participants	MoSA, SARC and NGOs to be confirmed
Budget (\$)	\$913,819,593
Government bodies	High Relief Committee
Appealing Agency	ADVENTIST DEVELOPMENT AND RELIEF AGENCY (ADRA)
Project title	Emergency Food Assistance for Vulnerable IDP Households and Those with Special Needs
Objective	Enable vulnerable displaced families to meet their basic food requirements in hard-to-reach areas
Beneficiaries	Total: 25,000 A total number of 5,000 households (25,000 individuals) meeting vulnerability criteria will benefit from project activities Children: 8,750 Women: 8,025 Other group: 8,225 The total number of target beneficiaries is 25,000 individuals and tentatively includes: 4,250 girls aged 0-14 years; 4,500 boys aged 0-14 years; 7,550 women aged 15-64 years; 525 women aged +65 years; 7,750 men aged 15-64 years; 475 men aged +65 years
Participants	MoSA, SARC
Budget (\$)	\$1,408,000
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Provision of cash assistance for food for 440,000 vulnerable Palestine refugees
Objective	Food needs of displaced and crisis-affected Palestine refugees are partially met through provision of USD 20/person/month.
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$117,919,046
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Food assistance for affected Palestine refugees
Objective	Food needs of displaced and crisis-affected Palestine refugees are partially met through provision of in-kind food assistance.
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$54,918,145

Government bodies	Ministry of Agriculture and Agrarian Reform (MAAR),
Appealing Agency	FOOD & AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)
Project title	Emergency support to crop production for rural farming communities affected by the crisis in the Syrian Arab Republic
Objective	To increase food access and consumption, and to restore production capacity through the provision of cereal seeds to vulnerable households living in crisis-affected areas.
Beneficiaries	Total: 350,000 Vulnerable small scale farmers with particular attention to women headed households Children: 140,000 Women: 178,500
Participants	Ministry of Agriculture and Agrarian Reform (MAAR), Ministry of Water Resources, Syrian Arab Red Crescent (SARC), in cooperation with CBOs and local NGOs, based on the targeted provinces' situation and requirements
Budget (\$)	\$20,000,000
Government bodies	Ministry of Agriculture and Agrarian Reform (MAAR),
Appealing Agency	FOOD & AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)
Project title	Emergency Assistance to support small herders affected by the crisis in the Syrian Arab Republic through provision of animal feed and veterinary services
Objective	Reduction of animal production losses and resumption of livelihoods for 40,000 vulnerable herders households, thus restoring food security
Beneficiaries	Total: 280,000 Vulnerable small scale herders affected by the crisis Children: 112,000 Women: 142,800
Participants	Ministry of Agriculture and Agrarian Reform (MAAR), Ministry of Water Resources, Syrian Arab Red Crescent (SARC), in cooperation with CBOs and local NGOs, based on the targeted provinces' situation and requirements
Budget (\$)	\$10,000,000
Government bodies	Ministry of Agriculture and Agrarian Reform (MAAR),
Appealing Agency	FOOD & AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)
Project title	Effective coordination and leadership of the Food and Agriculture Sector
Objective	Ensure strong and effective leadership and coordination of humanitarian Food and Agriculture response, including support to coordinated food security situation and response framework analysis, information management and monitoring systems.
Beneficiaries	Direct: all Food and Agriculture sector partners Indirect: all beneficiaries of Food and Agriculture responses
Participants	Ministry of Agriculture and Agrarian Reform (MAAR), Ministry of Water Resources, Syrian Arab Red Crescent (SARC), in cooperation with CBOs and local NGOs, based on the targeted provinces' situation and requirements
Budget (\$)	\$676,000

HEALTH



Using a multi-pronged approach, the Health Sector strategic interventions, complementary to those of its partners, leveraging the partners' expertise and value-added, aim to reduce morbidity and mortality of the Syrian population, especially the most vulnerable groups, including women, children and IDPs.

The needs analysis comprises two parts, the series of underlying factors that drive protracted vulnerability and create need among the population and the current priority needs in Syria. It should be noted that improved analysis of the gender and age dimensions of vulnerability is required, highlighting the need for the collection analysis and use of sex- and age-disaggregated data to assess the level and impact of factors affecting vulnerability of men and women.

The interventions focus on the most affected governorates and areas with presence of armed groups. The health sector/cluster humanitarian interventions and activities are based on needs assessments, the collection and use of sex- and age-disaggregated data, gaps analysis and gender analysis, response option analysis and disaster risk reduction which will lead to develop maximum impact and cost effectiveness.

The Health Sector strategy for SHARP 2014 has been developed around the following five primary strategic objectives:

1. **Advocacy for protection**, through (i) promotion of safe and equitable access to health services by affected populations and health workers and (ii) increased access of target beneficiaries to awareness raising material and services on health promotion and prevention. Interventions will be based on field assessments and followed up by monitoring of the level of impact on: 1) infrastructure (level of damage of health facilities) 2) health workers (significant reduction of availability of health professionals) and 3) availability of medicines and medical supplies.
2. **Increased access to life-saving emergency assistance and essential services**, through specific interventions especially in the fields of:
 - Primary healthcare (including services for reproductive health, child health (immunization), management of malnutrition and mental health); and strengthened referral services;
 - Secondary healthcare services (including management of chronic illnesses and comprehensive EmOC services)
 - Trauma care (including treatment at secondary and tertiary level of i.e. burn victims);
 - Expansion of the Early Warning, Alert and Response System (EWARS) with the aim of alert, response and monitoring outbreaks of priority diseases identified;
 - Availability of essential medicines, medical supplies and equipment;
 - Further strengthening Health Information System for emergency using HeRAMS (Health Resources & services Availability Mapping System), for regular, timely and accurate collection and dissemination of data, allowing for vital interventions to prevent and cure any looming health problems across the country.
 - All mentioned activities will consider the cross-cutting issues of gender and environmental impact.

3. Early recovery and stabilization/restoration of vital public services will focus on the:

- Rehabilitation of HFs; contribute to equitable access to care for all, operating theatres in key locations to enhance capacity of hospitals located in heavily affected areas to provide crucial life-saving services and recovery of mental health department; maternal health centres and labour rooms to support antenatal and EmOC.

During the rehabilitation process environmental concerns will be tackled by using environment-friendly materials and other remediation measures.

4. Enhanced operational capacity of the national and international humanitarian responders at health sector level through:

- Strengthened operational and management capacities of health workers across the country at different levels, through targeted training of trainers, workshops and on the job training;
- Increased presence of humanitarian actors through (i) enlarged geographical presence and capacity of warehouses in key areas and (ii) increased number of focal persons covering various tasks (from vaccination, EWARS reporting to monitoring and evaluation).
- Field assessments, followed up by effective close monitoring and evaluation of activities for regular needs-based adjustment of activities.

5. Strengthened levels of preparedness to respond to further deterioration of the health situation of affected populations through the establishment of new sub-offices in key areas, to allow for prompt and decentralized response to chronic or newly emerging needs. Interventions will be based on assessments from the field and followed up by effective monitoring and evaluation activities.

The Health Sector has designed this strategic approach taking into consideration the necessity to provide equitable and needs-based support to all individuals affected by the crisis. Children, women, men, elderly, IDPs, injured and people with chronic illnesses are identified as particularly vulnerable in the current context and in need of specialized and targeted healthcare to allow for adequate protection, reducing morbidity and mortality and preventing health outcomes to further deteriorate. In addition the health working group will work with authorities and communities to improve their awareness of SGBV.

The multi-pronged approach for SHARP 2014 is based on a strong synergy between the Health, WASH, Food Security and Logistics Sectors, allowing for comprehensive interventions at different healthcare levels. Reinforced coordination and cooperation between sectors will enable the humanitarian response in Syria to address cross-cutting issues, such as protection in an effective way.

STRATEGIC OBJECTIVE 1: Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law.

Sector objective 1.1:

Monitor, assess and promote safe and equal access to basic health services by the most affected populations (including women, children and people with disabilities).

Top-priority activities:

Activity	Locations	Indicator	Target
Conduct advocacy activities to promote safe and equal access of affected populations to the services provided by the Health Sector	Damascus	# of ministerial resolutions passed	3
Conduct joint assessments related to safe and equal access to basic health services by the most affected populations, including women and children and those with disabilities	MoH-, MoHE- and partner NGO-led hospitals and health facilities across the country	# of joint assessments conducted per year	6

Activity	Locations	Indicator	Target
Support health sector coordination mechanisms, task force meetings and joint planning	Damascus, Homs	# of coordination meetings conducted per month	2
Improve identification, referral, and access to medical and MHPSS care for GBV cases	Damascus, rural Damascus, Homs, Hama, Lattakia, Tarouts, Aleppo, Hasakeh	# of facilities providing GBV medical management safely.	15
Monitor hospitals damaged	All governorates	# of reported hospitals damaged	12

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Sector objective 2.1:

Scale up timely and targeted provision and delivery of coordinated life-saving emergency assistance by supporting healthcare services delivery.

Outcome-level indicators and targets

2.1.1 Support comprehensive primary and secondary healthcare services, strengthen healthcare delivery & support institutional capacity for emergency preparedness & response in addition to out- reach activities

Top-priority activities:

Activity	Locations	Indicator	Target
Support primary healthcare delivery in the most affected and stretched areas	In all the 14 governorates	total number of consultations	6,500,000
Revise treatment protocols for most prevalent diseases and disseminate to the PHC facilities, NGOs and outreach teams.	Damascus	Guidelines for communicable and non-communicable diseases developed	1
Support NGOs to provide PHC services through mobile teams and fixed clinics including RH services, ante-natal healthcare and postnatal healthcare	All governorates	# of consultations number provided by NGO clinics	871,000
Support partners to deliver life-saving reproductive healthcare services including emergency obstetric and SGBV care	14 governorates	# women of RH age having access to services	1,100,000
Strengthen referral mechanism for basic emergency obstetric care	14 governorates	# of health facilities supported	200
Support delivery of emergency reproductive healthcare to vulnerable women by supporting public and private hospital through RH vouchers	14 governorates	# of hospitals providing services through RH vouchers	15
Provide technical/logistic support to fill gaps in secondary healthcare facilities; including donation of essential medical gases (e.g. oxygen generator and concentrator)	14 governorates	# of hospitals provided with medical gases	14
Provide access to emergency surgeries	All 14 governorates with special focus on the most crisis affected areas	# of emergency surgical procedures	400
Conduct regular supervisory visits at both central and local level	All 14 governorates when access is granted	# of supervisory visits conducted	14

Other activities:

Activity	Locations	Indicator	Target
Provide technical and logistic support to emergency units including theatres, dialysis units emergency labs and blood banks in crucial areas	Most affected areas	# of emergency unit supported	7
Support emergency referral system through linking PHC centres, mobile teams and clinics, NGO volunteers in the field to secondary healthcare (SHC) facilities	Most affected areas	# of partners involved in the referral system	80
		# of health facilities supported with ambulances	80

Outcome-level indicators and targets
2.1.2 Support delivery of essential medicines, supplies and equipment including filling the gap for management of chronic illnesses, RH
Top-priority activities:

Activity	Locations	Indicator	Target
Update the list of essential medicines to better address specific needs related to the current crisis and epidemiological context	WCO Syria (Damascus) in cooperation with MoH and MoHE experts and WHO focal points	New list of essential drugs available to all health sector partners.	1
Provide and distribute essential medicines and medical supplies to cover the needs of the target population, including the needs for PHC, communicable and non-communicable diseases	All 14 governorates	# of consultations	7,500,000
Provide and distribute medical kits to cover the needs of the target population, including the needs for PHC, communicable and non-communicable diseases	All 14 governorates	# of consultations	2,000,000
Provision of RH kits, essential reproductive health medicines, equipment and supplies to support basic Emergency Obstetric care	14 governorates	# of health centres supported	200
Provision of RH kits, essential reproductive health medicines, equipment and supplies to support comprehensive Emergency Obstetric care	14 governorates	# of health centres supported	15
Provide essential reagents, diagnostic kits (rapid testing kits for Hep B and C, HIV), and equipment (to enable prompt reaction to potential threat of communicable disease outbreak)	Damascus, Aleppo, Latakia	# of kits distributed	300
Procure physical test equipment, bacteriological test equipment, chemical test equipment, reagents and related consumables for rehabilitation purposes	Rural Damascus, Aleppo, Lattakia and Hama	# of laboratories targeted supported	4
Support selected secondary and tertiary health facilities to provide specific care including trauma care and burn treatment	Hospitals affected by the current crisis	# of hospitals supported by essential supplies	10

Outcome-level indicators and targets

2.1.3 Prevent & control communicable diseases including Polio & enhance community participation in disease reporting & prevention

Top-priority activities:

Activity	Locations	Indicator	Target
Procurement of 10 million doses of bivalent oral polio vaccine (bOPV) to implement at least 6 national immunization days to prevent the spread of wild polio virus	All governorates	# of polio cases in 2014	0
Conduct advocacy campaigns to encourage parents particularly mothers to vaccinate their children from Polio virus	All governorates	# of advocacy campaigns conducted	6
(3) Support national immunization days (NIDs) against polio and all supplementary immunization activities to control polio outbreak	All governorates	% coverage with OPV for children under five	100%
Support sustainability of routine immunization programme through provision of vaccines, cold chain equipment, safety boxes, syringes, vaccination cards and capacity building for EPI workers at all levels.	All governorates	% coverage with routine vaccines for children under five	90%
Strengthen cooperation with strategic partners (NGOs, SARC, etc.) in the implementation of the vaccines campaigns to reach areas not reached by mobile teams and mobile clinics	All 14 governorates	# of new/ renewed partnerships by month	3
Expand the EWARS	All 14 governorates	# of new sentinel sites reporting regularly	600
Strengthen outbreak/ emergency preparedness, early detection and response including logistic supports	All 14 governorates	% of CD outbreaks alerts detected and enacted upon within 48-72 hours,	100 %
Conduct rumour/alert investigation mission	All 14 governorates	% of outbreaks alert investigated through missions	100%
Update /develop and distribute IEC materials on disease prevention & control	All 14 governorates	# of IEC materials developed/distributed	300,000
Evaluation study for the implementation of EWARS	Damascus	Evaluation report endorsed	1
Conduct supervisory visits	All 14 governorates	# of visit conducted per month	2

Outcome-level indicators and targets

2.1.4 Technical/ logistic support to strengthen HMIS

Top-priority activities:

Activity	Locations	Indicator	Target
Strengthen HeRAMS to improve timeliness and completeness of reporting, quality of data, and flow of information	All 14 governorates	# of reporting governorates to the system	14
Expand the HeRAMS to cover new health facilities (including MOHE hospitals, health sector partners clinics and private sector)	All 14 governorates	# of new health facilities regularly reporting	45
Develop an automated database management web-based system for the HeRAMS	Damascus	developed database system	1
Strengthen national capacity , through regular trainings and development courses	All 14 governorates	# of training sessions conducted	4
Conduct supervisory visits and joint assessments	All 14 governorates	# of visit conducted visits	20

Sector objective 2.1.5:

Support delivery of essential mental health services, including filling the gap for essential medicines, supplies and equipment.

Top-priority activities:

Activity	Locations	Indicator	Target
Assess available Mental Health and Psycho-Social Support (MHPSS) needs and resources	Lattakia, Tartous, Homs, Dara'a, Aleppo, As-Sweida and Damascus	# of field visits conducted	7
Design, print and disseminate (also online) public awareness and self-help materials.	All 14 governorates	# of leaflets and other information material distributed	500
Procure and deliver essential psychotropic medicines based on current needs at PHC and MH specialized care levels	Almawasat General Hospital, Ibn-e-Sina Mental Hospital, Ibn Khaldoun Mental Health Hospital and Ibn Roushed Mental Hospital	Targeted population reached	400,000
Procure and deliver essential equipment, based on current needs at PHC and MH specialized care levels	Almawasat General Hospital, Ibn-e-Sina Mental Hospital, Ibn Khaldoun Mental Health Hospital and Ibn Roushed Mental Hospital, Dara'a and Aleppo	# of consultations	400,000
Support delivery of PSS and PFA to affected population	14 governorates	# of mobile teams providing PSS and PFA	28
Integrate MHPSS in the package of PHC through supporting multidisciplinary MHPSS services in PHC settings.	Damascus, rural Damascus, Lattakia, Tartous, Homs, Hama, Aleppo, al Hasakeh,	# of PHC facilities providing MHPSS services	15

STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/ stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.

Sector objective 3.1:

Support public, social and private health infrastructure and services affected by the crisis.

Outcome-level indicators and targets

3.1.1 Enhanced revitalization of health services and restoration of health facilities in affected areas;

Top-priority activities:

Activity	Locations	Indicator	Target
Support emergency rehabilitation of maternal health centres in affected areas	Homs, Aleppo, Dara'a, Rural Damascus	# of maternal health centre rehabilitated	5
Support emergency rehabilitation of maternal hospitals in affected areas	Homs, Aleppo, Dara'a, Deir-ez-Zor	# of maternal hospitals rehabilitated	3
Emergency rehabilitation / Re-function emergency units including emergency theatres, emergency labs and blood banks in crucial areas	Homs, Aleppo, Dara'a, Rural Damascus, Alraqqah	# of emergency unit rehabilitated/ re-functioned	22
Emergency rehabilitation/ Re-function operating PHC facilities in crucial areas	Homs, Aleppo, Dara'a, Rural Damascus, Alraqqah	# of PHC facilities rehabilitated/ re-functioned	75
Rehabilitate mental health wards in general hospital in Syria	Damascus [Almawasat General Hospital], Aleppo	# of departments rehabilitated	2

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Sector objective 4.1:

Develop operational and management capacities of local health actors, including NGOs and CBOs to respond to the humanitarian crisis.

Top-priority activities:

Activity	Locations	Indicator	Target
Strengthen the capacity of healthcare providers in management of mass casualties (triage, trauma management, etc.)	7 most affected governorates	# of staff trained	250
Provide training courses on improving the quality of PHC and referral services for MOH and local NGO partner staff from different governorates	Damascus [or Beirut]	# of staff trained	350
Train rapid response teams at the local level on early detection and case management	All governorates	# of RRT activated	28
Conduct in-service training for MCH care providers	7 most affected governorates	# of health staff trained on MCH package	100

Activity	Locations	Indicator	Target
Train healthcare providers on vaccine administration and management (as well as side effects)	Lattakia, Tartous, Hama and Homs	# of health staff trained	1000
Conduct TOT training on protection in health	NGOs, SARC, MOH, MHE	# of trainees	100
Support capacity building of midwives to delivery basic Emergency Obstetric Care	14 governorates	# of midwives with enhanced capacity	150
Conduct MISP training to support capacity building of reproductive health care providers	14 governorates	# of MISP training	10
Train community volunteers on identifying danger signs during pregnancy, promotion of breastfeeding and promotion of follow-up for immunization of children <1 year of age	14 governorates	# of volunteers staff trained	350
Build capacity of MoH and MoHE staff on infection prevention and control	MoH and MoHE hospitals	# of staff trained	75
Build capacity of healthcare providers in specialized secondary healthcare	Damascus	# of staff trained	250
Conduct a workshop for the review and adaptation of the Mental Health Gap Action Program (mhGAP-IG) implementation model to the Syrian context for MH professionals, MoH policy-makers, SARC members, UN agencies/ INGOs and NGOs staff	Damascus	# of staff trained	30
Conduct Training of Trainers (basic) on the contextualized mhGAP intervention guide	Damascus [or Beirut]	# of staff trained	25
Capacity building for MHPSS professionals, NGOs and frontline workers	8 governorates	# of MHPSS professionals trained.	
Build capacity of health cadres on Psychological First Aid (PFA), management of common mental health problems among children, adolescence, psychological skills, primary mental health services.	Damascus, Reef Damascus, Tartus	# of staff trained	645
Develop and implement a program to enable outreach volunteers to actively participate in health promotion & disease prevention activities/initiatives, and to take a wider role in hard-to-reach areas.	ALL the 14 governorates	of volunteers trained	300
Enroll 2 Syrian MH professionals from MoH in a WHO distance learning programme	On-line	# of staff trained	2

Sector objective 4.2:

Increase the presence of humanitarian actors and widen access to crisis-affected populations, local actors and relevant humanitarian information.

Outcome-level indicators and targets

4.2.1 Decentralized pre-positioning of medicines, supplies and equipment and decentralized implementation of activities through NGOs/ CBOs

Activity	Locations	Indicator	Target
Strengthen the capacity of existing warehouses located in key areas	Damascus, Rural Damascus, Aleppo, Qamishly, Homs, Tartous	# of warehouses in key areas	5
Prepositioning health kits and medical items in different governorates to insure quick dispatch as needed	Damascus, Rural Damascus, Aleppo, Qamishly, Homs,	# of medicine and medical supplies prepositioned in each warehouse	Sufficient for 50,000 population in

Activity	Locations	Indicator	Target
	Tartous		each store
Improve cooperation of NGO/ CBOs located in key areas of the country	Damascus, Rural Damascus, Aleppo, Qamishly, Homs, Tartous	# of contracted NGOs /CBOs	60

Sector objective 4.3:

Improve coordination among national, international actors and health authorities at central and local level to enhance assistance delivery.

Outcome-level indicators and targets

4.3.1 Strengthened coordination through regular Health Working Group meetings.

Activity	Locations	Indicator	Target
Support the development of seasonal plans and geographical sector plans	Damascus	# of contingency plans developed per year	2
Strengthen the strategic M&E framework for the Health Sector [in line with SHARP 2014]	Damascus	# of quarterly monitoring reports developed	4

STRATEGIC OBJECTIVE 5: Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

Sector objective 5.1:

Expand/ strengthen current humanitarian hubs, with an integrated contingency-planning process, involving all actors

Outcome-level indicators and targets

5.1.1 Increased number of sub-offices present in the country

Activity	Locations	Indicator	Target
Establish new sub-offices in key areas	Qamishly, Aleppo, and Dara'a	# of hubs established	3
Conduct awareness-raising campaigns on health and hygiene to promote a protective healthy environment for civilians	All 14 governorates [through WFP food packages delivery]	# of educational campaigns conducted	28

Projects

Government bodies	Ministry of Health (MoH)
Appealing Agency	UNITED NATIONS POPULATION FUND (UNFPA)
Project title	Reproductive healthcare services in affected areas in Syria
Objective	Support delivery of life-saving reproductive healthcare including emergency obstetric care and family planning
Beneficiaries	Total: 2,825,000 Women and men of RH age Women: 2,325,000 Other group: 500,000 Men
Participants	MoH, MoHE, SARC, participating international and local NGOs
Budget (\$)	\$11,500,000

Government bodies	Ministry of Health (MoH)
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Support primary healthcare services for children and mothers including polio outbreak response
Objective	<ol style="list-style-type: none"> 1. To sustain routine vaccination programme for children under five among affected population 2. To reach children under five with at least six supplementary vaccination campaigns for polio eradication (all U5 children). 3. To reach children under five with MMR vaccine through vaccination campaign. 4. To provide children under five with access to primary healthcare (13.4% of total estimate affected/IDP population). 5. To increase awareness of mothers on maternal and child healthcare (4% of the affected population).
Beneficiaries	Total: 1,980,000 All children under five years (1.6 million) and lactating mothers among affected population (4% of 9.5 million) Children: 1,600,000 Women: 380,000
Participants	MoH, MoHE, SARC, participating international and local NGOs
Budget (\$)	\$20,470,000
Government bodies	Ministry of Health (MoH)
Appealing Agency	PREMIERE URGENCE (PU)
Project title	Improving the access to Primary Healthcare for Syrian crisis affected population and IDPs in Homs city
Objective	The objective is to cover emergency health needs of the most affected people in Homs city through the opening of a SARC static clinic implemented by PU in order to provide primary healthcare services.
Beneficiaries	Total: 22,800 Crisis-affected persons in Syria Children: 11,500 Women: 6,000
Participants	SARC
Budget (\$)	\$385,200
Government bodies	Ministry of Health (MoH)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Support of national tuberculosis and HIV/AIDs programmes in Syria.
Objective	<ol style="list-style-type: none"> 2.1 Sector Objective: Scale up timely and targeted provision and delivery of coordinated life-saving emergency assistance, including filling the gap for essential medicines, medical supplies and medical equipment 2.1.2 Support comprehensive primary and secondary healthcare services to strengthen healthcare delivery and support institutional capacity for emergency preparedness and response in addition to outreach activities
Beneficiaries	Total: 3,200 Pulmonary and extra pulmonary tuberculosis patients of all ages (Male & Female) for first line & MDR treatment and PLWHV all ages (Male & Female).
Participants	MoH
Budget (\$)	\$390,550

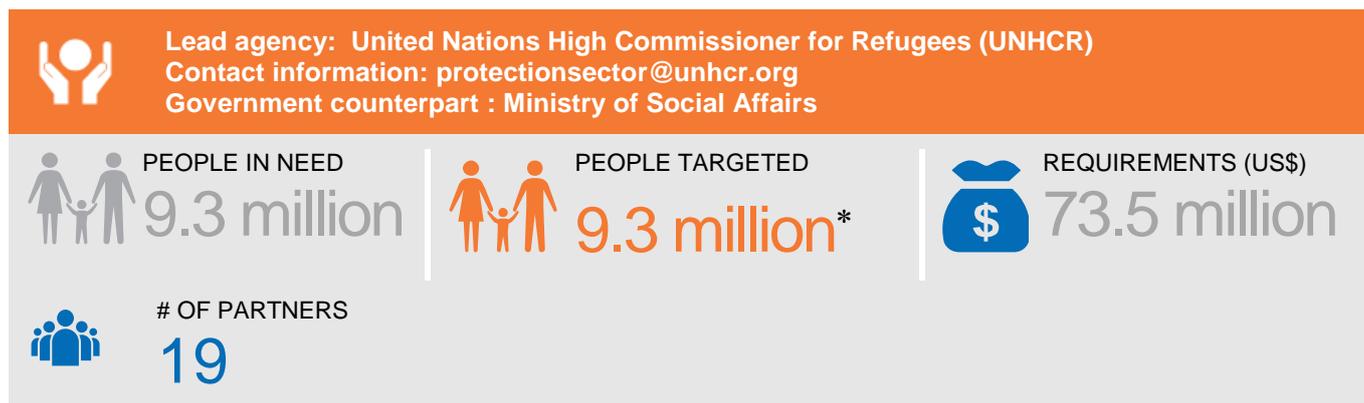
Government bodies	Ministry of Health (MoH)
Appealing Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Project title	Access to comprehensive PHC and emergency medical and surgical referrals
Objective	<ul style="list-style-type: none"> • Monitor, assess and promote equal access by the most affected population to basic health services • Improve access of 700,000 affected persons to comprehensive primary and secondary healthcare • Support delivery of essential medicines, supplies and equipment • Support emergency life-saving medical and surgical care for 4,000 • Support delivery of essential mental health services including filling the gap for essential medicines
Beneficiaries	Total: 700,000 Internally displaced persons. Children: 140,000 Women: 336,000 Other group: 224,000
Participants	MOH, MoHE, SARC, national NGOs and International NGOs
Budget (\$)	\$13,844,475
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Drugs and medical supplies for 440,000 vulnerable Palestine refugees
Objective	Ensure access to essential drugs and medical supplies for 440,000 Palestine refugees, through a combination of emergency procurement and prepositioning.
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$3,330,000
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Access to hospital care for 440,000 vulnerable Palestine refugees
Objective	Ensure access to hospital care for 440,000 Palestine refugees, through 75-95% subsidy of individual costs.
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$2,220,000
Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Scale up timely and targeted delivery of coordinated life-saving emergency assistance by supporting trauma healthcare services.
Objective	To strengthen level of preparedness for and management of trauma, including referral mechanisms, for an increasing number of injuries across the country.
Beneficiaries	Total: 20,000,000 People in need of trauma care. Children: 7,580,000 Women: 10,200,000
Participants	MoH, MoHE, SARC and participating INGOs, and NGOs
Budget (\$)	\$43,195,000

Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Strengthening emergency Health Information System
Objective	Further strengthening of the Health Information System for emergency using HeRAMS (Health Resources & services Availability Mapping System) for regular, timely and accurate collection and dissemination of data.
Beneficiaries	Total: 21,000,000 HIS decision makers, and population in need across 14 governorates Children: 7,980,000 Women: 1,071,000
Participants	MoH, MoHE, INGOs, NNGOs, and UN Partners
Budget (\$)	\$921,270
Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Strengthen and expand the EWARS project for the detection, prevention and control of existing and potential epidemic prone diseases and support life-saving interventions, including for the control of a polio epidemic.
Objective	To prevent, early detect and respond to epidemic prone diseases; To contain current polio epidemic and prevent spread of the disease to other countries/ regions.
Beneficiaries	Total: 21,000,000 80% of the population will be protected from the potential outbreaks Children: 7,980,000 Women: 1,071,000
Participants	MoH, SARC, private health providers and relevant NGOs
Budget (\$)	\$16,486,560
Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Support delivery of secondary healthcare services.
Objective	To improve access to secondary healthcare services and limited tertiary healthcare services for burn victims.
Beneficiaries	Total: 2,000,000 men, women, children with injuries and burns. In addition to patients with chronic diseases. Children: 758,000 Women: 1,020,000
Participants	MoH, MoHE, SARC and NGOS
Budget (\$)	\$48,483,626
Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Scaling up mental health services.
Objective	To strengthen mental health service delivery across Syria.
Beneficiaries	Total: 5,580,000 50% of targeted people Children: 2,120,400 Women: 2,845,800
Participants	MoH, NGOS
Budget (\$)	\$8,206,900

Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Enhanced revitalization of primary healthcare (PHC) services and restoration of health facilities in affected areas
Objective	Improve access to essential primary healthcare including preventive and curative care to the affected population.
Beneficiaries	Total: 9,300,000 60% of people in need. Children: 3,524,700 Women: 4,743,000
Participants	MoH, MoH, SARC, participating International NGOs and local NGOs.
Budget (\$)	\$56,553,500
Government bodies	Ministry of Health (MoH)
Appealing Agency	INTERNATIONAL MEDICAL CORPS (IMC)
Project title	Primary Healthcare services provision to crisis affected Syrian population
Objective	To improve health status of Syrian population affected by the crisis
Beneficiaries	Total: 28,500 All age and gender groups including beneficiaries with disabilities and special needs Children: 2,500 Women: 13,000 Other group: 13,000
Participants	MoH, SARC Tartous Branch
Budget (\$)	\$626,642
Government bodies	Ministry of Health (MoH)
Appealing Agency	INTERNATIONAL MEDICAL CORPS (IMC)
Project title	Primary Healthcare services provision to crisis affected Syrian population
Objective	To improve health status of Syrian population affected by the crisis
Beneficiaries	Total: 11,000 Beneficiaries from all age groups and all genders groups including with disabilities and other special needs Children: 1,000 Women: 5,000 Other group: 5,000
Participants	MoH, SARC Dar'a Branch
Budget (\$)	\$449,028
Government bodies	Ministry of Health (MoH)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP) WORLD HEALTH ORGANIZATION (WHO)
Project title	Rehabilitation of partially damaged health facilities in target Governorates
Objective	To support public and private health infrastructure and services affected by the crisis and enhanced revitalization of health services and restoration of health facilities in affected areas.
Beneficiaries	IDPs/affected population
Participants	MoH, Participating local NGO's and INGOs
Budget (\$)	\$4,000,000

Government bodies	Ministry of Health (MoH)
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Health Sector/Cluster Coordination.
Objective	1. To strengthen sector coordination to address the needs of men, women, boys and girls in arising and on-going emergencies. 2. To contribute towards improving access of vulnerable populations to a quality basic healthcare package of services and ensure adequate preparation and response capacities for on-going and new emergencies.
Beneficiaries	Total: 9,300,000 All health sector partners Children: 3,524,700 Women: 4,743,000
Participants	MoH, WHO, UNICEF, UNFPA, UNHCR, IOM, UNDP, INGO and NGOs
Budget (\$)	\$462,796
Government bodies	Ministry of Health (MoH)
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency Health Support to IDPs and Affected Population in Syria
Objective	To provide life-saving Health Support for vulnerable population affected by the crisis including women and children.
Beneficiaries	Total: 92,940 Displaced population in public shelters, and host communities in all governorates in Syria, keeping priority for Aleppo, Idleb, Homs, Latakia and Rural Damascus. Children: 27,882 Women: 46,470
Participants	MoH
Budget (\$)	\$1,850,625

PROTECTION & COMMUNITY SERVICES



Sector Strategy

Protection in the context of the humanitarian crisis in Syria, and in particular for the SHARP, means the protection of all affected civilians including children, women, men and other groups with specific needs from violence, exploitation, discrimination, abuse and neglect resulting from the crisis. In the course of implementing its protection activities, the UN will work in partnership with the Government to empower the state institutions to uphold humanitarian norms and principles. The UN will also continue to advocate for greater respect for international humanitarian law and international human rights law, with relevant stakeholders.

The scope of beneficiaries covered by the Protection and Community Services sector therefore is both wide-ranging, encompassing all civilians affected by the crisis, as well as targeted, focusing on groups with specific needs, particularly IDPs, Palestine refugees, migrant workers, women at risk, children and adolescents, persons with disabilities and the elderly.

Ensuring the protection and welfare of the population on its territory is, first and foremost, the responsibility of the State. Recognition of this responsibility by the Government of Syria is reflected in the many international conventions to which the Government is a party. International support for protection and community services can enhance and complement national efforts. Local organizations and community-based initiatives also are major partners.

For protection and community services activities undertaken in the framework of the SHARP, the Ministry of Social Affairs (MoSA) is the line ministry for overall coordination with the sector. In addition, for specific activities, the sector also coordinates closely with other ministries, in particular: with the Ministry of Health (MoH) for the implementation of psychosocial support and services (PSS) as well as components of prevention and response to gender-based violence (GBV)⁴²; and with the Ministry of Education (MoE) for risk education activities that are carried out in schools, as part of the child protection response.

Advocate the protection of civilians in accordance with international humanitarian law and international human rights law is a strategic objective of the SHARP 2014, which engages all sectors of the humanitarian response. The Protection and Community Services sector contributes to achievement of this strategic objective in two ways: through its sector strategy and response plan, set out below; and by supporting the mainstreaming of gender and core protection principles (e.g. equality and participation) and strengthening of protection capacity across all other sectors of humanitarian response.

* The number of persons targeted by protection sector activities detailed in the log-frame actually is 9.42 million as awareness-raising cover a broader population and capacity-building activities target service providers.

⁴² With specific reference to the Executive Summary, for the purposes of the SHARP, GBV means the prevention and response to violence against women and girls.

In 2014, the Protection and Community Services sector has three objectives:

1. Expand provision of protection and community services for affected populations, with special emphasis on persons with specific needs;
2. Enhance protection and community-services capacities among Government service-providers and other relevant stakeholders, and strengthening community-based initiatives; and
3. Increase understanding, knowledge, awareness and analysis of protection and social issues in order to inform advocacy and operational response.

The Protection and Community Services sector strategy and response plan therefore contributes to achievement of the following SHARP strategic objectives: to advocate for the protection of civilians (SO-1); to increase provision of life-saving emergency assistance and essential services to affected populations (SO-2); and to enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms (SO-4).

Sector Activities

1. Protection and assistance to internally displaced persons (IDPs)

The number of IDPs has surged from 4.5 million IDPs in April 2013, to 6.5 million IDPs as of end 2013.⁴³ This figure includes approximately 270,000 Palestine refugees (half of the total population of 540,000 Palestine refugees in Syria)⁴⁴ who have now been displaced within Syria by the crisis. Many civilians have experienced multiple displacements. Displaced persons in Syria are in urgent need not only of humanitarian assistance -- especially shelter (less than 3% of IDPs are accommodated in official collective shelters), food, water, clothing, other core relief items, and medical care -- but also social services to ensure appropriate response to protection concerns. For instance, displacement often results in family separation, exposing children, the elderly, persons with disabilities and women headed households to heightened risk. Also common is the loss of personal identification documents, the lack of which can effect displaced persons' access to assistance and public services such as health and education, limit their freedom of movement, and may expose them to heightened risk of harassment and abuse. Moreover, with the prolongation of the crisis and with each new displacement, any savings and resources with which IDPs managed to leave have been severely eroded, increasing their reliance on humanitarian assistance as well as their exposure to protection risks including exploitation, gender-based violence, trafficking, child recruitment, child labour, and forced early marriage of girls. Therefore, there is an urgent need to provide essential social services.

Activities:

- Capacity building on shelter management in official IDP collective shelters;
- Community support programs;
- Cash-based assistance to vulnerable households;
- Family tracing and reunification;
- Joint assessment of protection concerns to identify persons with specific needs;
- Expansion of the number of Community Centres and support to existing community centres where IDPs can access psychosocial, legal assistance, and other social services;
- Support for community-based initiatives.

2. Explosive Remnants (ER)

ERs pose a pervasive threat of injury and death to civilians. Children are in particular danger due to their natural curiosity and high mobility. IDPs also are heightened risk due to their mobility. ER also pose obstacles to civilians' safe access to health, education and other essential assistance.

Activities:

- Awareness raising;
- Risk Education;
- Provision of protective film for windows to schools in high-risk areas to reduce injuries;
- Victim assistance (to provision of assistance to injured people/physically challenged).

⁴³ Figures are according to UN estimates. The Government of Syria contests these figures.

⁴⁴ Figures are according to UN estimates. The Government of Syria contests these figures.

3. *Gender-based violence (GBV)*⁴⁵

GBV has been exacerbated by the crisis and consequent displacement, family separation, and limited access to basic services and support mechanisms. Sexual violence, domestic violence, and forced early marriage are some of the main forms of GBV suffered by women, girls and boys in Syria. The majority of stranded migrant workers who are in need of evacuation assistance are single females who may face severe exposure to physical, verbal and sexual abuse. Services to prevent and respond to GBV need to be enhanced. Moreover, access to the limited assistance available often is constrained due to insecurity and family restrictions on movement. Societal norms also condone certain forms of GBV, reinforce survivors' stigma and support impunity for perpetrators, which has led to reluctance to report incidents. Scaling up GBV prevention and response is a priority for this sector in 2014, to be pursued in close partnership with MoSA and MoH.

Activities:

- Awareness-raising on GBV;
- Establishment of safe spaces and safe houses for women;
- Development and implementation of medical protocols, standard operating procedures, and guidelines for GBV prevention and response in coordination with partners and relevant Government authorities;
- GBV screening, assessment and referrals
- Emergency medical care (including PEP and STI kits);
- Psychosocial support;
- Legal assistance;
- Cash assistance;
- Vocational training and other livelihood activities;
- Emergency evacuation of female migrant workers at risk;
- Ensuring awareness on GBV prevention and response across all sectors of response.

4. *Child protection*

Children and adolescents have been severely and disproportionately affected by the crisis and face specific protection risks, including: physical harm, kidnapping, unlawful detention, recruitment and other use by armed groups, targeting and occupation of schools, forced early marriage, sexual exploitation, trafficking, school dropouts, lack of access to services, child labour, violent abuse, neglect, and separation from their families. Psychological distress and post-traumatic disorders are especially prevalent among children and adolescents. The existence of ER resulting in death and injury of children is a serious concern.

Activities:

- ER risk education, in particular implemented in schools, in coordination with the Ministry of Education;
- Family tracing and reunification, in cooperation with MoSA and other relevant authorities;
- Advocacy and awareness-raising on child protection concerns, including child recruitment;
- Psychosocial support services, in cooperation with MoSA, MoH and other partners;
- Establishment of Child-Friendly Spaces;
- Recreational and educational activities in cooperation with MoE and MoSA;
- Community initiatives to support children and their families;
- Develop & implement referral mechanisms with relevant Government authorities in support of child protection activities;
- Support and enhance the national child protection information management system.
- Coordination on child protection with all relevant stakeholders.

5. *Targeted support for persons with disabilities and the elderly*

The number of persons with disabilities has surged due to ER and other crisis-related injuries. Persons with disabilities and the elderly experience heightened vulnerability. Mobility constraints can affect their ability to access assistance and essential services or even to leave unsafe areas, risking that they be separated from family support. They are at risk of discrimination and neglect. The capacity of health and social services to provide them with the specific assistance and services they require is over-stretched by the magnitude of needs and the

⁴⁵ With specific reference to the Executive Summary, for the purposes of the SHARP, GBV means the prevention and response to violence against women, girls and boys.

significant damage to infrastructure. The existing national health and social services systems require strengthened support to assist persons with disabilities and the elderly.

Activities:

- Awareness-raising and sensitization campaigns;
- Community support activities through community volunteers;
- Targeted support services for individuals (e.g. psychosocial, referral for health services etc.);
- Capacity-strengthening support for established health and social services, in coordination with MoSA, MoH and the health sector;
- Financial support for the purchase of prostheses and other required equipment, support or services;
- Support to Government institutions and services for persons with disabilities.

6. *Targeted financial and material support to persons with specific needs*

The provision of financial and material support to persons with specific needs can assist them in meeting critical household or personal needs and in mitigating their exposure to protection problems. While food assistance, shelter, and core relief items are provided through other sectors, namely Food and Shelter/NFI sectors, small-scale additional support, with one-time cash assistance grants and provision of targeted material assistance is provided through the protection and community-services sector, to persons with specific needs. This small-scale assistance provides critical support for individuals supplemental to the standard relief packages, until they can regularly access the specialized additional support they require, and in some locations where delivery of Core Relief Items (CRI) assistance is challenging due to access difficulties, cash assistance is provided in lieu of CRIs. The distribution of cash assistance and targeted material assistance is based on vulnerability criteria developed and monitored by MoSA and relevant UN agencies.

7. *Strengthening community-based initiatives*

Given the magnitude of needs and the challenges faced by assistance and service providers to safely and regularly reach all affected populations, it is essential to encourage and support community mobilization and community-based initiatives, which have proven to be an effective tool to strengthen community resilience, promote solidarity, and empower affected populations to collectively identify and implement, in a participatory approach solutions, to address their priority concerns.

Activities:

- Community-based initiatives (CBI) and community programmes in coordination with MoSA.
- Support to small local organizations working directly with communities on protection and community services activities, in cooperation with MoSA.

8. *Mainstreaming protection, gender and environment across all sectors of humanitarian response*

Protection mainstreaming will be promoted across all sectors by incorporating protection principles in humanitarian assistance and promoting meaningful access, safety and dignity in humanitarian aid⁴⁶. The sector will also seek to advance gender equality in all its activities, with a particular focus on the prevention and response to GBV⁴⁷, which targets a particular group of persons who are disadvantaged because of their gender role. In the humanitarian response, all sectors will also prioritise the need to preserve the environment by promoting a consciousness among humanitarian actors of the potential negative impacts of humanitarian action, and what steps may be needed to mitigate the negative effects on the environment.

⁴⁶ The key protection principles that must be taken into account in all humanitarian activities are: (a) avoid causing harm, (b) equality and (c) beneficiary participation.

⁴⁷ With specific reference to the Executive Summary, for the purposes of the SHARP, GBV means the prevention and response to violence against women, girls and boys.

STRATEGIC OBJECTIVE 1: Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law.

Sector objective:

Increase understanding, knowledge, awareness and analysis of protection and social issues in order to inform advocacy and operational response

Top-priority activities:

Activity	Locations	Indicator	Target
Advocacy on protection of civilians	ALL	# of advocacy initiatives taken by HCT and/or sector partner	12
Awareness-raising on protection principles, including on child protection and GBV	ALL	# of persons reached by protection awareness-raising initiatives	2,443,100
Assessment and analysis of protection needs	ALL	# of assessments and analyses on protection needs	10

Sector objective:

Expand provision of protection and community-services for affected populations, with special emphasis on persons with specific needs

Activity	Locations	Indicator	Target
Awareness raising and risk education on ER	Damascus, Homs and Aleppo governorates	# of individuals benefitting from ER risk education and victim assistance	5,444,000
Identification, documentation, tracing and reunification (IDTR) for separated and unaccompanied children	Damascus	System established for identification, documentation, family tracing and reunification	1
Screenings, assessments and referrals for GBV ^{48,49}	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Al-Hassakeh, Dara'a, Deir-ez-Zor, Hama	# of screened and assessed for GBV in reproductive health clinics	50,000
		# of referred for specialized GBV response services in RH clinics, including clinical and social	20,000
Psychosocial support and services, including outreach activities, community/family support, focused non-specialized support, and psychiatric/psychological care	ALL	# of individuals benefitting from psychosocial support and services, including # of children and adolescents (boys/girls), # of adults (men/women), # of GBV survivors and # of elderly	505,000
Legal assistance	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Dara'a	# of individuals provided with legal assistance – counseling, assistance (including for documentation) and	8,920

⁴⁸ With specific reference to the Executive Summary, for the purposes of the SHARP, GBV means the prevention and response to violence against women and girls.

⁴⁹ These 70,000 individuals also are part of UNFPA's awareness-raising target figure.

Activity	Locations	Indicator	Target
Community centres providing integrated services for IDPs and host communities	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Lattakia, Dara'a, As-Sweida	awareness-raising. # of community centres	15
Learning & recreational activities, including life skills, drop-out activities, remedial classes and support for learning difficulties	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Lattakia, Al-Hassakeh, Dara'a, As-Sweida	# of children and adolescents (boys/girls) and # of adults (men/women) benefitting from learning & recreational activities including life skills, drop-out activities, remedial classes & support for learning difficulties	57,750
Social counseling	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Lattakia, Al-Hassakeh, Dara'a, As-Sweida	# of individuals benefitting from social counseling, including # of children and adolescents (boys/girls), # of adults (men/women)	31,050
Child-friendly spaces (CFS) providing activities and services to children	Damascus, Rural Damascus, Aleppo, Homs, Tartous	# of child friendly spaces & mobile child protection units	130
Safe spaces and safe houses for women and girls	Damascus, Rural Damascus, Homs, Tartous	# of new safe spaces and safe houses	5
Protection support & services to Palestine refugees	Damascus, Rural Damascus, Aleppo, Homs, Hama, Lattakia, Dara'a	# of Palestine refugees benefitting from protection support and services	440,000
Emergency humanitarian evacuation of migrant workers at risk	ALL	# of migrant workers evacuated	1,800
Cash assistance to support vulnerable persons with specific needs	Damascus, Rural Damascus, Aleppo, Homs, Hama, Tartous, Lattakia, Al-Hassakeh, Dara'a, As-Sweida	# of individuals benefitting from one-off cash assistance	489,000
Targeted material assistance to enhance protection of vulnerable persons	ALL	# of children and adolescents (boys/girls) and # of adults (men/women) benefitting from targeted material assistance to enhance protection of vulnerable persons	734,100

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Sector objective:

Enhance protection and community-services capacities among Government service-providers and other relevant stakeholders, and strengthening community-based initiatives

Top-priority activities:

Activity	Locations	Indicator	Target
Capacity-building initiatives	ALL	# of service providers & other professionals benefitting from protection capacity-building activities, including on child protection and GBV prevention and response	19,650
Community-based initiatives	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Lattakia, Al-	# of support activities for community-based initiatives # of individuals benefitting from community-	220 900

Activity	Locations	Indicator	Target
	Hassakeh, Dara'a, As-Sweida	based initiatives	
		# of outreach volunteers assisting the community-based initiatives	150
Support to local organization working directly with communities	Damascus, Rural Damascus, Aleppo, Homs, Tartous, Lattakia, Al-Hassakeh, Dara'a, As-Sweida	# of support activities local organizations	50
		# of individuals benefitting from grants to local organizations	5,000

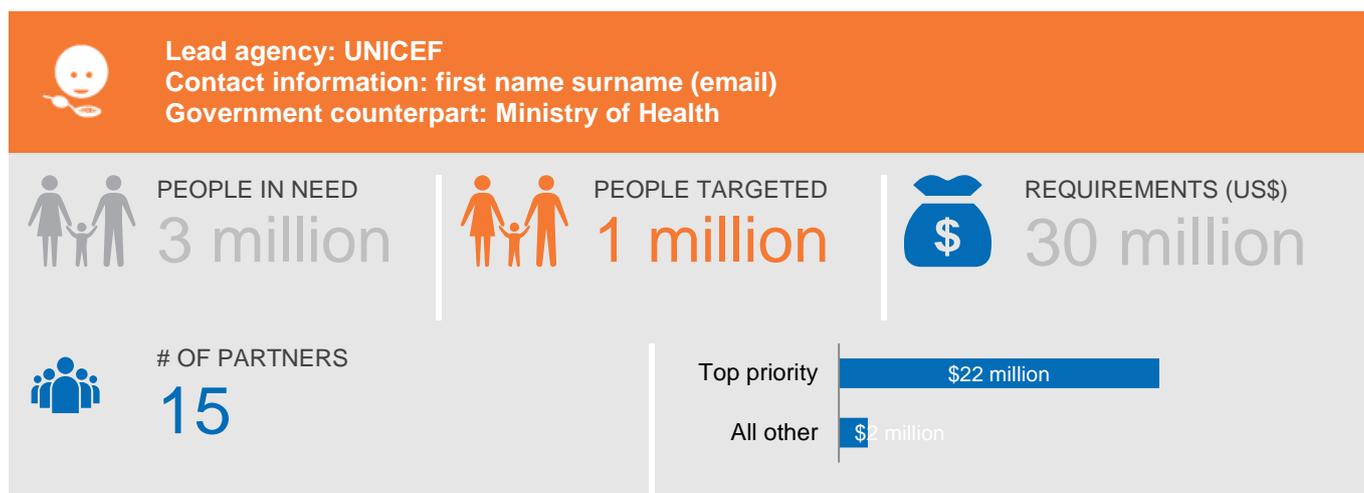
Projects

Government bodies	Ministry of Education, Ministry of Social Affairs (MoSA)
Appealing Agency	UNITED NATIONS MINE ACTION SERVICE (UNMAS)
Project title	Explosive Remnants (ER) Awareness-raising and Risk-education
Objective	Reduce threat to Syrian boys, girls, women and men from explosive remnants in populated areas.
Beneficiaries	Total: 4,934,055 Populations of three affected governorates (Aleppo, Damascus, Homs) ER Children: 836,460 Women: 1,578,898
Participants	MoE, DRC and partners qualified to conduct ER Awareness-raising and Risk-education
Budget (\$)	\$4,762,898
Government bodies	Ministry of Social Affairs (MoSA)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Protection and assistance to displaced and crisis affected women and men in Syria.
Objective	The project responds to the needs of displaced and other Crisis affected Syrian women, girls, men and boys, namely: community services, education, social integration, community-- based initiatives; livelihood initiatives and psychosocial support. Particular emphasis will be given to increasing the resilience of women and girls, reducing their exposure to risks, helping them to enhance their coping mechanisms to mitigate the consequences of the crisis, to take informed and active stand for their future.
Beneficiaries	Total: 18,400 IDPs, displaced refugees, host community members Children: 5,000 Women: 8,400 Other group: 5,000 Men, and people with disabilities, the elderly and people with serious medical conditions
Participants	MoSA, SARC
Budget (\$)	\$1,961,000
Government bodies	Ministry of Education, Ministry of Social Affairs (MoSA)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	ER Risk Education for IDPs and crisis affected population in Syria
Objective	- Awareness-raising and Risk-education and reduction the civilian population's risk to explosive remnants - Damascus, Rif Damascus, Dara'a, Aleppo and Homs
Beneficiaries	Total: 10,000 Syrian civilians, primarily youth and children in RIF Damascus, Homs and Dara'a. No. and category of beneficiaries: minimum 5,000 schoolchildren and teachers during the first 6 month period. Children: 8,000 Other group: 2,000 Teachers and beneficiaries in the 6 Community Centers
Participants	SARC, MoE
Budget (\$)	\$1,961,000
Government bodies	Ministry of Social Affairs (MoSA), Ministry of Health
Appealing Agency	UNITED NATIONS POPULATION FUND (UNFPA)

Project title	Prevention and response to GBV in Syria
Objective	Enhance the prevention and response mechanisms for GBV, including psychosocial support for IDP women and girls and their families in crisis-affected areas in Syria
Beneficiaries	Total: 2,325,600 Women, young girls and families, as well as community leaders and service providers Women: 2,325,000 Other group: 600 Service providers and community leaders
Participants	MOSA, MOH, SFPA, SAHPAD, SARC, local and international NGOs and CBOs working in affected areas
Budget (\$)	\$1,952,750
Government bodies	Ministry of Social Affairs (MoSA)
Appealing Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Project title	Support to vulnerable IDPs and host community through the provision of integrated protection and community services, targeted assistance, outreach and community-based programs to strengthen community resilience.
Objective	Respond to and seek to prevent identified protection concerns and strengthening community resilience.
Beneficiaries	Total: 400,000 Targeting the most vulnerable including persons with disabilities, elderly, women and children at risk Children: 200,000 Women: 120,000 Other group: 80,000 Elderly, disabled and others Women: 2,325,000 Other group: 600 Service providers and community leaders
Participants	MOSA, SARC, local and international NGOs and CBOs working in affected areas
Budget (\$)	\$12,690,769
Government bodies	Ministry of Social Affairs (MoSA)
Appealing Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Project title	Cash based program to enhance the protection of vulnerable IDPs
Objective	Respond promptly to, and seek to prevent, identified protection concerns, ensuring targeted response for persons with specific needs.
Beneficiaries	Total: 489,000 Vulnerable individuals, including women head of households Children: 244,500 Women: 97,800 Other group: 146,700 elderly, disabled and others
Participants	UNHCR Direct Implementation
Budget (\$)	\$16,919,103
Government bodies	Ministry of Social Affairs (MoSA)
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency Support to Counter Trafficking and Humanitarian Assistance Services to Displaced and affected communities in Syria
Objective	To enhance local NGOs protection and community services and outreach program through capacity building trainings.
Beneficiaries	Total: 100,370 Displaced and affected population in public shelters and host communities, taking into consideration the special needs of women, children, elderly and people with disability as priority. Children: 30,111 Women: 50,185
Participants	MOSA, SARC
Budget (\$)	\$2,549,531

Government bodies	Ministry of Social Affairs (MoSA)
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency assistance and protection to displaced and affected population and migrant workers in Syria
Objective	To provide life-saving activities for vulnerable population affected by the crisis including emergency evacuation for stranded migrant workers, psychosocial support for affected population and physical rehabilitation support to people with disability
Beneficiaries	Total: 40,500 Vulnerable migrant workers, IDPs, and affected population, taking the special needs of women, children, elderly and people with disability in priority Children: 12,150 Women: 20,250
Participants	MOSA, SARC
Budget (\$)	\$4,547,812
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Enhancing protection for Palestine refugees through community services and capacity building
Objective	Improved protection capacity for Palestine refugee
Beneficiaries	Total: 443,700 Palestine refugees/ 50/50 gender split Children: 136,400 Women: 219,000 Other group: 3,700 UNRWA staff trained on protection.
Participants	GAPAR
Budget (\$)	\$1,110,000
Government bodies	Ministry of Social Affairs
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Provide children, adolescents and women with protection and community services, psycho social support, Mine/ER risk education, prevention and response to protection concerns and capacity building of partners
Objective	<ul style="list-style-type: none"> • Children's, adolescents and women's coping mechanisms and resilience are strengthened, and affected boys and girls are receiving appropriate support • Community initiatives and referrals mechanism to medical and psychosocial support and other services are established and strengthened • Prevention and response to Gender-based Violence integrated into psychosocial support, child protection services and other services including distribution of protective targeted material assistance and WASH • Provision of ER Risk Education children and their families including IDPs • Children recruited or used by armed groups are released and reintegrated and further recruitment and use of children by armed groups are prevented. • Awareness increased and preventive action taken at different levels with MoSA and other stakeholders on key child protection risks. • Children, women and families supported with essential material assistance in most crisis affected areas and prepositioning of stocks for response in case of rapid deterioration of situation with a focus on winterization. • Support MoSA and other relevant authorities to develop and implement Family tracing/reunification systems (IDTR) and alternative care and community services to separated and unaccompanied children • Child Protection System strengthened • Coordinated work between Child Protection working group, MoSA, and other relevant authorities to provide strategic direction and minimum standards
Beneficiaries	Total: 1,407,000 Children, Women and adolescents Children: 650,000 Women: 400,000 Other group: 357,000 Adolescents and women for NFIs and awareness raising
Participants	Ministry of Social Affairs, Ministry of Education, SARC, participating International NGOs and local NGOs
Budget (\$)	\$25,000,000

NUTRITION



Sector Strategy

Nutrition Sector Strategic Objectives

1. Establishing nutrition information and strengthening surveillance systems and routine nutrition reporting in order to enable appropriated design, delivery and monitoring of the nutrition sector response.
2. Strengthening capacity for establishment of early detection of acute malnutrition among children (6-59m) and pregnant & lactating women, appropriate & timely treatment of SAM and MAM and follow up after discharge through expanding community network of volunteers, CBOs and NGOs outreach services and through government health facilities.
3. Prevention of under nutrition through accelerated promotion of appropriate infant and young child feeding, ensuring improved coverage of appropriate micronutrient intervention and promotion of nutrition sensitive response in coordination with WASH, health and food security to elevate positive behavioural influences.
4. Strengthen coordination of nutrition sector response in order to promote group achievement of nutrition sector objectives, including accomplishment of all nutrition sector activities and enhanced operational linkages with other relevant sectors, emergency preparedness and contingency planning and prepositioning.

Sector Activities

Considering the above, the Nutrition Sector response strategy has been designed to contribute to the Strategic Objectives of the overarching humanitarian response in Syria, through the pursuit of five key priority areas for action:

Priority Nutrition Activities with Rationale

1. **Strengthening the nutrition information and surveillance system** through standardization of data compilation and sharing from facility based (OTPs) and community based screening for malnutrition. Geographic targeting of nutrition programming will be based on available qualitative and quantitative data collection (facility based routine programme, sentinel sites, rapid assessment, comprehensive surveys, reports from campaign activities, focus group discussion, key informant interviews, etc.) In addition rapid assessments and nutrition surveys will be conducted. .. Routine nutrition information systems will also be assessed and supported in order to ensure timely availability of nutrition information (CMAM and IYCF focus) at a localised level to guide programme response, in addition to transmission of available nutrition data to support the overall sector response.
2. **Treatment of acutely malnourished children (6-59m) and pregnant & lactating women:** Enhanced early detection of malnourished children and PLW in communities through strengthening and expanding community network of volunteers, CBOs staff and NGOs outreach services and through government health facilities for timely treatment and follow up after discharge, along with appropriate supervisory support. With the destruction of many health facilities, the community based management of acute malnutrition (CMAM) approach will be adopted to complement the limited facility based treatment of severely malnourished cases

with medical complication to enhance coverage, requiring extensive training, supervisory support and supply chain management capacity. Severely and moderately malnourished children will be identified, treated and followed up to avert relapse and reduce risk for malnutrition related mortality. The possibility of integrating acute malnutrition treatment with PHC services at different levels of service delivery (community outreach, health centres, district and central hospitals) will be explored, and supply chain management capacity supported to prevent stock-outs of supplies

3. **Prevention of under nutrition through accelerated promotion of appropriate infant and young child feeding**, ensuring improved coverage of appropriate micronutrient intervention and promotion of nutrition sensitive response alongside positive behavioural influences.
 - a. Promotion of appropriate infant and young child feeding (IYCF) including undertaking breastfeeding campaign, monitoring and controlling of widespread or unchecked infant formula donations /distribution and awareness-raising on appropriate complementary feeding for children over 6 months of age as well as facilitating access to culturally acceptable appropriate complementary foods together with promotion of diversified diet accessible to the high risk groups (women, children IDPs/ refugees).
 - b. Provision of micronutrient supplementation through healthcare network, distribution of multiple micronutrients (sprinkles) where possible to the most vulnerable groups, distribution of lipid-based nutrient supplements to the vulnerable populations and provision of other recommended ready to use foods (e.g. High Energy Biscuits, plumpy doz), Targeted and general food distribution and promotion of fortified foods use.
 - c. Promotion of optimal maternal nutrition through provision of (and advocacy for) adequate maternal healthcare, micronutrient supplements, particularly during the mothers'/women's critical period of child bearing (age) or during pregnancy and lactation period.
4. **Strengthen coordination of nutrition response** through promotion of the nutrition sector group objectives at national and sub-national level to promote agreed response strategies, facilitate coverage/gap analysis, advocacy for resources, mobilise partners and facilitate partnership building, capacity building among partners and support nutrition response linkages with other sectoral response (at least with health, water and sanitation and food security)
5. **Capacity strengthening on nutrition for the Nutrition sector stakeholders** focusing mainly on basic nutrition screening for acute malnutrition, promotion of IYCF, preventing and treating micronutrient deficiencies and management of severe and moderate malnutrition. Capacity strengthening will be done through formal training, technical briefing, sharing of technical documents and standard protocols, among other activities.

SHARP STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Nutrition Objective 1

Facilitate and prioritize nutrition situation analysis using standard tools and screening for the most vulnerable groups, children and women in need of nutritional support.

Activity ^{50 51}	Indicator	Target ^{52 53 54}
Stakeholders undertake (jointly or individually) rapid assessment or nutrition survey using standard methodologies	Protocols for Survey / rapid assessment for Nutrition Sector developed	One nutrition survey conducted by December 2014 using the standard methodology
Standardize nutrition programme reporting formats including CMAM & IYCF and monitoring checklists for inclusion in Nutrition information system	Standardized reporting formats	Standardized reporting formats available by end March 2014
	Nutrition Information System established	NIS established by end of July 2014
Generate trends analysis for nutrition screening	Trend analysis reports available	Quarterly trend analysis reports available
Generate maps or matrices showing vulnerable hotspots areas, based on admission into SAM/MAM treatment/food security/health/WASH data, for response prioritization.	Vulnerability analysis (matrix/map)	Quarterly Nutrition Programme maps with gaps identified

Nutrition Objective 2

Facilitate identification and treatment of cases of acute malnutrition using internationally approved guidelines and treatment products

Activity	Indicator	Target
Establish mechanism and community level network facilitating screening/identification and referral of severely and moderately malnourished cases for treatment	Number of children under 5 and Pregnant and Lactating women screened in the community and number of malnourished children and PLWs referred to the clinic	400,000 Children under 5 will be screened for malnutrition using MUAC technique and an estimated 40,000 children will be referred to the OTP/SFP for treatment of SAM (8000) and MAM (30,000)
		150,000 PLWs women will be screened for malnutrition using MUAC
Facilitate establishment of treatment services and improve coverage for the treatment of	Number of functional OTP/SFP sites	50 Functional OTP/SFP sites in district level Polyclinics

⁵⁰ All activities have been discussed and agreed upon by the partners and reflect the agency planning for year 2014 by MoH, UNICEF, WFP and WHO

⁵¹ All efforts will be taken to expand nutrition activities across all governorates and till the district level

⁵² Targets are based on the recent data from OCHA and calculated on the GAM rate of 2009 Family Health Survey by the Government of Syria. (GAM = 9.3%, SAM = 2.3% and MAM = 7%)

⁵³ Incidence rate is not considered while an effort is being made to understand the type and the magnitude aggravating factors that could be negatively influencing nutrition.

⁵⁴ Fifty percent (50%) of the total caseload is being taken as target for the sector for 2014 considering the limited number and capacity of partners, access and funding

severely and moderately malnourished children and their follow up after discharge		
Support malnutrition diagnosis and treatment in the health facilities services and OTP/SFP clinics ensuring adequate supplies provision	Number of children treated for SAM and MAM	8,000 children treated for severe acute malnutrition in OTPs 1,500 SAM Children treated for complications in SCs 30,000 children treated for Moderate acute malnutrition

SHARP STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/ stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.

Nutrition Objective 3

Facilitate prevention of undernutrition among crisis affected Syrians and other vulnerable groups in need of humanitarian assistance

Activity	Indicator	Target
Promotion of comprehensive appropriate infant and young child feeding (IYCF) through monitoring and controlling of widespread infant formula donations, training of counsellors and healthcare providers, undertaking social mobilization activities like breastfeeding campaign, use of media in awareness raising, IEC material, etc.	Number of health workers trained on IYCF	600 of health and community workers trained on IYCF by December 2014 (including 300 from Govt and 300 from national and international NGOs)
Addressing micronutrient deficiency among children and pregnant/lactating women through micronutrient supplementation under the healthcare network, supplementation during vaccination campaign, multiple micronutrients distribution with guidance on its use alongside food, targeted lipid-based nutrient supplements distribution, promotion of diverse diet distribution to highly vulnerable groups through targeted and general food distribution and promotion of fortified foods use.	Number of children(6-23m) who receive appropriate supplementary food	240,000 children reached with appropriate supplementary food
	Number of children received multiple micronutrients	150,000 children (6-59 months old)
	Number of PLWs received multiple micronutrients	150,000 PLWs
Promotion of optimal maternal nutrition through provision of (and advocacy for) adequate maternal healthcare, food security and micronutrient supplements taking advantage of linkage with health sector	Number of pregnant and lactating women receiving micronutrients and Iron folate for 6 months	150,000 pregnant & lactating women
	Number of women who receive a minimum nutrition package (sensitization on appropriate IYCF, health, multiple micronutrients etc)	150,000 P&L women receiving minimum nutrition package

SHARP STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms

Nutrition Objective 4

Enhance the operational capacity of Government, national and international organizations and support existing local and community actors to raise awareness regarding nutrition.

Activity	Indicator	Target
Capacity strengthening of frontline health and community workers in Nutrition in emergencies & CMAM & through training	Number of NIE, CMAM and trainings held	600 of health and community workers trained on NIE or CMAM by December 2014 (including 300 from Govt and 300 from national and international NGOs)
	Number of health staff and community workers trained in nutrition	
Development of National guidelines for the prevention and treatment of acute malnutrition	National Guidelines available for the prevention and treatment of acute malnutrition	National Guidelines for the treatment of SAM and MAM children under 5 and PLW developed and approved by December 2014

SHARP STRATEGIC OBJECTIVE 5: Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

Nutrition Objective 5

Promote responses and practices that enhance optimal nutrition well-being through integrated response, behaviour changing efforts, response coordination strengthening, etc.

Activity	Indicator	Target
Share programme information (on-going/planned) for 3W matrix and mapping (coverage analysis) including social mobilization undertakings to promote nutrition.	Matrix on 3Ws with clear geographic response gaps	3W matrix on who is doing what where developed and updated on quarterly basis
Promote common sector strategies (e.g. convergence of nutrition specific and nutrition sensitive responses)	Intersectoral linkages established with different sectors	Monthly meetings facilitating exchange of strategies and sector programme information
Emergency preparedness and contingency plans for critical areas developed, including contingency stock prepositioning	All hubs to have EPRP and contingency stocks	All hubs to have EPRP in place with contingency stocks

Sector Monitoring Plan

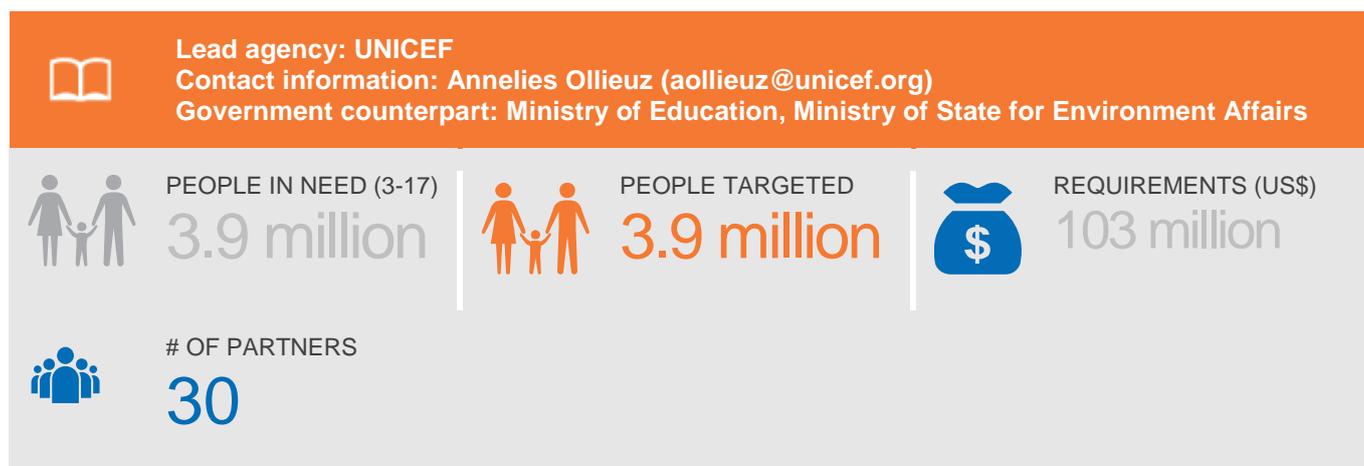
Monitoring of the nutrition response activities will be further improved by following;

- Regular monitoring by MoH, UN and implementing partners in all implementing geographical areas
- Analysis of data and reports received from the implementing partners. The reports will be on quarterly basis while data will be on fortnightly basis
- Regular update of 3Ws and 4Ws on monthly basis. Together with analysis of achievements verses targets for all nutrition interventions
- Regular sector coordination meeting with all partners on fortnightly basis, at least once a month
- Use of standardized check list for each component of nutrition intervention and analysis & database of monitoring reports

Projects

Government bodies	Ministry of Health
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Emergency Life-saving Nutrition Services for crisis affected Internally Displaced population in all governorates inside Syria
Objective	<p>To Strengthen coordination of nutrition response through promotion of the nutrition sector group objectives (to promote agreed response strategies, facilitate coverage/gap analysis, advocacy for resources, mobilise partners and facilitate partnership building) and support nutrition response linkages with other sectoral response especially with health, WASH and food security</p> <ul style="list-style-type: none"> To provide screening and treatment services for children less than five years of age, pregnant and lactating women suffering from severe and moderate acute malnutrition through community and facility based nutritional management approach. To prevent malnutrition in early childhood through promotion of improved infant and young child feeding, care giving practices, and care seeking practices and stimulation at the facility, family and community level. To prevent micro-nutrient deficiencies in children and women through provision of multiple micronutrient supplements, Vitamin A, deworming and promotion of appropriate feeding practices. To strengthen local technical capacity and provide appropriate resources to initiate integration of CMAM into Primary Healthcare.
Beneficiaries	Total: 900,000 under five male & female children, pregnant and lactating women Children: 500,000 Women: 300,000
Participants	MoH and IPs TBD
Budget (\$)	\$15,200,000
Government bodies	Ministry of Health
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Reduce excess morbidity and mortality due to malnutrition
Objective	<ul style="list-style-type: none"> - To manage severe acute malnutrition, with complications. - To monitor trends of GAM (SAM and MAM) among the affected population to respond in a coordinated manner to the emerging needs of population at risk, especially pregnant lactating women and children under 5 years.
Beneficiaries	Total: 40,502 Male and female children with severe acute malnutrition Children: 10,017 Women: 10,017
Participants	MOH, NGOs SARC, society of paediatrics
Budget (\$)	\$1,658,500
Government bodies	Ministry of Health
Appealing Agency	WORLD FOOD PROGRAMME (WFP)
Project title	Reduce excess morbidity and mortality due to malnutrition
Objective	Addressing the critical nutrition needs of young children and pregnant and lactating women in crisis-affected areas of Syria
Beneficiaries	Total: 255,000 This project will target 240,000 children aged 6-23 months at risk of malnutrition, and 15,000 vulnerable displaced pregnant and lactating women Children: 240,000 Women: 15,000
Participants	Ministry of Health and NGOs to be confirmed
Budget (\$)	\$13,141,320

EDUCATION



Sector Strategy

1.1 million boys and girls are out of school in Syria. An additional 1.26 million are enrolled but do not attend or attend only irregularly. The issue of access to education is therefore the paramount education concern. The overarching aim of the education sector response for 2014 including the Ministry of Education will be to ensure the continuation of education for those children in school and to facilitate the return to education for those who have dropped out.

Also the education of Palestine refugee children has been severely affected by the crisis. 76 out of 118 UNRWA schools are closed due to damage or insecurity or because they are used as shelter. A further eight are hosting displaced people but also operate as schools. The Ministry of Education has agreed for UNRWA to use 36 governmental schools in the afternoon. Despite this increase in capacity, over 20,000 Palestine refugee children remain without access to school education.

This appeal for funds for the education sector, however, does not reflect the full extent of the education needs across the country. This is demonstrated by *A Lost Generation? A Strategy for Children Affected by the Syria Crisis* (October 2013), which puts the education requirements for Syria at 240 million USD. But even this is an underestimation: According to the Ministry of Education, the total loss in terms of education infrastructure alone is more than 556 million USD (3 November 2013). Owing to the small number of partners, operational constraints, and limited education in emergencies experience, the education sector does not have the capacity to address all of the needs. This plan, therefore, focuses on what realistically can be implemented in 2014. The increase in budget compared to the 2013 SHARP can be explained by an increase in the needs, in partners submitting projects, in the availability of implementing partners in the governorates, and by a change in the nature of the activities included in the 2014 projects, which focus on school infrastructure.

Because of the mentioned limitations, the sector will continue to strengthen the capacity of government, international and national partners. This will include a training of trainers, who will then roll out an education in emergencies training across the country (Strategic Objectives 4 and 5). The consolidation of the Education Sector Working Group in Damascus, and the introduction of sub-national sector coordination will strengthen the education response on the ground. In addition, the sector aims to advocate for bringing in additional partners with strong education in emergencies experience to work in Syria.

To ensure that the most pressing needs are addressed, the education sector will prioritise (1) Areas with high numbers of children who are not enrolled, and (2) Areas with a high concentration of IDPs. This prioritisation is based on a comparison of Ministry of Education enrolment data for the school years 2011–2012 and 2012–2013. To fill the gaps and to further ensure that the response is evidence based, the sector will support the development of the Ministry of Education’s information management capacity, both at national and governorate level. To the same aim, and for advocacy purposes, the sector is also planning to conduct education assessments. With the aim of reaching all children in Syria, education partners will scale up particularly in those areas where the Ministry of Education has limited reach, both in terms of assessments and interventions. For all activities targeting IDP children, it is essential to support both IDPs and host communities, so that interventions contribute to avoiding tensions between both groups, and to strengthening solidarity ties and a sense of community. The *A Lost*

Generation? strategy proposes to develop this common understanding among Syrian children and youth through messaging and tolerance initiatives across the region.

Enrolment data for the school-year 2012-2013 does not show any substantial differences between boys and girls. If this proves to be different for the current school year – data is not yet available – or should attendance rates show increased gender differences in certain areas, the education sector will adapt its interventions to address this, for example through the use of vouchers to support access to education for girls. The sector will make an active effort to collect sex-disaggregated enrolment and attendance data.

Considering that between 4,100 and 4,500 schools are currently out of service because they are damaged or destroyed, used as IDP shelter or not reachable by the MoE (Ministry of Education, October 2013), a first step towards ensuring the continuation of education for those children in school and facilitating the return to education for those who have dropped out will be to support education provision by rehabilitating existing learning spaces, and establishing temporary learning spaces (Strategic Objective 3). Additional learning spaces will not only provisionally replace destroyed schools but will also accommodate the large numbers of IDP students in certain districts. Rehabilitated and additional learning spaces will be equipped with school benches, textbooks, teaching and learning materials, and water and sanitation facilities. In situations where children are not able to go to school, for example because they or their parents do not consider it safe, other delivery means will be explored to ensure their right to education is protected. This will include the introduction of a self-learning programme, which will allow children to continue learning, also if they do not have access to a teacher, with the help of materials in line with the curriculum but adapted to that particular context (Strategic Objective 2).

Many children have lost out on so much school time, however, that they are not able to follow in class without additional support. Therefore, the education sector will provide accelerated learning programmes that will allow children to catch up to their peers, and remedial classes for children to keep up with their education. These programmes will be provided both in formal and informal education settings, to ensure that also the most vulnerable children are reached.

While most sector interventions focus on children of basic education age (grade 1-9), also the needs of both kindergarten and adolescent boys and girls must be addressed. According to the Ministry of Education, the enrolment rate in kindergarten has dropped from 12 per cent in 2010 to 5 per cent in 2012. These young children are in need of psychosocial support through the training of kindergarten teachers and caregivers. In addition, WFP programme monitoring findings suggest that many households have been forced to reduce their food intake and limit dietary diversity. Considering the potential negative impact of poor food consumption particularly on the formative years of childhood, the education sector plans to initiate a school feeding programme in both kindergarten and basic education, in addition to exploring a closer cooperation with the nutrition sector (Strategic Objective 2). Education partners will also continue to support life skills and formal and non-formal vocational training. The provision of education related to livelihoods and employment is particularly important in the current situation, when many adolescents and youth risk dropping out of school because of the limited availability of higher secondary education, because they have to work to support their families, or – for girls – because of limited mobility (Strategic Objective 3). Working adolescents and youth are particularly vulnerable to exploitation in the labour market. Life skills training contributes to increased self-esteem and peer support, and strengthens positive coping strategies, vital qualities in today's context.

It is the objective of the education sector to provide education activities in a safe and protective environment. Today, quite a number of learning environments in Syria do not provide learners, teachers and other education personnel with protection from threat, danger, injury and loss. Education partners will strive towards making learning environments as safe and protective as possible, for example by providing risk education, evacuation drills etc. If these mitigating measures are still not sufficient, other alternatives will be selected, for example the use of self-learning materials when the school area is volatile.

Attending school creates a sense of normality and routine for children, which is crucial to the healing process necessary to come to terms with crisis and displacement. In addition, across all efforts that focus on formal and non-formal education delivery, psychosocial support will be mainstreamed. For quality assurance purposes, these interventions will be standardised, coordinated, and reported on by the child protection sub-sector, in close cooperation with the education sector. In addition, supported by the protection sector, the education sector will prepare a checklist for the mainstreaming of protection in education.

Achieving these aims will require a three-pronged approach:

- (1) Expanding partnerships with civil society, community organisations and the Syrian Arab Red Crescent;
- (2) Capacity building of communities to increase the participation of boys and girls, mothers and fathers, caregivers and the wider community; and

- (3) Robust advocacy for access to education across the country, including stressing the importance of schools as safe havens for today and guarantors of progress for the future.

Sector activities

The provision of learning spaces and alternative education modalities constitute the sector's main priorities for 2014.

Key activities include:

Access and Learning Environment

- Rehabilitation of schools and construction of temporary learning spaces, including water and sanitation facilities, with the support of the WASH sector
- Provision of school benches for classrooms
- Development and provision of self-learning programmes, including printing materials
- Provision of remedial classes, including through school clubs
- Provision of accelerated learning programmes and printing of curriculum (using the so-called Curriculum B)
- Provision of teaching and learning materials
- Vocational training and life skills education targeting youth
- Early Childhood Development interventions
- Teacher training on aspects of quality education
- Advocacy for access to education (schools as safe havens, girls' education, etc.)

Governance, coordination and capacity strengthening

- Information management support to the Ministry of Education at national and governorate level
- Introduction of an SMS data collection system for the Ministry of Education
- Capacity development of government, international and national partners in education in emergencies
- Community mobilisation to support increased school enrolment and retention

Addressing vulnerabilities

- School feeding, in cooperation with the nutrition, and food and agriculture sectors
- Hygiene education in schools, in cooperation with the WASH sector
- Winterisation through rehabilitation and in-school activities
- Educational support to vulnerable children through vouchers and community mobilisation, including to girls where a gender disparity exists
- All education interventions will incorporate psycho-social support including training for partners and education personnel, especially teachers, in cooperation with the child protection sub-sector

STRATEGIC OBJECTIVE 1: Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law.

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Sector objective 2A:

Provide access to education through alternative delivery means to ensure children's right to education

Activity	Locations	Indicator	Target
Roll out self-learning programme	National	# children using the self-learning	1,020,000

materials (hard copies and online)

Sector objective 2B:

Support boys and girls so they can remain or re-integrate in formal education

Activity	Locations	Indicator	Target
Provide remedial education and accelerated learning programmes	National	# children attending remedial classes or accelerated learning programmes	365,000
Provide out of school children with the accelerated learning curriculum	National	# education personnel trained in accelerated learning	100
		# children who have received accelerated learning textbooks	1,000,000
Advocacy for access to education	National	# advocacy initiatives	10 initiatives
Provide children with the (regular) curriculum	National	# children who have received school textbooks (regular curriculum)	3,000,000
Teacher training on quality education	National	# teachers trained on quality education	3,300
Provide children in basic education and kindergarten with school supplies	National	# children who have received school supplies	1,163,500
School feeding	Aleppo, Al-Hassakeh, Rural Damascus, Tartous, in addition to the Palestine refugees	# children provided with a daily snack or meal at school	395,000

STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/ stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.

Sector objective 3A:

Ensure the availability of learning spaces where schools are destroyed and in communities that are hosting many displaced students

Activity	Locations	Indicator	Target
Rehabilitate schools	National	# of schools rehabilitated and equipped	600
Construct temporary learning spaces	National	# of temporary learning spaces constructed	440

Sector objective 3B:

Provide vocational learning and life skills training for adolescent girls and boys

Activity	Locations	Indicator	Target
Provide formal and non-formal vocational learning and life skills training for adolescent girls and boys	National	# adolescents enrolled in vocational learning or life skills training	32,000
Train national organisations to be able to provide vocational learning	National	# national organisations trained	24

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Sector objective 4A:

Increase the capacity of the education sector to provide a quality response to the crisis

Activity	Locations	Indicator	Target
Train trainers in education in emergencies	National	# of trainers trained	50

Projects

Government bodies	Ministry of Education
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Promoting equitable access to quality education for vulnerable children and adolescents affected by the crisis, especially those internally displaced and/or out of school in Syria.
Objective	<p>The overall goal of the UNICEF education emergency response is to achieve the improved equitable access to quality education for all the children and adolescents affected by the crisis in Syria. To meet the goal, the interventions are designed to strengthen a cross sectoral approach in cooperation with Child Protection and WASH, and set the following specific objectives to achieve:</p> <ul style="list-style-type: none"> • By the end of 2014, 3,900,000 vulnerable boys and girls who are internally displaced and/or out of school have equitable access to quality learning opportunities through formal and non-formal education. • By the end of 2014, boys and girls in 500 schools have access to safe, protective learning environment equipped with gender-sensitive sanitation facilities. • Throughout 2014, 3,000 trained school teachers and counsellors provide psychosocial support and recreational activities for children and adolescents in the governorates affected by the crisis and displacement. • 1,000,000 children and 30,000 adolescents who are internally displaced and/or out of school – especially girls and adolescent girls – have access to alternative, non-formal education opportunities by the end of 2014 including self-learning, scholarship, peace building for crisis resolution, and vocational and life skills training for youth empowerment.
Beneficiaries	Total: 3,946,000 (The breakdown: 2.9 million in-school children; 1 million out-of-school children; 46,000 teachers, tutors and parents - minimum 50% female) Children: 3,900,000 Women: 23,000
Participants	Ministry of Education, UNRWA, WFP, ACF, Aga Khan Foundation, DRC, PU, SARC Rastan & Talbiseh, SIF, IECD, EIEA, Participating Local NGOs
Budget (\$)	\$80,572,134
Government bodies	Ministry of Education
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Expanding educational and psychosocial support in an integrated manner to accommodate the rising needs of displaced children in Syria and the stability of Ministry of Education institutions
Objective	<ul style="list-style-type: none"> - Promote access to formal education for girls and boys - Reduce the impact of drop out from schools, particularly for girls - Enhance schools' physical environment - Capacity building of teachers in Quality Education, PSS, Child Protection, GBV etc - Improve the safety awareness of children and teachers within schools
Beneficiaries	Total: 18,000 teachers and school children (close to 50 % are expected to be IDPs) Children: 17,500 Other group: 500 teachers that are part of capacity building activities
Participants	MoE for all educational and rehabilitation activities, SARC for the proposed safety awareness activities
Budget (\$)	\$1,600,000

Government bodies	Ministry of Education
Appealing Agency	ACF - SPAIN (ACF - SPAIN)
Project title	Support access to education through the rehabilitation of school infrastructure
Objective	To ensure access to education in safe learning environments in affected areas
Beneficiaries	Total: 14,000 (Approximately 14,000 students in 15 schools, an estimated 52% boys and 48% girls)
Participants	Ministry of Education, under MoU to be agreed
Budget (\$)	\$1,066,570
Government bodies	Ministry of Education
Appealing Agency	PREMIERE URGENGE (PU)
Project title	Maintaining/resuming primary, secondary and vocational education in Syria
Objective	To support crisis-affected students and schoolchildren in Syria
Beneficiaries	Total: 8,700 crisis-affected schoolchildren and students in Syria Children: 8,550 Women: 150
Participants	Ministry of Education
Budget (\$)	\$1,855,380
Government bodies	Ministry of Education
Appealing Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Project title	Provision of support to access to education through the rehabilitation of school infrastructure
Objective	Promote access to education through the rehabilitation of schools that were damaged in areas with low enrolment and/or high numbers of IDP students.
Beneficiaries	Total: 15,000 (7500 girls and 7500 boys) Children: 15,000
Participants	Ministry of Education, PU, DRC, SSSD
Budget (\$)	\$1,730,559
Government bodies	Ministry of Education
Appealing Agency	WORLD FOOD PROGRAMME (WFP)
Project title	Supporting a return to learning for crisis-affected children in Syria through school feeding
Objective	This project seeks to contribute to the overarching goal of the Education Sector response to the crisis, by improving regular access to safe education while increasing children's intake of micronutrients essential for their physical and cognitive development.
Beneficiaries	Total: 350,000 (pre-primary and primary schoolchildren) Children: 350,000
Participants	Ministry of Education and NGO partners to be confirmed
Budget (\$)	\$6,512,829
Government bodies	Ministry of Education
Appealing Agency	ADVENTIST DEVELOPMENT AND RELIEF AGENCY (ADRA)
Project title	Strengthened Access to Quality Education for Syrian Children
Objective	Provide a safe, protective and gender-sensitive learning environment to crisis-affected children to enable school-age girls and boys to return to school or continue studying in schools in secure areas
Beneficiaries	Total: 12,500 (12,000 school-age children, 50% boys and 50% girls, and 500 school/Ministry of Education staff) Children: 12,000 Other group: 500 MoE staff, including 400 teaching staff and 100 school management/MoE staff, with at least 50% women
Participants	Ministry of Education
Budget (\$)	\$2,073,500

Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Emergency education services for up to 67,000 Palestine refugee children
Objective	Basic education needs of up to 67,000 Palestine refugee children from grades 1-9 are met through a combination of school and distance learning activities
Beneficiaries	Total: 67,000 Palestine refugees, 33,500 girls and 33,500 boys Children: 67,000
Participants	GAPAR
Budget (\$)	\$2,220,000
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	School feeding for 45,000 vulnerable Palestine refugee children
Objective	Improved nutritional health for 45,000 vulnerable Palestine refugee children attending UNRWA schools
Beneficiaries	Total: 45,000 Palestine refugees: 22,500 girls and 22,500 boys Children: 45,000
Participants	GAPAR
Budget (\$)	\$3,596,400
Government bodies	Ministry of Education
Appealing Agency	TERRE DES HOMMES - ITALY (TDH - IT)
Project title	Supporting access to quality education for displaced children and children in host communities
Objective	Supporting access to quality education through the provision of school benches, learning materials and training of teachers in psycho-social support.
Beneficiaries	Total: 4,650 (4,500 school children and 150 teachers) Children: 4,500 Other group: 150 school teachers
Participants	Ministry of Education
Budget (\$)	\$535,963
Government bodies	Ministry of Education
Appealing Agency	UNITED NATIONS EDUCATIONAL, SCIENTIFIC AND CULTURAL ORGANIZATION (UNESCO)
Project title	Provision of remedial education and psycho-social support to Syrian children and youth
Objective	Provide educational personnel with knowledge, skills and effective tools to address education in emergencies in Syria: - Develop the capacity of national stakeholders in the provision of accelerated learning programmes and education in emergencies (INEE) - Train teachers and other educational personnel in the provision of extra-curricular activities and psycho-social support to children/youth affected by the crisis, incorporating life skills and psycho-social support in teaching and learning activities - Build the capacity of teachers and other educational personnel to provide technical and vocational training to youth
Beneficiaries	Total: 12,000 children and youth, MoE staff, principals, teachers, other education personnel and social animators Children: 11,500 Women: 250 Other group: 500 national officials, stakeholders and teachers, and 100 social animators
Participants	Ministry of Education and education sector partners including national NGOs
Budget (\$)	\$950,000

Government bodies	Ministry of Education
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Strengthening Education Sector Coordination
Objective	To ensure effective education preparedness and emergency response through well informed, collective and coordinated interventions
Beneficiaries	All children and teachers in Syria
Participants	Ministry of Education and education sector partners including national NGOs
Budget (\$)	\$450,000

LOGISTICS



Note: The Logistics Cluster, as a Support Cluster, fills logistics gaps in emergencies on behalf of the humanitarian community, whilst also providing a platform for coordination and sharing of key logistics information among partners. As such, it does not have direct beneficiaries. For the Syria Emergency, WFP, under its mandate as the lead agency for the Logistics Cluster, provides the following common services for the humanitarian community: Relief cargo transport within Syria, cargo transport from Lebanon and Jordan into Syria, and common warehousing in Syria and Jordan. Additional activities for 2014 are detailed further below in the Response Plan.

Needs & Cluster Strategy

Logistics needs inside Syria are continuously changing due to the fluidity of the security and access situation on the ground, requiring a high degree of flexibility in planning. The on-going crisis has had significant repercussions on access via routes from neighbouring countries into Syria. Border crossings, road access, and port entry points are among the most frequently affected. Fuel prices (both benzene and diesel) have also faced substantial rate fluctuations, with current prices significantly higher than those at the beginning of the year. Road accessibility is sporadic and can change on a daily basis. As such, operational planning, including transport and storage, reflects the evolving environment, going into 2014.

The Logistics Cluster will continue its Coordination, Information Management, and provision of Common Services by WFP as a provider of last resort (land transport, humanitarian convoys, and storage). In addition, new components are planned – Airlift of cargo (as an emergency measure) for areas not reachable by road; and the construction of a UN Inter-Agency Hub in Tartous.

Regarding the five overall Strategic Objectives for the Syria Response in 2014, the majority of the Cluster's activities for 2014 fall under Strategic Objective 2, related to support of aid delivery. One activity, WFP's construction of the UN Hub in Tartous, is under Strategic Objective No. 4, specifically to enhance the operational capacity of national and international humanitarian responders. The final activity, maintaining a WFP fuel depot in Syria as a contingency, falls under Strategic Objective 5, related to preparedness.

General

In the latter part of 2013, access has been severely limited for north-eastern parts of Syria, especially to the governorates of Raqqa, Hassakeh, and Deir ez Zour. Areas in Rural Damascus such as Ghouta and Moudamiyeh also continue to face challenges in access. For these two locations, delivery has been hindered in many cases for a protracted period of time, despite several attempts to access these areas.

Providing predictable and secure warehousing options in Syria has required constant contingency planning. To cover the needs of partner organizations' programmes in-country, at present the Cluster, via WFP, has established two primary storage hubs (Safita, and Rural Damascus) where humanitarian cargo is stored for partners, and dispatched to locations across the country.

The months of October and November 2013 have seen increasing needs inside Syria, and with high numbers of service requests received for Convoys by from partners, the Logistics Cluster has supported an increasing number of Joint Humanitarian Convoys to several locations inside Syria during these months.

Due to the current difficulty in finding a suitable and secure office space for UN employees, the UN Humanitarian Country Team (UNHCT) has made a decision to build a UN inter-agency Hub in Tartous (as mentioned above). This common office will accommodate between 120 and 150 staff (both national and international). To meet this need of the humanitarian community, as per the decision of the UNHCT, WFP will lead the construction and set-up of the compound.

Syria Access - Ports

The main points of entry by sea to Syria are the Ports of Tartous and Lattakia located in the northwest part of the country. Overall, Tartous Port has been the principal port of entry for WFP. Due to the crisis, there are less international liners now calling Tartous, and the international port management company originally managing the port departed at the end of 2012 due to insecurity. As a result, while port operations have continued in 2013 under the new local management, issues such as malfunctioning X-Ray scanners at the Port have occasionally hampered the pipeline flow, creating congestion, and contributing to WFP's decision to also increase the pipeline to Beirut Port as a sea corridor for its supplies. Organizations such as UNICEF and UNRWA however, continue to use Lattakia Port (closer to their suppliers in Turkey, resulting in lower costs, and more suited to their programmes and target locations). Given its central location, the port is logistically viable as a staging area to reach locations in both northern and central Syria. In addition, the Cluster/WFP's Safita Hub (situated just 30 km from Tartous) has sufficient storage capacity to support operations.

Lebanon Access – Ports and Roads

The utilization of Lebanon's Beirut Port has gradually increased for both commercial and humanitarian cargo pipelines, presently bearing a large share of the burden in terms of imports by sea for Syria, and is expected to continue into 2014. The Port Authority is expanding its Container Terminal in line with the expected increase in cargo. In addition, new rules have been implemented and trucks are now allowed to transport cargo at night (previously banned), so as to minimize congestion and help to facilitate the increase in the pipeline.

Al Masnaa Border Crossing (eastern part of Lebanon) has been the most regular and consistent border crossing point from Lebanon into Syria for the operation so far. The Al Arida Border Crossing (northern Lebanon) has faced occasional closures, mostly due to security issues on the International Highway (leading to Tripoli and onwards to the border). Road closures have taken place at Tripoli, Baddawi, and Akkar, mostly due to local protests. In general, the closures remain for no more than 2-3 days and have not significantly hampered the humanitarian operation. However, if the situation in Syria continues to deteriorate with heightened crisis at the border areas, possible spill-over into Lebanon could result in some border crossings closing (especially in the north – Al Arida and Abboudiyeh), creating challenges for transport from Lebanon into Syria.

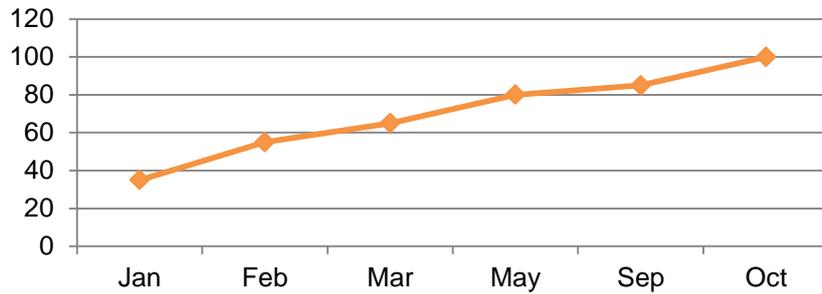
Jordan – Roads/Ports

In a situation where the Lebanon corridor faces access constraints, the attention could shift to the Jordan Corridor to Syria as a contingency. This corridor has faced issues in the past, due to sporadic opening/closure of the main 'Jaber/Naseeb' border crossing, and lower cost-efficiency organizations such as WFP. However, UNHCR and UNICEF regularly use this crossing for movement of humanitarian cargo into Syria at present, with some challenges faced in customs clearance for pharmaceutical products. Looking ahead, transporters in Jordan have been identified by WFP, and have been successfully used to transport cargo into Syria when required, border access permitting. Moving forward into 2014, these transport companies remain ready to scale up via this corridor if needed. The transporter roster developed by WFP provides Logistics Cluster participants with options should the need arise. Aqaba Port is stable, and currently faces no congestion. It is not widely used by the humanitarian community for this emergency, but could be utilized further as an alternate Port to Beirut/Tartous if access via the other routes/corridors deteriorates in 2014.

Fuel

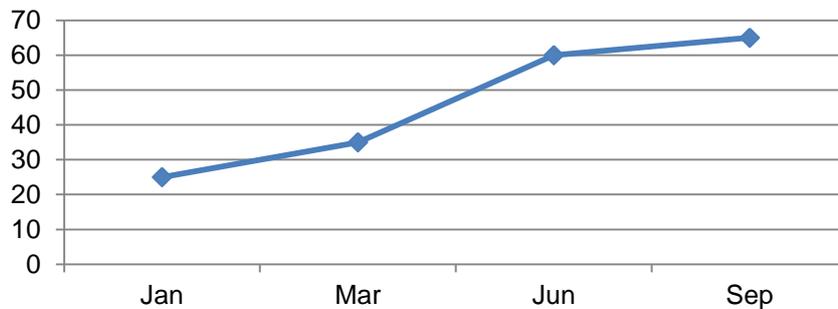
Fuel prices have been rising rapidly in the country since the beginning of the year. Currently, the official prices for fuel in Damascus are as follows: Benzene is available at 100 Syrian Pounds (SYP)/liter, and Diesel is 62 SYP/liter. In **Damascus, the official fuel price for benzene** has risen as follows, from January to October 2013: (35 – 55 – 65 – 80 – **85** – 100 SYP). Overall, the above analysis reflects a 185% increase in the official price of Benzene from January to October.

Benzene - Official Prices in 2013 (SYP)



For Diesel, the official price is 62 SYP as of end-October 2013 (the trajectory has been 25-35-60-62 from January to October 2013). In the case of diesel, the percentage increase since the beginning of the year is 148%.

Diesel - Official Prices in 2013 (SYP)



Cross-cutting issues (Environment and Gender)

The proposed construction of a UN Hub in Tartous by WFP for the humanitarian community is designed as an environmentally-friendly project, with only pre-fabricated office and residential units, which can be easily dismantled when they are no longer required. Solar panels will also be installed for energy efficiency at the compound.

In 2014, the Logistics Cluster will continue the storage and transport of gender-focused relief items such as Female Health and Hygiene Kits for UNFPA, UNRWA, and UNICEF in support of their gender programmes in Syria. For all its contracts with transporters and storage providers, the Logistics Cluster/WFP includes a specific clause on Sexual Exploitation and Abuse (SEA).

Cluster Response Activities

For 2014, the Syria Logistics Cluster is continuing its common transport and storage services inside Syria, and has increased its focus on Joint Humanitarian Convoys from Safita to areas in the north and north-east of the country.

The core of the Cluster's strategy falls under the below objective:

Cluster Objective 1a:

To provide logistics services inclusive of surface transportation and warehousing to humanitarian organizations responding to the Syria crisis.

The majority of these common services fall under Strategic Objective 2 for Syria ('increase the provision of life-saving emergency assistance and support the delivery of essential services for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items').

Common Transport and Storage

To improve inter-agency logistics coordination, the Logistics Cluster, led by WFP, provides free-to-user services including cargo transportation and storage, to humanitarian organizations responding to the emergency in Syria. This common transport service is offered inside Syria, and from Jordan/Lebanon to Syria. So far, under its inter-agency mandate, WFP has transported relief items to each of Syria's 14 governorates, and will continue to do so in 2014. The number of organizations utilizing common transport services has increased rapidly. Initially common services were being used by 8 organizations in 2012 (under the Logistics Sector). After the recommendation of the Regional Humanitarian Coordinator (RHC), the Logistics Cluster was activated in January 2013, and expanded its common transport service to include transport from the Jordan/Lebanon corridors to Syria. Capacity for inland transport in Syria was also expanded, and the number of organizations using common services increased to 12 by mid-2013. As of November 2013, the number of humanitarian partners utilizing the Cluster's common logistics services has increased to 16, double the original number in 2012. This has resulted in higher numbers of Service Requests received by the Cluster (over 300 so far in 2013), and this is expected to increase further in 2014, with higher needs in Syria, and the potential arrival of new humanitarian organizations in the country.

Common storage is provided in two main hubs (Safita and Rural Damascus) and also regionally in Irbid (Jordan) upon request. The Safita Hub consists of 5 Mobile Storage Units dedicated to storing relief commodities for partners. This includes 4 MSUs of 320 m² capacity each, and 1 MSU of 240 m², for a total capacity of 1,520 m² storage space. This is being expanded further, by setting up 5 additional MSUs of 240 m² each, ensuring a total capacity of 2720 m² in 2014 (with further expansion possible if needed).

In Rural Damascus, the Cluster has relocated common storage from a warehouse in Kisweh to a new location in Sahnaya. The new warehouse has a total capacity of 6,300 m² and is currently approximately X% utilized by participants for storage of their relief items.

In Jordan, the WFP warehouse in Irbid has a total capacity of 3,600 m². The Logistics Cluster continues to offer space for partners' relief items in this warehouse if required.

As a contingency for 2014, the Cluster has implemented measures and budgeted for: emergency cargo airlifts to difficult-to-access areas. This would be used as a last resort, with the final decision/priority made by a steering committee composed of Cluster participants. One emergency airlift of essential items was completed in end-August 2013 to Al-Hassakeh on behalf of several humanitarian organizations, due to a long period of inaccessibility in the area.

Since its activation in January 2013, the Logistics Cluster has handled (i.e. transported and stored) over 45,000 m³ of Food and Non-Food Items on behalf of 16 organizations to support the Syria humanitarian response (ACF, AKF, DRC, FAO, IMC, IOM, Mercy Corps, Premiere Urgence, Secours Islamique France, UNDP, UNFPA, UNHCR, UNICEF, UNRWA, WFP, and WHO).

Joint Humanitarian Convoys

The Logistics Cluster also supports Joint Humanitarian Convoys to difficult-to-reach areas in Syria, with locations prioritized by the Inter-Sector Coordination Group in Damascus. The implementation and continued support of these Convoys has proved vital to the humanitarian response, as it allows for the collective safe transport of life-saving cargo to areas previously not reached with humanitarian assistance due to violence. Convoys are the result of preparation between UNOCHA, the Logistics Cluster, the humanitarian community, and the Syrian Arab Red Crescent (SARC).

The main objective of the convoys has been, via the collective transport of relief items on behalf of several organizations, to reach the most vulnerable populations in the country and build trust among local communities. Overall, this has been a successful activity, and coordination between the Cluster, OCHA, SARC, and relevant line ministries is working fairly smoothly at present. The main challenges faced are security constraints, with sporadic access to some locations (especially in the north-east of the country).

The Logistics Cluster is increasingly using Safita (close to Tartous) as an origin point for upcoming Joint Humanitarian Convoys to locations in northern and central Syria. This is due to several factors – larger capacity trucks are allowed to operate outside Damascus, quicker administrative procedures, and the Cluster's augmented storage space in Safita allows for increased storage of participants' relief items for onward transport.

Logistically, sending convoys from Safita is ideal as distances to nearby governorates are shorter than from Damascus. In order to scale up to meet needs, the Cluster/WFP has registered additional transport companies in Syria. The Cluster is in constant communication with each of the transport companies regarding future convoys, and trucks and drivers from each company remain on standby for transport to their respective planned locations.

The establishment of the UN Hub in Tartous, led by WFP, is another driving factor in using Safita as an important staging area for Convoys in the coming months.

Wherever possible, trucks have been escorted by UN vehicles and personnel, facilitating access. The presence of escorts has limited, if not prevented, diversions and losses, while crossing check-points and front-lines. The presence of UN staff has also allowed for the monitoring of arrival of items to destinations, and an evaluation of the situation on the ground. By focusing on fewer, specific locations, and driving through checkpoints with a certain frequency, the Convoys have helped to build trust between UN personnel and state and armed groups, thus further enhancing access. However, regarding the main challenges, the cancellation and delays of convoys has affected planning and causes an increase in costs. It must also be recognized that the Convoys are not the main thrust of the response operation, and aim to bring focus to a specific area, leading to increased intervention by the humanitarian community once access is established.

For transparency and accountability, the Logistics Cluster has implemented an online cargo tracking system, the 'Relief Item Tracking Application' (RITA), which provides the latest information to partners/donors on all cargo handled.

The Cluster, via WFP, has transported large volumes of gender-focused items such as female hygiene and sanitary kits, on behalf of UNICEF, UNFPA, and UNRWA. The Cluster continues to prioritize the storage and transport of such items going into 2014, as they serve the most vulnerable populations inside Syria and also fulfil the humanitarian community's responsibility to support gender programmes in the response.

Cluster Objective 1b:

To improve inter-agency logistics coordination and information management to support the humanitarian community

Coordination and Information Management

The Logistics Cluster has established a logistics coordination forum in Damascus, Amman, and Beirut. Bi-monthly meetings are held in Damascus, as well as monthly meetings in Amman and Beirut. Over 30 organizations (UN agencies, INGOs, NGOs, and donor agencies) regularly attend the meetings, where participants discuss logistics bottlenecks and develop solutions for the humanitarian response.

The Logistics Cluster produces and shares Information Management (IM) products including maps, situation reports, fuel price analyses, infographics, customs information, and real-time flash logistics updates. To ensure a regular and coherent flow of information to all stakeholders, relevant information is available to the humanitarian community via a dedicated Syria Logistics Cluster webpage: www.logcluster.org/ops/syr12a

The Cluster will continue to provide updated logistics information products, focusing on continued port assessments, flash updates on regional border crossings, warehouse capacities in the region, and maps of key logistics infrastructure in 2014.

Cluster Objective 2a:

To provide an inter-agency UN Hub in Tartous

A major new activity for WFP, relevant to Strategic Objective 4 for Syria ("enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms") is the construction of an inter-agency UN Hub in Tartous. As per the decision of the United Nations Humanitarian Country Team (UNHCT) in Syria, WFP Logistics staff in Tartous will implement the project. So far, land has been identified, and the area has been cleared by the UNDSS Security Assessment Report. After final clearance from the UN Country Team (UNCT), construction will commence. The estimated completion time is three months from the start date of construction. Keeping in mind the required procurement of supplies, permits, and the approaching winter season, the target date for the completion of this Hub is May 2014.

For capacity building in 2013, the Cluster donated 20 trucks to the Syrian Arab Red Crescent. The trucks were handed over to SARC on 12 November. With the continuously deteriorating situation in Syria, which has severely limited the availability of commercial transporters, the donation of these trucks will enhance SARC's capacity and allow it to fill logistics gaps where transport by private companies is not possible. Each truck has a capacity of approximately 8 -10 metric tons of humanitarian cargo, and can be loaded by SARC in its own warehouses for direct dispatch and delivery of life-saving items to affected populations in the country. Spare parts have been also

provided by the Logistics Cluster for the long-term upkeep and maintenance of each separate vehicle, ensuring the continuity of future deliveries in 2014 and beyond.

Cluster Objective 3:

To maintain a contingency fuel reserve for operational needs

As a contingency for potential fuel shortages, WFP maintains a Fuel Depot in Kisweh, Rural Damascus. In the event of a fuel shortage in the country, fuel may be provided by WFP to the humanitarian community on a cost-recovery basis, if required.

In addition, the new Sahnaya warehouse in Rural Damascus, contracted by the Logistics Cluster/WFP also includes a Fuel Depot. An assessment is on-going to evaluate the need to operationalize this fuel depot. This would also allow the Cluster/WFP to have a contingency fuel stock in the event that the current depot in Kisweh becomes inaccessible.

The Logistics Cluster has consistently expanded its services since activation to serve increasing requests from the humanitarian community, and will continue to do so in 2014, in order to fill logistics gaps in the emergency and provide a robust and efficient mechanism for the delivery of life-saving aid in Syria.

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Cluster objective 1A:

To provide logistics services inclusive of surface transportation and warehousing to humanitarian organizations responding to the Syria crisis.

Top-priority activities:

Activities	Locations	Indicator	Target
Common transport from surrounding countries as well as from Logistics Cluster hubs inside Syria to final delivery points across Syria, on behalf of humanitarian partners	Priority locations in all 14 governorates, as per Service Requests	Number of organizations assisted	20
		Number of transport requests successfully fulfilled	120
Temporary storage in warehouses in Syria as well as regionally if required. Additional locations will be considered if needed and requested by partners	Safita, and Rural Damascus	Number of organizations assisted	20
		Number of storage requests successfully fulfilled	100
Joint Humanitarian Convoys supported	Priority locations in all 14 governorates, as per Service Requests and the decision of the Inter Sector Coordination Group in Damascus	Number of convoys per month	4

Cluster objective 1B:

To improve inter-agency logistics coordination and information management in order to support the humanitarian community

Top-priority activities:

Activities	Locations	Indicator	Target
Coordination and Information Management (IM: The Logistics Cluster will establish and maintain a platform for information sharing and coordination.	N/A	Number of Coordination Meetings held	18
		Number of IM products produced and shared on the Cluster website	50

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Cluster objective 2A:

Establish an Inter-Agency UN Hub in Tartous

Top-priority activities:

Activity	Locations	Indicator	Target
Construct an Inter-Agency UN Hub in Tartous for 120 – 150 staff members	Tartous, Syria	Completion of Tartous UN Hub	100% completion

STRATEGIC OBJECTIVE 5: Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

Cluster objective 3:

To maintain a contingency fuel reserve for operational needs

Top-priority activities:

Activities	Locations	Indicator	Target
Establish and maintain a WFP Fuel Depot in case of future fuel shortages in Syria	Kisweh, Rural Damascus	Stock of diesel available in case of fuel shortages	50,000 liters stock

Projects

Government bodies	Ministry of Local Administration, Ministry of Foreign Affairs & Expatriates
Appealing Agency	WORLD FOOD PROGRAMME (WFP)
Project title	Logistics Cluster Augmentation and Coordination to Support Humanitarian Operations in Syria
Objective	To provide a logistics coordination and information management platform and common services inclusive of surface transportation and warehousing to humanitarian organizations responding to the Syria crisis.
Beneficiaries	Humanitarian Community (UN Agencies/NGOs utilizing common services)
Participants	UN Agencies, INGOs and Local NGOs
Budget (\$)	\$12,060,910

SHELTER / NFIS SECTOR



Response strategy

Provision of emergency shelter assistance for IDPs

Shelter Sector agencies will continue to respond to the emergency shelter needs in 2014. The number of IDPs has increased steadily over the last year, including those displaced multiple times. IDPs who find themselves without place to stay, normally seek accommodation in collective/public shelters where they can easily access various forms of assistance. However, given the lack of adequate and dignified shelters, many people are pushed to live in congested alternative shelter/accommodation without access to adequate water sanitation. As of 19 November 2013, 938 official shelters hosts 188,379 IDPs representing 2.90 % of the entire IDP population in Syria. The rest resides among the host community, in private buildings, mostly unfinished, and make-shift shelters, in open with little protection from the elements of nature. Emergency shelter interventions are formed in the following activities: 1) rehabilitation of collective shelters; 2) provision of individual housing units; 3) private shelter upgrade project; and, 4) cash for shelters. Winterization measure shall be taken to prevent people from suffering from harsh winter weather. It should be noted that while the humanitarian community focuses on improvement of the shelter conditions, the government supports in rehabilitating and constructing infrastructure connected to the shelters such as electricity, and sewage system.

Rehabilitation work will continue in official (and on exceptional basis, unofficial) collective shelters in order to improve their physical condition of the buildings including water sanitation facility. Schools, hospitals and other public buildings comprise the majority of collective shelters. "Guidelines on Response to Transitional 'Collective' Shelters: Minimum standards of rehabilitation and essential criteria for the rehabilitation of existing buildings as short-term collective shelters hosting internally displaced families" (hereafter *Minimum Standards*) agreed at the Shelter Sector Working Group including MOLA, will guide the agencies to ensure the required facilities with set-standards shall be available in the Collective Shelters. Physical and social protection consideration is given to in *Minimum Standards*, accordingly, communal space for women and children, locks to the doors of private family space, toilet and bathrooms, as well as the lighting in private and the communal spaces including the corridors, toilet and bathroom shall be provided.

Construction of individual housing units with pre-cast concrete will aim to relieve the burden on public buildings, e.g. schools, which shelter IDPs and therefore are not able to continue their original functions. Due to the scarcity of housing options and limited absorption capacity to accommodate IDPs in existing damaged settlements the use of public buildings, in particular school buildings, was considered as a temporary measure to accommodate groups of homeless IDPs. This has led to the disruption and weakening of basic services, putting a strain on service delivery for IDPs as well as the affected population. In the meantime, the government announced its policy to vacate the school buildings in order to resume the regular school activities, and some evacuees needed to find their shelters, despite the government efforts to find alternative accommodation. It is recognized that a more systematic approach to vacate public buildings needs to be in place so that IDP families are relocated in dignity and safety to alternative and sustainable accommodations. To this end, MOLA is identifying plots of land suitable to undertake the construction of individual houses in Adra, Rural Damascus, and other areas, and will contribute its fund to construction of 1,000 housing units. The elderly, children, women headed families are given priority considering their specific vulnerabilities.

The Private Shelter Upgrade Project shall assist IDPs living outside the official collective shelters. Using sealing-off and WASH kits, this Project shall improve the physical conditions of private shelters mostly unfinished buildings and partially damaged houses. The open windows will be closed, doors will be fixed, and partitions will be built in

the open space to provide privacy to the families. The need for this intervention is expected to increase as the Government policy continues to be implemented to evacuate IDPs from school buildings. In 2013 agencies mostly employed skilled labourers to implement the projects. In 2014 while the same implementation modality will continue, agencies shall also seek self-help approaches in the provision of sealing-off and WASH kits and skills transfer where possible. Close cooperation is envisaged with WASH sector where the substantive work is required in improving Water Sanitation facilities. Targeted support will be provided for vulnerable groups such as the women-headed households, the elderly, and the people with disability

Cash for Shelter programme has been recognized as an important emergency shelter intervention. Financial assistance will be provided to complement other Shelter and NFI interventions. Beneficiaries will be empowered on how best to utilize this incentive. A Technical Working Group has been formed within Shelter Working Group in 2013 to explore various implementation modalities, which include cash for rent, and cash for work, and common approaches among the Sector agencies while ensuring that financial assistance aims to ease the burden of IDPs and host community as a part of shelter assistance.

As per the government policy, the usage of tents is very limited only in case that there is no alternative. Prefabricated housing may be considered only as alternative to the tents.

Promotion of an integrated shelter response & enhancement of needs analysis

While continuing the emergency responses, the Shelter Sector needs to expand its scope beyond the emergency response phases. Shelter needs in the 14 Governorates and urban areas vary considerably according to context, local needs, coping mechanisms, security situation, local needs, coping mechanisms and available shelter options. Affected population is both displaced and those remaining at origin, both of whom may have shelter needs. It has been acknowledged that a variety of shelter response options is necessary and should be explored to address the current and future shelter needs for the IDPs.

Likewise, the host community as well as the people who have remained at or returned to origin and whose homes are destroyed or damaged are also in need of shelter support. Hosting is a dominant mechanism for shelter support since the outset of the crisis, representing over 80% in some areas, reflecting cultural preferences and strong coping mechanisms among the population. The high number of IDPs accommodated is straining space available, utility bills, services and household income, affecting both the displaced and host families. Those who have remained or returned to origin staying in the damaged have not been prioritized in the shelter support to date. The Sector continues to enhance their understanding of shelter coping modalities and options to target support to needed families, which will allow the timely and suitable responses to different shelter needs. To this end, Shelter Sector coordination and the information management capacity will be enhanced to enable the Sector to process and analyse the collected information more systematically.

Given a number of IDPs residing outside official collective shelters and that host community as well as those in the place of origin also require the shelter support, analysis of shelter needs outside collective centres and prioritized actions and recommendations should be developed. Shelter assessment including damaged house assessment shall be undertaken utilizing the local expertise from both public and private sectors. The shelter assessment is expected to yield more options for shelter response in the emergency, short-term, medium and long term. A new Technical Working Group on needs assessment shall be established within the Shelter Working Group, where in-depth analysis is made on the assessment outcome, and the sector strategy framework as well as the new sector response plan will be jointly developed including risk mitigation measure. The agreed new options for the responses are expected to be implemented in 2014.

Enhanced shelter responses through strengthening capacity of national shelter partners

Syria has rich human resources and expertise in planning, architecture, engineering, housing, upgrading and construction, however, such locally available resources and expertise are underutilized. The Shelter Sector will explore to coordinate with local actors to inform programming and to optimize human resources in shelter response. The strategy shall be developed to increase local technical and implementation capacity, which shall contribute to the expansion of shelter response capacity to strengthening the in the current emergency phase, as well as the future rehabilitation, and reconstruction phases.

Distribution of essential household items

The essential household items, usually referred as non-food items, are to assist the families to cope in the new set-up. The Sector members will work closely with the Ministries of Local Administration and Social Affairs, and SARC to coordinate the response. Humanitarian agencies will prioritize the procurement and stockpiling of NFIs and winterization items to enable urgent distributions to the most affected population in need.

NFIs Working Group agencies aim at targeted assistance focusing newly displaced population and host communities, whose coping mechanisms are further eroding, including vulnerable groups such as women, children, disabled, elderly, and Palestine Refugees. While there is a standard NFI package regardless of the season, the Working Group has agreed to add some items under the winterization project to help families cope with the weather conditions. The standard package consists of the following items:

Items	No.	Items	No.
Mattresses	3	Kitchen set	1
Blankets	5	Hygiene kit	1
Diapers (child)	3	Jerry cans	1
Diapers (elderly)	0.4	Sleeping mats	1
Sanitary napkins	2	Plastic sheet	1

NFIs partners will aim at covering the needs of 4,680,000 affected persons, including women and children. UNRWA will focus on addressing NFIs needs for an estimate of 440,000 Palestine refugees, through provision of essential non-food items to affected refugee families and children as well as to IDPs hosted in UNRWA collective shelters.

Given the reduced capacity of the local market, most of the procurement will have to be addressed internationally on a timely fashion. This will give ample time for the large amounts of items to arrive and be prepositioned at UN Hub level and finalize distribution plans to ensure coverage of the most urgent needs in all 14 governorates.

UN agencies and operational partners will employ flexible processes, including rapid assessments, secondary data reviews, and sector specific assessments, to ensure coordinated and harmonized assessment processes despite the on-going challenges to obtain reliable primary assessment data to better inform the humanitarian response.

A work-plan will be developed by December 2013. The objectives will be to agree on unified minimum tools to address assessment/reporting/ monitoring format in the coming year. Revision of the standard package content, based on field monitoring, is also in the agenda.

Mainstreaming cross-cutting issues, including gender and protection

Protection and Gender issues will be mainstreamed in all aspects of the Shelter/NFI Sector. Women, girls, boys and men of different ages experience crisis, civil unrest, displacement in distinct ways and have different needs. Gender roles and responsibilities often change dramatically during emergencies because men and women adopt different coping strategies for survival. Humanitarian programming should reflect and address these changing dynamics to achieve gender equality/equity in humanitarian actions. Given the tremendous scale of humanitarian challenges, a key challenge is to ensure that needs assessments are informed by a gender and social analysis and include sex and age disaggregated data.

The targeted action in the NFI Working Group, addressing the disadvantage and special needs, is reflected in the standardized content of the assistance package providing equal opportunities among men/women; girls and boys. Age, gender and other diversities are taken into consideration in emergency responses, including preventive measures of SGBV incidents. Focus will be made in identifying specific needs for diversified population group during the shelter needs assessment. In coordination with other sector (FSAC, WASH) the Shelter/NFIs sector will contribute towards reducing morbidity due to harsh winter conditions among girls and boys less than 10 years of age.

Furthermore, sector-specific protection mainstreaming guidance, such as checklist, will be developed with support of Protection Sector in the course of the year.

Environment protection has been taken into account in planning and programming. NFIs Working Group has agreed to a standard NFI package which is in compliance with the environmental markers. The Working Group is committed to advice all actors involved to respect the IASC standards.

Coordination mechanisms

The Shelter / NFIs Sector consists of two Working Groups: Shelter and NFIs Working Groups. Each Working Group is the coordination forum for the member agencies, to develop unified and common approaches in programme operation as well as strategic approaches in the programming. Shelter / NFIs Sector closely works with its line Ministry, Ministry of Local Administration which co-chairs the Shelter Working Group together with

UNHCR. NFI Working Group is co-chaired by UNHCR and SARC. The dedicated Sector Coordinators for both Shelter and NFIs Working Groups are expected in 2014.

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Sector objective 2A:

Emergency shelter assistance is provided in timely manner

Top-priority activities:

Activity	Locations	Indicator	Target
Rehabilitation of collective shelters	14 Governorates	# of families residing in the rehabilitated collective shelters	9,350 families
Private Shelters Upgrade Project (PSUP) implemented	14 Governorates	# of families benefited from PSUP	24,500 families
Construction of individual housing units	To be determined (TBD)	# of families residing the housing units, and/ or # of public buildings vacated	1,650 IDP families for IDPs and 2,000 Palestinian refugee families
Cash for Shelter	TBD	# of families received financial assistance	58,000 families including 50,000 families of Palestinian refugees

All other:

Activity	Locations	Indicator	Target
Provision of prefab units on exceptional basis as emergency measure		# of units provided	

Sector objective 2B:

Affected population living without adequate materials for family life assisted

Top-priority activities:

Activity	Locations	Indicator	Target
Procurement/preposition/distribution of NFIs to affected populations living without adequate protection from the weather and privacy for family life.	14 governorates	# of IDPs and other affected persons assisted with NFIs	4,680,000
Cash distribution for Palestine refugees.	Palestine Refugees locations	# of IDPs and other affected persons assisted; Reduction of overall humanitarian need, as proportion of personal expenditures spent on NFI is reduced	440,000

Sector objective 2C:

Assist affected population living without winterized materials through a better distribution network.

Top-priority activities:

Activities	Locations	Indicator	Target
Timely procurement/preposition and distribution to affected population living without adequate clothing for winter.	14 governorates	Affected people have adequate clothing to preserve their life, health and dignity	1,000,000
The network and the capacity of local NGOs enhanced to assist affected populations living without adequate protection from the weather and privacy for family life.	14 governorates	# of districts where displaced and other affected populations have not been assisted before, receive assistance	41 (subject to the heat-map result)

STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/ stabilization of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities.

Sector objective 3A:

Strengthen sector needs assessment, data collection and information management

Top-priority activities:

Activities	Locations	Indicator	Target
Needs assessment conducted in view of providing more options for shelter / housing interventions	8 Governorates including Aleppo Rural Damascus, Homs, Hama and Lattakia	# of Governorate the needs assessment is conducted # of new shelter response options is identified	8
Shelter information map produced based on the needs assessment outcome	8 Governorates including Aleppo Rural Damascus, Homs, Hama and Lattakia	# of information map produced	8

Sector objective 3B:

The shelter responses enhanced through developing national capacity of shelter sector partners at municipality & Governorate level

Top-priority activities:

Activities	Locations	Indicator	Target
Local NGOs and experts engaged in shelter responses	8 Governorates including Aleppo Rural Damascus, Homs, Hama and Lattakia	# of local NGOs and other local institutions engaged in the shelter responses	10

Projects

Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Project title	Provision of Emergency Shelters Responses
Objective	<p>UNHCR's Shelter projects aims to 1) provide emergency shelters to the IDPs, 2) define new shelter responses through assessment, 3) build capacity of local shelter actors, and 4) enhance sector coordination. All the UNHCR projects are designed to achieve the Sector Objectives.</p> <p>UNHCR responds to the emergency shelter needs in order to improve the living condition for the IDPs in the form of collective shelter rehabilitation, Private Shelter Upgrade project, and construction of individual housing units. Private Shelter Upgrade project will also assist host community living in partially damaged houses. The project of individual housing unit construction aims to empty educational facilities, while Syrian children regain access to education and recreational activities, and to find alternative shelters for the IDPs living in education facilities.</p> <p>UNHCR will also seek new shelter responses for IDPs and host community to expand its scope beyond the emergency response phases. To this end, the comprehensive shelter assessment will be conducted. The information management shall be strengthened, which will allow better analysis and strategy formulation in order to define new types of responses corresponding to the identified needs for IDPs and affected population. This effort will be supported through establishment of Technical Working Group on the needs assessment.</p> <p>Capacity building of the local expertise is to expand the shelter response capacity in the current emergency phase, as well as the future rehabilitation, and reconstruction phases.</p> <p>UNHCR co-chair the Shelter Sector Working Group in Syria with Ministry of Local Administration. UNHCR will contribute to the Shelter Sector coordination structure as well as the information management in the sector, with aim to enhance the Sector coordination as well as to enable the Sector to process and analyse the collected information more systematically.</p>
Beneficiaries	Total: 91,000 individuals (IDPs and host community) Children: 45,500 Women: 27,300 shelter sector agencies, Local NGOs
Participants	Ministry of Local Administration, PU, ACF, SSSD, Syria Trust
Budget (\$)	23,074,126
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	UNITED NATIONS HUMAN SETTLEMENTS PROGRAMME (UN-HABITAT) (UN-HABITAT)
Project title	Shelter support for IDPs and Host Communities in affected Governorates
Objective	<p>The project aims to achieve the following objectives:</p> <ol style="list-style-type: none"> 1. To strengthen resilience and coping capacities of host communities through cash assistance to hosting communities 2. To support community initiatives in hosting areas under strain through community upgrading interventions designed by host communities and IDPs in hosting areas 3. To map and understand the social relations between IDPs and hosting communities, needs and support humanitarian agencies in preparation of databases for assistance through improved information management at local level
Beneficiaries	Total: 200,000 Host families, IDPs Children: 60,000 Women: 80,000 Other group: 4,000 direct beneficiaries of cash assistance
Participants	MOLA, National NGOs, municipalities
Budget (\$)	4,975,500

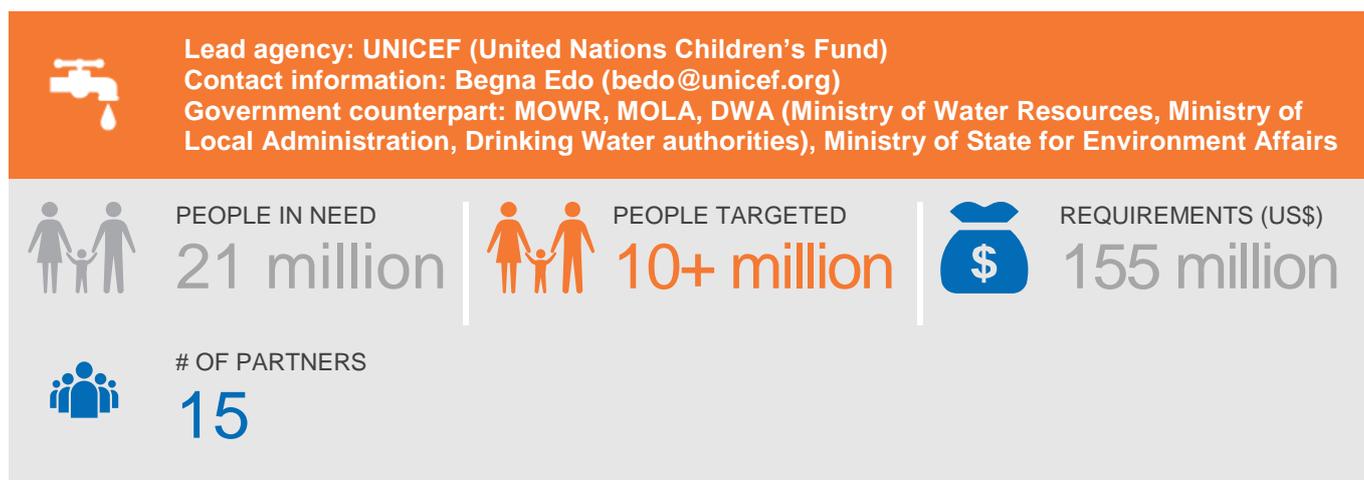
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Emergency NFI assistance to IDPs and crisis affected population in Syria
Objective	Increase the provision of essential Non-Food Items for displaced people and crisis-affected individuals in the target Governorates. DRC is planning to scale-up its life-saving activities in the NFI sector considering the increased number of people in need during 2014
Beneficiaries	Total: 500,000 00,000 Household - 500,000 individuals approximately. Considering that the standard beneficiary family has been estimated to be composed by 5 members, DRC assumes that 3 family members out of 5 are children. 1 Woman per family Children: 300,000 Women: 100,000
Participants	MOLA, Syrian Arab Red Crescent (SARC)
Budget (\$)	\$14,708,220
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Emergency NFI Winterization program for IDPs and crisis affected population in Syria
Objective	Provide winter Non-Food Items for displaced people and crisis-affected individuals in the target Governorates. DRC is planning to scale-up its life-saving winterization activities in the NFI sector considering the increased number of people in need during 2014
Beneficiaries	Total: 400,000 DRC winter cloth kit will target infant, Children and adults. Out of the total beneficiary number, DRC will target 90,000 infant (0-24 months), 200,000 children (2-17 years old) and 110,000 adults. The total number of women beneficiary of the action are supposed to be 80,000 Children: 240,000 Women: 80,000
Participants	MOLA, Syrian Arab Red Crescent (SARC)
Budget (\$)	\$14,571,688
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	PREMIERE URGENGE (PU)
Project title	Emergency humanitarian assistance to crisis affected population in Syria
Objective	40,000 crisis-affected families are provided with winterization items and kitchen sets in Syria
Beneficiaries	Total: 200,000 Crisis-affected persons in Syria Children: 100,000 Women: 100,000
Participants	MOLA, Syrian Arab Red Crescent (SARC)
Budget (\$)	\$3,210,000
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	PREMIERE URGENGE (PU)
Project title	To improve the living conditions of crisis affected displaced families in Syria
Objective	3,100 crisis-affected families will improve their living conditions through the rehabilitation of Communal Shelters and the distribution of Shelter Upgrade kits (Sealing off kits)
Beneficiaries	Total: 15,500 Internal Displaced Persons in Syria Children: 7,750 Women: 3,875
Participants	MOLA, Syrian Arab Red Crescent (SARC)
Budget (\$)	\$1,624,260

Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Shelter support to crisis-affected and displaced population of Syrian Arab Republic.
Objective	Crisis affected and displaced population in Syrian Arab Republic have their living conditions improved and live in spaces that comply with agreed standards.
Beneficiaries	Total: 41,750 IDPs, host community Children: 25,050 Women: 8,350
Participants	MOLA, Syrian Arab Red Crescent (SARC)
Budget (\$)	\$12,706,250
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Provision of basic domestic NFIs to IDPs and hosting community
Objective	Sector Objective 1A: Assist affected population living without adequate materials for family life
Beneficiaries	Total: 100,000 individual
Participants	MOLA, Participating local and INGOs
Budget (\$)	\$2,000,000
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	ADVENTIST DEVELOPMENT AND RELIEF AGENCY (ADRA)
Project title	Syria Emergency NFI Prepositioning
Objective	Meet the emergency needs of recently-displaced men, women, boys and girls through the provision of start-up NFIs, hygiene kits and baby kits
Beneficiaries	Total: 40,000 A total number of 8,000 households (or 40,000 displaced) recently displaced further to crisis will benefit from project activities Children: 14,000 Women: 12,840 Other group: 13,160 The total number of target beneficiaries is 40,000 individuals and tentatively includes: 970 young girls aged 0-3 years; 1,030 young boys aged 0-3 years; 5,830 girls aged 4-14 years; 6,170 boys aged 4-14 years; 12,000 women aged 15-64 years; 840 women aged +65 years; 12,400 men aged 15-64 years; 760 men aged +65 years
Participants	MOLA, Participating local and INGOs
Budget (\$)	\$1,528,000
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES (UNHCR)
Project title	Provision of Core Relief Items and winterized relief supplies
Objective	Core Relief Items (NFIs) needs of displaced and crisis-affected population are met through provision of assistance.
Beneficiaries	Total: 3,500,000 IDPs and affected communities Children: 1,050,000 Women: 1,750,000 Other group: 700,000
Participants	MOLA, SARC, GOPA, etc
Budget (\$)	\$205,155,904

Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency NFIs assistance to Displaced Population in Syria
Objective	To improve the living conditions of displaced and affected population by providing basic life-saving commodities
Beneficiaries	Total: 1,800,000 Displaced population in public shelters, and host communities in all governorates in Syria, keeping priority for Aleppo, Idleb, Homs, Latakia and Rural Damascus. In addition, taking into consideration the special needs of vulnerable groups: women, children, elderly and people with disability. Children: 540,000 Women: 900,000
Participants	MOLA, SARC
Budget (\$)	\$22,050,000
Government bodies	Ministry of Local Administration (MoLA)
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency Shelter Intervention Support for Displaced Population in Syria
Objective	Protect displaced population by providing shelter solutions taking into consideration the special needs of women, children, people with disability and elderly.
Beneficiaries	Total: 88,000 Displaced populations in public shelters, host communities, and those living in damaged accommodation in all governorates in Syria, keeping priority for Aleppo, Idleb, Homs, Latakia and Rural Damascus. Also, meeting the special needs of vulnerable groups including women, children, elderly and people with disability. Children: 26,400 Women: 44,000
Participants	MOLA, SARC
Budget (\$)	\$27,149,063
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Provision of emergency cash assistance for non-food items for 440,000 vulnerable Palestine refugees
Objective	NFI needs of displaced and crisis-affected Palestine refugees are met through provision of USD 12/person/month.
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$70,751,428
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Provision of non-food items for affected Palestine refugees
Objective	NFI needs of displaced and crisis-affected Palestine refugees are met through provision of in-kind assistance
Beneficiaries	Total: 194,000 Displaced Palestine refugees (48,500 Displaced Families) Children: 60,139 Women: 96,500
Participants	GAPAR
Budget (\$)	\$8,502,730

Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	One-time cash grant for shelter assistance, covering 200,000 displaced Palestine refugees
Objective	Food needs of displaced and crisis-affected Palestine refugees are partially met through provision of in-kind food assistance
Beneficiaries	Total: 40,000 Palestine refugees (10,000 families) Children: 12,400 Women: 19,000
Participants	GAPAR
Budget (\$)	\$2,236,650
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Temporary shelter construction for 8,000 displaced Palestine refugees
Objective	Construction of 2,000 emergency shelter units for the most severely crisis affected and displaced Palestine refugee families
Beneficiaries	Total: 8,000 Palestine refugees Children: 2,560 Women: 4,000
Participants	GAPAR
Budget (\$)	\$6,660,000

WASH



Response strategy

This revised strategy continues to support and sustain provision of safe drinking water and sanitation services and proposes targeted solid waste management systems and address hygiene needs for all Syrians while focusing on the needs of women, girls and children in particular (both host and displaced communities in all governorates) through sector coordination.

The primary sector objective is to address critical needs where the breakdown of large water supply & treatment, Sewerage treatment, Solid waste management systems is reported, as part of the ongoing response (both water supply and waste water treatment networks) to mitigate outbreaks of diseases through sustained safe environmental management.

The sector also acknowledges contributions from other partners that are not part of sharp is substantial, ICRC, IFRC and national agencies who work in partnership with international NGOs and UN agencies is huge and substantial to the sector.

The minimum sector response standards and guidelines are:

Adequate and contextual services reaching at least 25L/P/day of safe drinking water with one hygiene kit/family/2 month should reach all people in need with use if required including adequate sanitation service (1 bathing unit, Latrine/4 families Max). In public institutions like schools and health centers all components of WASH services should be rehabilitated to ensure safe, adequate and sustainable services are provided. In addition prevention of irreversible damages to the environment through waste management (both water and solid) is also addressed.

The sector response targets are:

- Continue building partnership, through coordination, with UN agencies, line ministries, SARC, I/NGOs and public & private sector to promote sector goals. Ensure information management and sector coordination are robust and productive and action oriented!
- Work with donors and relevant line ministries to advocate for resource mobilization, accountability and evidence based programming
- Set priorities where severe to moderate shortage of drinking water is reported to large population due to system break down or lack of resources (Fuel, treatment chemicals, power supply, spare parts ...)
- Areas where large to medium waste water treatment systems are damaged discharging raw waste water to the environment polluting ground and surface water sources.
- In IDP & collective shelters (in coordination with shelter sector), where large number of people remain with critical needs for WASH, children & women in particular.
- Integrate/converge with other sectors (health, shelter, nutrition, education) where convergent needs are reported to improve wellbeing of affected population (with school hygiene kits if possible)

- Ensure outbreaks of diseases are contained through
 - mobile and immediate provisions of services (water and sanitation), and
 - consensus-based gaps analysis and priorities are set for critical response

The sector strategies comprise:

- Effective coordination with timely information sharing with implementing partner line ministries, promote evidence based actions
- In convergence enhance inter-sectoral coordination to synergize response and address needs
- Ensure gender and protection mainstreaming and inclusive policies are addressed while designing WASH projects. This includes age, disability, and vulnerability.

This strategic guideline aims to provide WASH partners with a principled & adaptive operational approach to maximize reach through direct and indirect emergency implementation techniques

The working group supporting the provision of water, sanitation and health care (WASH), in conjunction with the strategic response by the Humanitarian Country Team (HCT), to provide information on a joint basis, along with reporting and monitoring and evaluating of responses and identification of needs using specific indicators for continuous assessment of risks and track targeted responses.

1. Maintain drinking and domestic water supply provision through maintaining production, treatment & distribution to all communities through regular and emergency measures.
2. Ensure adequate storage and mobile provision of drinking water is provided where needed (Mobile treatment units, storage tanks, water tankering and distribution of House hold water treatment options eg: filters, aqua tabs, satches ...)
3. Protection of surface and ground water resources, (lakes, Dams, Streams and shallow aquifers) through improved management & maintenance of sanitation systems, both liquid & solid form HHs, Industries, hospitals and agricultural areas
4. Distribution of hygiene kits to all families in need with focus on adolescent girls and women in general, complemented by hygiene promotion
5. Improve WASH facilities in vital institutions (schools, Hospitals, shelters and health centers) including management of liquid and solid waste
6. Implement, where needed, alternative and adaptive options of providing WASH services

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate life-saving emergency and relief supplies for affected people in syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Activity	Locations	Indicator	Target
1. Provision of adequate HH water storage containers	14 Governorates with critical needs (cities, towns, shelters, villages...)	# of people reached with adequate amount of drinking water on daily basis	Part of the 10 million people (difficult to estimate the number for emergency drinking water supplies)
2. Provision of water tankers or local distribution systems (temporary or midterm)			
3. Installation or repair of emergency water supply systems to shelters/collective centers/ host communities refugee camps			

4.	Provision of chemicals (aqua Tabs.), HH filters to Ensure safe drinking water is available	# aqua tabs distributed & used # HH water containers made available to HHs	
5.	Improve HH sanitation & supply of hygiene kits for personal and HH use	# of people with access to adequate sanitation & basic hygiene kits	3 million

Sector objective 1A:

To respond in an effective and timely manner to outbreak of disease and the halt of water supply through the provision of life-saving assistance.

Top-priority activities:

Activity	Locations	Indicator	Target
Emergency repairs and supply of water production, treatment & distribution networks with supplies of equipment and spare parts	14 governorates	# of production, treatment and supply networks rehabilitated/restored	Part of 10 million people (contextual response)
Emergency repairs of waste water treatment plants to secure environment and water resources safety		# of waste water treatment systems rehabilitated and restored # of emergency drinking water supplies implemented (# of people reached with emergency options)	
Awareness campaigns & supplies of hygiene Kits within IDP shelters/host communities/ affected communities		# and % of people with access to information of proper hygiene practice and supplies # sites, centers, towns and cities with sound environmental management	Part of 3 million target

STRATEGIC OBJECTIVE 3: Expand early recovery efforts, and the restoration of livelihoods by supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance the resilience of affected communities

Sector objective 2A:

Support the rehabilitation of public and social infrastructure and services affected by the crisis

Top-priority activities:

Activities	Locations	Indicator	Target
Rehabilitation/restoration of production, treatment and distribution networks through provision of gen sets, treatment chemicals & accessories	14 governorates	# of water supply systems restored	At least 10 million people in all governorate # of municipalities
Equip boreholes, enhance surface/ground water production & distribution through repair & provision of accessories		# of water supply systems provided to collective shelters, vital institutions # of wells drilled, rehabilitated and equipped with pumping and distribution networks	

Activities	Locations	Indicator	Target
Rehabilitation/restoration of waste water, treatment and disposal plants and networks through provision of gen sets, treatment chemicals and accessories, supply of trucks, compactors etc.		# of waste water treatment systems restored # Solid waste management systems restored – landfill sites trucks provided/tractors provided	Municipalities, towns and areas of solid waste management concern

STRATEGIC OBJECTIVE 5: Strengthen the level of preparedness, including presence and capacity of humanitarian actors, to respond to further deterioration of the humanitarian situation

Sector objective 1A:

Expand and strengthen current humanitarian hubs, supported by an integrated contingency planning process involving all sectors

Top-priority activities:

Activity	Locations	Indicator	Target
Enhance hubs-based contingency (Response) planning among partners to respond to critical needs on timely manner (in response to containing outbreaks of diseases and provision of essential life-saving activities)	Four locations across Syria (Damascus, HOMS, Tartous & Hassaqa/DeirEzzour)	# Prepositioned stock, supplies & programs available for immediate distribution	4 hubs with adequate contingency stocks and emergency response capacity

Projects

Government bodies	Ministry of Social Affairs, Ministry of Health
Appealing Agency	UNITED NATIONS POPULATION FUND (UNFPA)
Project title	Promote and enhance personal hygiene of affected young girls, women and men
Objective	Improve personal hygiene of displaced Syrian young girls, women & men to live with dignity.
Beneficiaries	Total: 400,000 women and men Women: 300,000 Other group: 100,000 men
Participants	MoSA, MoH, SFPA, SARC, local and international NGOs and CBOs working in affected areas
Budget (\$)	\$18,000,000

Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Hygiene promotion through training and distribution of hygiene Kits
Objective	Increase the provision of hygiene kits for displaced affected and individuals in need in the target governorates.
Beneficiaries	Total: 800,000 160,000 Household - 800,000 individuals approximately. Considering that the standard beneficiary family has been estimated to be composed by 5 members, DRC assumes that 3 family members out of 5 are children, and that 1 family member out of 5 is a woman. . In addition, DRC estimate that 15% of the beneficiaries are infant 0-24 months (120,000 infants). Children: 480,000 Women: 160,000
Participants	MoWR, Syrian Arab Red Crescent (SARC)
Budget (\$)	\$6,652,832
Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	OXFAM GB (OXFAM GB)
Project title	Oxfam: Support to IDPs inside Syria (SYRA25)
Objective	Improved and safe access to adequate supply and quality of water, improved and safe access and appropriate use to safe sanitary facilities, and improved awareness and increased availability of means to enable safer hygiene practices in a dignified and culturally acceptable manner among conflict affected populations as per SPHERE standards
Beneficiaries	Total: 125,000 IDPs Children: 66,250 Women: 28,750 Other group: 30,000 men
Participants	MoWR
Budget (\$)	\$6,500,000
Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	OXFAM GB (OXFAM GB)
Project title	Oxfam: Support to IDPs inside Syria (SYRA29)
Objective	Improved and safe access to adequate supply and quality of water, improved and safe access and appropriate use to safe sanitary facilities, and improved awareness and increased availability of means to enable safer hygiene practices in a dignified and culturally acceptable manner among conflict affected populations as per SPHERE standards
Beneficiaries	Total: 140,000 IDPs Children: 74,200 Women: 32,200 Other group: 33,600 Men
Participants	MoWR
Budget (\$)	\$1,500,000
Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	OXFAM GB (OXFAM GB)
Project title	Oxfam: Support to IDPs inside Syria (SYRA30)
Objective	Improved and safe access to adequate supply and quality of water, improved and safe access and appropriate use to safe sanitary facilities, and improved awareness and increased availability of means to enable safer hygiene practices in a dignified and culturally acceptable manner among conflict affected populations as per SPHERE standards
Beneficiaries	Total: 455,000 IDPs Children: 241,150 Women: 104,650 Other group: 109,200 Men
Participants	MoWR
Budget (\$)	\$1,800,000

Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	OXFAM GB (OXFAM GB)
Project title	Oxfam: Support to IDPs inside Syria (SYRA27)
Objective	Improved and safe access to adequate supply and quality of water, improved and safe access and appropriate use to safe sanitary facilities, and improved awareness and increased availability of means to enable safer hygiene practices in a dignified and culturally acceptable manner among conflict affected populations as per SPHERE standards
Beneficiaries	Total: 710,000 Comprising 376,300 children and 163,300 women Children: 376,300 Women: 163,300
Participants	MoWR
Budget (\$)	\$ 1,800,000
Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	Premiere Urgence (PU)
Project title	Hygiene promotion and provision of drinking water
Objective	To maintain and extend humanitarian assistance to support the conflict affected Syrian population through basic NFI hygiene kits distribution in coordination with SARC, and provision of safe water to conflict affected Syrian families living in public/private collective shelters.
Beneficiaries	Total: 512,500 Conflict-affected persons in Syria Children: 216,250 Women: 128,125
Participants	MoWR, SARC, MSEA(Ministry of State for Environmental Affairs)
Budget (\$)	\$3,402,600
Government bodies	Ministry of Education, Ministry of Water Resources (MoWR)
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Improve access to safe & reliable drinking water, sanitation and hygiene for children in schools, child friendly spaces and public institutions in the most affected areas/governorates
Objective	Ensure improved access to clean water, sanitation and hygiene is provided for children in schools, child friendly spaces and public institutions (health) based on sector agreed standards.
Beneficiaries	Total: 300,000 school age, Boys and girls Children: 150,000 Women: 150,000 N/A
Participants	MoE, N/INGOs
Budget (\$)	\$5,000,000
Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Water, Sanitation and Hygiene sector Coordination
Objective	Enhance effective coordination of the WASH Sector's humanitarian response program in close coordination with Ministry of Water Resources, SARC, UN and INGOs by ensuring complementarities of interventions through sharing and updating critical information management systems to improve livelihoods of all affected communities in all governorates
Beneficiaries	Total: 10,000,000 Minimum estimated Children: 5,000,000 Women: 2,500,000 Other group: 2,500,000 Men
Participants	MOWR & sector partners
Budget (\$)	\$ 500,000

Government bodies	Ministry of Education, Ministry of Water Resources (MoWR)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	Improvement of water, sanitation and hygiene facilities in learning spaces.
Objective	Ensure that children and teachers have access to safe and adequate water, sanitation and hygiene facilities in their learning environment.
Beneficiaries	Total: 8,000 School children, boys and girls Children: 8,000
Participants	MoE, N/INGOs
Budget (\$)	\$290,429
Government bodies	Ministry of Local Administration (MoLA), Ministry of Water Resources (MoWR)
Appealing Agency	DANISH REFUGEE COUNCIL (DRC)
Project title	WASH support to conflict-affected and displaced population of Syrian Arab Republic.
Objective	Conflict affected and displaced population in Syrian Arab Republic have access to sufficient amount of safe water and appropriate sanitary facilities.
Beneficiaries	Total: 11,400 IDPs, host community Children: 6,840 Women: 2,280 Other group: 2,280 Men
Participants	MOLA
Budget (\$)	\$758,044
Government bodies	Ministry of Water Resources (MoWR)
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Ensure water, sanitation and Hygiene services to the agreed standard with primary purpose of satisfying vital needs, dignity and reduction of public health related risk for population in need in all governorates.
Objective	<ol style="list-style-type: none"> 1. Affected Populations are ensured with safe, equitable and sustainable access to a sufficient quality of water for drinking, cooking and personal and domestic Hygiene 2. Affected populations are protected from the spread of diseases and promoted with a safe sanitary and hygienic living environment 3. Affected population have reduced risk of WASH related diseases through access to improved practices, effective community mobilization to address harmful current practices, hygiene promotion and delivery of hygiene products and services on a sustainable and equitable basis.
Beneficiaries	Total: 10,000,000 Affected population Children: 5,000,000 Women: 2,500,000 Other group: 2,500,000 Men
Participants	MoWR, SARC,
Budget (\$)	\$49,000,000
Government bodies	Ministry of Local Administration (MoLA), Ministry of Water Resources (MoWR)
Appealing Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Project title	Improve access to safe & reliable drinking water, sanitation and hygiene for IDPs in collective shelters and IDP in Host community
Objective	<ol style="list-style-type: none"> 1. Affected Populations are ensured with safe, equitable and sustainable access to a sufficient quality of water for drinking, cooking and personal and domestic Hygiene 2. Affected populations are protected from the spread of diseases and promoted with a safe sanitary and hygienic living environment 3. Affected population have reduced risk of WASH related diseases through access to improved practices, effective community mobilization to address harmful current practices, hygiene promotion and delivery of hygiene products and services on a sustainable and equitable basis.
Beneficiaries	Total: 2,000,000 affected population Children: 1,000,000 Women: 700,000
Participants	MoLA, SARC
Budget (\$)	\$26,000,000

Government bodies	Ministry of Local Administration (MoLA), Ministry of Water Resources (MoWR)
Appealing Agency	UNITED NATIONS DEVELOPMENT FUND (UNDP)
Project title	Hygiene Promotion and conservation - Distribution of kits
Objective	Provide hygiene kits to IDPs and host communities with a focus on vulnerable groups including female headed households, the elderly and the disabled
Beneficiaries	Total: 180,000 individual
Participants	MoLA, MSEA, Participating local and INGOs
Budget (\$)	\$2,000,000
Government bodies	Ministry of Local Administration (MoLA), Ministry of Water Resources (MoWR)
Appealing Agency	UNITED NATIONS DEVELOPMENT FUND (UNDP)
Project title	Hygiene Promotion and conservation – Ensuring construction of emergency bathing units and latrines
Objective	The provision of water heaters or solar panels in targeted shelters to ensure the access of IDPs to clean and hot water
Beneficiaries	Total: 50 IDPs
Participants	MSEA, Participating local and INGOs
Budget (\$)	\$ 4,000,000
Government bodies	Ministry of Local Administration (MoLA), Ministry of Water Resources (MoWR)
Appealing Agency	ADVENTIST DEVELOPMENT AND RELIEF AGENCY (ADRA)
Project title	WASH Rehabilitation of IDP shelters
Objective	Improve the water storage capacities and sanitation conditions of conflict-affected families living in collective (public and private) shelters through the rehabilitation and enhancement of water storage and sanitation facilities
Beneficiaries	Total: 22,500 IDPs, host community Children: 7,875 Women: 7,223 Other group: 7,402 6,975 men aged 15-64 years; 427 men aged +65 years
Participants	MoLA
Budget (\$)	\$1,319,000
Government bodies	Ministry of Local Administration (MoLA), Ministry of Water Resources (MoWR)
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency WASH assistance to Displaced Population in Syria
Objective	To decrease the risk of hygiene-related diseases and illnesses amongs displaced and affected population within private shelters.
Beneficiaries	Total: 10,000 IDPs Children: 3,000 Women: 5,000 Other group: 2,000 Men
Participants	MoLA
Budget (\$)	\$1,378,125
Government bodies	GARAP
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	Provision of hygiene kits to 194,000 vulnerable Palestine refugees
Objective	Hygiene needs of 194,000 vulnerable Palestine refugees are met through provision of in-kind assistance
Beneficiaries	Total: 194,000 Displaced Palestine refugees (48,500 Displaced Families) Children: 60,139 Women: 96,500
Participants	GARAP
Budget (\$)	\$11,309,125

Government bodies	GARAP
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST (UNRWA)
Project title	WASH services and waste disposal in Palestine refugee camps and collective shelters
Objective	Access to adequate water and other WASH services for 450,000 Palestine refugees residing in camps and collective shelters
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GARAP
Budget (\$)	\$1,554,000
Government bodies	Ministry of Local Administration, Ministry of Water Resources
Appealing Agency	UNITED NATIONS HUMAN SETTLEMENTS PROGRAMME (UN-HABITAT) (UN-HABITAT
Project title	Emergency solid waste management and public services support in affected municipalities
Objective	<ol style="list-style-type: none"> 1. Conduct waste management and waste water related assessments and support municipalities on solid waste management through training and technical assistance 2. Reduce health risks among IDPs and hosting community members due to exposure and interaction with solid waste and waste water through monitoring system pilots 3. Map solid waste related health outbreaks in targets areas and design a community outreach campaign to prevent or reduce exposure to waste 4. Organize and support community networks on advocacy, outreach campaign and monitoring on waste management services at community level.
Beneficiaries	Total: 300,000 Palestinian Refugees Children: 120,000 Women: 60,000 Other group: 600 technical trainings for public and private service staff
Participants	MoLA, MSEA, National NGOs, municipalities
Budget (\$)	\$3,509,600
Government bodies	Ministry of Health, Ministry of Water Resources
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Establishment of a national water quality surveillance and response system for supply of safe drinking water
Objective	To ensure the provision of safe drinking water
Beneficiaries	Total: 6,800,000 People in need in 2014 Children: 2,577,200 Women: 3,468,000
Participants	MoWR, MoH, MoE, MSEA and participating NGOs and Syrian charity organizations
Budget (\$)	\$3,600,000
Government bodies	Ministry of Health, Ministry of Water Resources
Appealing Agency	WORLD HEALTH ORGANIZATION (WHO)
Project title	Improvement of hospital hygiene at Public and NGO-administered hospitals
Objective	To improve emergency water supply and hospital hygiene conditions
Beneficiaries	Total: 6,800,000 People in need in 2014 Children: 2,577,200 Women: 3,468,000 Other group: 3,332,000
Participants	Ministry of Health and participating NGOs that administer public hospitals
Budget (\$)	\$ 4,900,000

EARLY RECOVERY & LIVELIHOODS



Lead agency: UNDP

Contact information: Manal Fouani (manal.fouani@undp.org)

Government counterpart: Ministry of Social Affairs, Ministry of Agriculture and Agrarian Reform, Ministry of Local Administration, Ministry of State for Environment Affairs



PEOPLE IN NEED

9.6 million



PEOPLE TARGETED

1 million



REQUIREMENTS (US\$)

71 million



OF PARTNERS

10

FAO, UNDP, UN-Habitat, UNFPA, UNRWA, IOM, Mercy Corps, PU, DRC, GOPA

Early Recovery Response Strategy

The Early Recovery and Livelihoods sector will direct its programmes and interventions to the most vulnerable groups of the affected population. This will be ensured through targeting of beneficiaries and geographical prioritization. The overall objective is to strengthen the resilience of the crisis affected population by ensuring better coping mechanisms, decent living conditions and social cohesion. Accordingly, the sector objectives below respond directly to the strategic priorities of increasing income generation opportunities, improving access to basic services and infrastructure in targeted locations, developing the capacities of local and national partners as well as protecting the common cultural and archaeological heritage of Syria. The partner agencies in this sector will support urban and rural neighbourhood based coping mechanisms and priority needs, facilitate labour-intensive employment, cash for work, tools and assets replacement, vocational training, start-up grants and self-employment opportunities to eventually mitigate and prevent the adoption of negative coping mechanisms that further aggravate the living conditions of affected families. They will also facilitate inter and intra-community activities to bring people together and promote peaceful interaction and cohesion in host communities. The neighbourhoods and area-based response planning rests at the centre of the sector strategy for a coherent and comprehensive early recovery and livelihoods activities. Localized solutions will be adopted to address instability in the security context and emerging needs of the population, and ensure complementarities between different sectors. Initiatives will be designed through a “Do-No-Harm” lens to avoid harmful spill-over effects on individuals, communities, the environment and the economy, as well as to prevent creating or reinforcing causes of crisis or perpetuating gender or other forms of discrimination. Environmental considerations and capacity development elements will be taken into account to ensure durable and sustainable results.

People affected and targeted

The Early Recovery and Livelihoods sector defines affected population as those heavily affected by the socio-economic impacts of the crisis, and whose coping and early recovery potentials are most at risk. They include crisis -affected communities, internally displaced people, and host communities who are struggling hard to share scarce resources and extend hospitality amidst their own rising poverty.

The livelihood sector is targeting one million people from the most vulnerable and affected population of IDPs and host communities namely pastoral and agro-pastoral families, urban and rural communities, micro and small business owners, female-headed households, youths, persons with disability in addition to Palestine refugees. The most vulnerable are those severely affected in their livelihoods to an extent that they are not able to maintain a dignified life due to severe infrastructure damage, disrupted basic services, and loss of income, assets and even human capital.

Sector objectives and activities

Given the nature of the protracted crisis in Syria, there is an increasing recognition among humanitarian actors that Early Recovery and Livelihoods (ER&L) interventions will create an enabling environment for the delivery of humanitarian relief, reduce reliance on aid, and enhance the resilience of affected communities. With the increase in poverty and unemployment rates, it is evident that more attention should be given to strengthening the resilience and coping mechanisms of affected communities. The Early Recovery and Livelihoods sector objectives are as follows:

Sector objective 1:

Enhance the resilience of affected population through creation of emergency employment opportunities for rehabilitation of basic and social infrastructure

Displacement, increased level of unemployment and loss of jobs have led to further destitution of socio-economic situation of the Syrian population. Many small businesses and large factories have closed dismissing an enormous number of employees. Lack of cash, livelihoods and means of living are major problems; affected population has exhausted its savings and resorted to negative coping mechanisms such as selling of assets, decrease in the food ratios or meals, and unfavourable social solutions. Many cannot afford basic commodities. Moreover, severe damage to basic services and socio-economic infrastructure and lack of basic service delivery are also leading to major displacements within the same governorates. For example, and as confirmed by UN-Habitat Rapid City Profile in Homs (September 2013), the disruption of municipal services and existing public service systems due to overcrowded neighbourhoods, and the increased production of solid waste are leading to piles of garbage in streets and shelters endangering health conditions of the affected population and the surrounding environment. According to the Ministry of Health recent data, out of 1509 Primary healthcare centres, only 770 (51%) primary health centres are providing RH services remaining are out of service due to physical damage/ lack of staff/equipment/supplies. Out of 40 Basic Emergency Obstetric Care centres only 15 centres are operational in Damascus, Hama, Sweida, Al-hasakeh, Latakia, Homs, Idleb and Dera'a. Furthermore, 6 Basic Emergency Obstetric Care centres in Rural Damascus, Qunaitara, Raqqa, Aleppo, Der-ezzor, and Tartus are reported as out of services.

Thus, partners in the early recovery and livelihoods sector will join efforts to ensure that labour intensive schemes and cash for work mechanisms are in place for rubble removal and solid waste management in shelters, neighbouring areas and host communities as quick and localized solutions, and for the rehabilitation of damaged basic and social infrastructure including agricultural irrigation networks, water, drainage and sewage networks, markets, primary healthcare and maternal healthcare centres, nurseries and schools. The same approach of emergency employment will be also adopted for quick housing repairs. Engagement with local stakeholders and direct linkages with municipalities and technical public directorates will be sought as strategic partnerships for empowering local capacities to better respond to such complex challenges and fostering the sustainability of public goods delivery. Many partners are conducting joint projects aiming at achieving this result; UNDP being the lead agency on early recovery and livelihoods is joining efforts with UNFPA on rehabilitation of maternal health centres, with WHO on rehabilitation of primary healthcare centres, with FAO on rehabilitation of irrigation networks, with UN-Habitat on solid waste management and neighbourhoods response planning, and with UNICEF on rehabilitation of schools and educational centres in addition to hygiene promotion pertinent to solid waste management, IOM on emergency employment for rehabilitation of collective shelters. UNRWA is contributing through vocational education and training at UNRWA's vocational training centres across Syria, including the Damascus Training Centre, with a focus on skills relevant to humanitarian assistance, early recovery, reconstruction and enterprise; and through providing job placements in a range of commercial and social sectors, including humanitarian, charitable and commercial organisations. Additionally, basic social infrastructure in refugees' camps including health, education and other UNRWA installations will be restored using labour intensive techniques.

Sector objective 2:

Strengthen the coping mechanisms of affected population through restoration of disrupted livelihoods

The Syrian has economy experienced massive de-industrialisation as a result of business closure and, capital flight, looting and destruction. This lost capital will have to be replaced from new financing sources in any future rehabilitation and re-industrialisation of the Syrian economy. As the formal economy has imploded, there has been a growth in informality, rent-seeking activities that risk to plague post-crisis economic regulation, reform, equity and development. All these economic impediments coupled with constant displacement and high levels of poverty calls on partners in the early recovery and livelihoods sector to pay particular attention to the restoration of disrupted livelihoods of the most vulnerable, including Palestine refugees. This will entail reviving local markets to inject cash

in the local economy, restoring small and medium enterprises and businesses, and availing emergency economic relief to poor affected population through micro-financing mechanisms, including loans and grants, in addition to preventing further losses of productive assets and adoption of negative coping strategies through assets replacement and business start-up kits. Strengthening the capacities of the labour force to re-enter the labour market according to the emerging priority fields is also a strategic intervention in this sector. Thus, vocational training and job placements are planned to match between market needs and newly developed skills. UNRWA's microfinance programme finances loans to both Syria citizens and Palestine refugees, with Syrians accounting for over 90 per cent of the programme's microfinance lending activities through its branch office network in Damascus, Sweyda, Tartous and Latakia. UNDP continues to focus on providing grants to boost local production in local markets particularly matching demand on humanitarian relief items and the capacity of local markets to produce them, and IOM has started providing skills training to selected IDPs and crisis-affected populations in Damascus. This helps to further improving the value chain from production to marketing in various economic sectors.

The Early Recovery and Livelihoods sector will liaise and join efforts with other sectors to ensure an adequate mainstreaming of early recovery with particular focus on rehabilitation, job creation and restoration of local service delivery.

Sector objective 3:

Enhance the resilience of the vulnerable groups (including youth, female headed households, elderly, Palestine refugees and persons with disability) through targeted rehabilitation and livelihoods support

It is crucial to consider the vulnerable groups in early recovery programming as experience has shown that their marginalization further increases in times of crisis. Syrian female headed households, persons with disability, the elderly, youth and Palestine refugees will require particular attention to avail adequate livelihoods opportunities and address their immediate needs. Indeed, increased number of female headed households is observed in shelters and host communities. Similarly, there is a high number of unemployed youth or youth not attending education getting involved in the crisis or in delinquency. Youth require particular efforts for engaging them in constructive community based socio-economic activities promoting social cohesion, active participation and inclusiveness.

In line with the UN Security Council Resolution 1325, the ER&L sector members will work with stakeholders on women economic empowerment particularly in times of crisis and post-crisis. As such, programmatic emphasis will be put on emergency employment for women to generate quick earnings to support their families. It is foreseen that women in communities and/or public shelters will benefit from rapid cash for work schemes for the manufacturing/production of much needed blankets or other clothing items, food processing activities, and any other small business. A tailored vocational training activity will help women acquire new skills needed to accelerate their entry to the production and employment market.

In addition, and in line with the UN Partnership on the Rights of Persons with Disabilities (UNPRPD), UNDP, UNRWA and IOM will give due attention to people with disabilities and other special needs, and shall avail necessary resources for them to become independent and productive members of the community. UNDP's support is based on a comprehensive rehabilitation cycle including but not limited to psycho-social support, provision of disability aids such as prosthetics, artificial limbs, crutches, wheelchairs, medical pillows and mattresses, among other needed items, specialized vocational trainings and integration in community based economic activities. IOM and UNRWA also provide specialized services to persons with disability including provision of disability aids and physiotherapy sessions.

Both women and people with special needs (Syrian and Palestine refugees) will benefit from cash transfer, trainings and start-up kits where applicable, while people with disabilities will benefit in addition from medical support and disability aids that will facilitate their mobility.

FAO will focus on supporting home-based economic recovery for female headed households promoting kitchen and backyard gardening and small poultry farming.

Targeted youth projects will be tailored to address social cohesion ensuring an inclusive active participation of youth in the early recovery and livelihoods initiatives. Activities will be tailored according to local contexts and dynamics.

Sector objective 4:

Strengthen the assessment, planning, implementation and monitoring capacities of international, national and local partners for a coherent and coordinated early recovery and livelihoods response

Coordination with all stakeholders involved in the early recovery and livelihoods work is a priority to ensure synergies, coherence, avoid duplication and optimize the use of available resources. This will ensure that early recovery elements and the resilience based approach are both mainstreamed in other sector working groups'

strategies and plans. Particular capacity development activities will be implemented to increase the awareness on the resilience based approach and early recovery mainstreaming, and strengthen the planning and implementation capacities of all involved stakeholders for coherent and effective ER&L results. Advocacy for resilience based planning and early recovery mainstreaming will rely on evidence based and informed assessments conducted by various UN agencies and partners in the ER&L sector. As such, macro and micro level assessments will be conducted to identify the socio-economic impacts of the crisis on productive and social sectors in Syria. An area-based livelihoods and damage assessment will better inform local emergency and early recovery response plans engaging a larger number of stakeholders in the process. UNDP and UN-Habitat are promoting for neighbourhood/ areas-based planning focusing on developing a comprehensive action plan to address inter-sectoral needs and priorities. UN-Habitat will utilize its on-going urban assessments at neighbourhood level in Aleppo, Homs, Latakia, Hama, Dara'a to support urban neighbourhood based programming through neighbourhood structures to deliver on urban impact projects in most vulnerable cities affected by crisis. According to UN-Habitat Rapid City profile findings in September 2013, the limited urban functionality in neighbourhoods is preventing habitation and return, and is adding additional pressures on public buildings for shelter and WASH, as IDPs are moving out of areas of origin to new neighbourhoods. Ensuring active participation of municipalities and local actors in sustaining local service delivery will foster stabilization and recovery in target areas and prevent additional cycles of displacement.

Assessments and plans should be presented to all actors facilitating the planning processes to ensuring coherent and adequate responses by different sectors. UNDP will capture results of various assessments and plans in a comprehensive database relying on GIS and interactive mapping and reports. This mechanism will serve as a planning and monitoring tool for the UN to better assess gaps and needs, and plan for the most adequate response for early recovery and livelihoods within the current humanitarian context. It will also allow taking into account, as early as possible, basic requirements and assets that need to be maintained in order not to compromise resilience and future development perspectives.

Finally, a large component of capacity development of local partners including NGOs, CBOs, municipalities, private sector and other local actors will be devised in order to accelerate the delivery of results in the field of early recovery and livelihoods. The main purpose is to re-orient their local initiatives towards livelihoods and early recovery type of activities. The majority of the local and national NGOs lack the capacity to implement "service-oriented" projects as opposed to the distribution of humanitarian assistance. Relevant initiatives will be based on capacity and needs assessments and will focus on various technical dimensions relating to the sector, including development of urban response plans, livelihoods and early recovery activities among others. Ultimately, the assessment, planning, implementation and monitoring mechanisms will be improved for better accountability and transparency.

It is worth noting that the activities listed below will respond to the most pressing and urgent livelihood needs of the affected population and as such represent the priorities of the ER&L sector. The sector members are adopting the following criteria for their programmatic targeting:

- Criteria 1: Impact of the crisis (high number of IDPs, deteriorated basic social services, and high poverty and unemployment, etc.)
- Criteria 2: Areas with potential for labour absorption (labour intensive interventions, cash for work) and production/revival of markets (grants, assets replacement)
- Criteria 3: Presence of NGOs and implementing partners
- Criteria 4: Areas which are relatively stable and accessible and/or areas with critical needs for beyond life-saving support'

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

STRATEGIC OBJECTIVE 3: Expand early recovery, and restoration/stabilisation of livelihoods, supporting the rehabilitation of vital public services affected by the crisis and creating an environment for humanitarian assistance to enhance resilience of affected communities

Sector objective 1:

Enhance the resilience of affected population through creation of emergency employment opportunities for rehabilitation of basic and social infrastructure (*contributing to Strategic Objectives 2 and 3*)

Top-priority activities:

Activity	Locations	Indicator	Target
Establish and implement Cash for work and labour intensive schemes for debris and solid waste management in shelters, neighboring areas and host communities	Aleppo, Hama, Hassakeh, Tartous, Homs, Lattakia, Damascus, Rural Damascus, Deir Ezzor	<ul style="list-style-type: none"> • Number of jobs created and/or work-days • Number of workers employed • Number of properties with safe access after rubble removal • Tons of solid waste removed • Tons of rubble removed • Number of neighbourhoods where support to the restoration of SWM has led to improved service level 	<ul style="list-style-type: none"> • 4000 jobs opportunity created through solid waste removal and disposal • At least 20 neighbourhoods in 4 governorates supported for SWM
Establish and implement cash for work and labor intensive schemes for the restoration and rehabilitation of damaged infrastructure in relatively stable areas, areas of returns and hosting communities	Aleppo, Hama, Hassakeh, Tartous, Homs, Lattakia, Damascus, Rural Damascus, Deir Ezzor	<ul style="list-style-type: none"> • Number of jobs created • Number of workers employed • Number of basic infrastructure repaired and functional • Number of maternal health centres rehabilitated • Number of population having access to RH services 	<ul style="list-style-type: none"> • 5200 beneficiaries (men and women) targeted through cash for work programme • At least 20 basic infrastructure facilities repaired • 4 maternal health centres repaired • At least 500,000 population having better access to reproductive health services
Establish and implement cash for work and labour intensive schemes for the rehabilitation of damaged critical on-farm irrigation canals	Hama Homs Hassakeh Deir ez Zor	<ul style="list-style-type: none"> • Kilometres of irrigation canals rehabilitated • Number of people employed • Hectares a of land irrigated and productive 	<ul style="list-style-type: none"> • 15,000 person employed

Sector objective 2:

Strengthen the coping mechanisms of affected population through restoration of disrupted livelihoods

Top-priority activities:

Activity	Locations	Indicator	Target
Support self-employed, micro and small-scale enterprises through grants, loans and assets replacement with particular focus on vulnerable groups	Aleppo, Hama, Hassakeh, Tartous, Homs, Lattakia, Damascus, RD, Deir Ezzor	<ul style="list-style-type: none"> • Number of beneficiaries receiving loans • Number of beneficiaries receiving start-up grants • Number of businesses revived 	<ul style="list-style-type: none"> • 4,000 beneficiaries (individuals and local small businesses targeted with assistance)
Support local market rehabilitation and restoration of productive industrial and agricultural infrastructure facilities aiming at reviving local economy	Aleppo, Hama, Hassakeh, Tartous, Homs, Lattakia, Damascus, Rural Damascus Deir Ezzor	<ul style="list-style-type: none"> • Number of families/individuals benefiting from assets and tools replacement • Number of households provided with essential farming inputs • Number of restored productive facilities 	<ul style="list-style-type: none"> • At least 5 market places rehabilitated and restored • At least 20 productive facilities supported and restored • At least 5,000 households supported
Develop and implement tailored short-term vocational and skills development trainings as per emerging market needs, including job placements	Aleppo, Hama, Hassakeh, Tartous, Homs, Lattakia, Damascus, Rural Damascus Deir Ezzor	<ul style="list-style-type: none"> • Number of individuals receiving vocational training • Number of trainees initiating a new business or enrolling in new productive activities 	

Sector objective 3:

Enhance the resilience of the vulnerable groups (including youth, female headed households, elderly, Palestine refugees and persons with disability) through targeted rehabilitation and livelihoods support

Top-priority activities:

Activity	Locations	Indicator	Target
Develop and implement Integrated rehabilitation program for PwD offering various services such as disability aids, physiotherapy, livelihoods support...	All	<ul style="list-style-type: none"> • Number of Persons with disability that benefitted from integrated rehabilitation services • No. of PwD benefitting from livelihood support • Nb of production workshops established • Nb of PwD receiving physiotherapy sessions • Nb of PwD receiving disability aids 	<ul style="list-style-type: none"> • One needs assessment for disability aid finalized • 3000 persons with disability benefit from disability aids and physiotherapy sessions • 2000 persons with disability benefitting from vocational training and grants
Develop and implement Cash for work, assets support, grants and toolkits provision and vocational training for women	All	<ul style="list-style-type: none"> • Number of female headed households (including Palestine refugees) that benefitted from assets and tools replacement and cash for work initiatives • Number of women receiving vocational training • Number of female trainees initiating 	<ul style="list-style-type: none"> • 1000 female headed households targeted with assets replacement and emergency employment and income generating activities

Activity	Locations	Indicator	Target
		a new business or enrolling in new productive activities	
Develop and implement Livelihood support to vulnerable population through establishment of kitchen gardens and backyard poultry	Dara'a, Rural Damascus, Homs, Hama, Tartous, Latakia	<ul style="list-style-type: none"> Quantity of vegetable packages distributed Number of gardens established Quantity of poultry packages distributed 	30,000 households (210,000 individuals)
Develop and implement participatory youths-led community-based activities aiming at promoting social cohesion	Tartous, Latakia, Hama, Rural Damascus, Aleppo	<ul style="list-style-type: none"> Number of youths involved in community-based activities Number of youth led initiatives conducted Number of intra and inter-communal activities initiated Number of youths networks established 	<ul style="list-style-type: none"> 50,000 youth (boys and girls) engaged in community based activities and innovative inter and intra communal activities At least 10 youths led community based activities conducted At least 2 youths networks established and maintained
Develop the capacities of national and local stakeholders, public entities to protect and revitalize the Syrian cultural sites and artifacts		<ul style="list-style-type: none"> Number of training sessions conducted targeting concerned stakeholders 	

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Sector objective 4:

Strengthen the assessment, planning, implementation and monitoring capacities of international, national and local partners for coherent and coordinated early recovery and livelihoods response

Top-priority activities:

Activities	Locations	Indicator	Target
Maintain and strengthen the ER&L sector coordination mechanisms	ALL	<ul style="list-style-type: none"> Number of ER&L meetings convened 	<ul style="list-style-type: none"> 2 ER&L meetings per month
Develop the capacities of partners on ER&L and resilience based approach		<ul style="list-style-type: none"> Number of partner agencies (UN, INGOs) and local associations and actors involved in ER&L Number of joint initiatives conducted to expand ER&L activities Number of trainings and workshops on ER&L and resilience based approach 	<ul style="list-style-type: none"> At least 20 active and operational partners in ER&L At least 2 joint initiatives conducted At least two workshops on ER&L and resilience based approach conducted for UN agencies, INGOs, local NGOs and local partners
Conduct targeted livelihoods and damage assessment	ALL	<ul style="list-style-type: none"> Number of area-based livelihoods and damage assessments conducted 	<ul style="list-style-type: none"> One area-based livelihoods and damage assessment conducted
Conduct and regularly update		<ul style="list-style-type: none"> Quarterly updates on the Impact 	<ul style="list-style-type: none"> in 14 governorates

Activities	Locations	Indicator	Target
assessments and studies focusing on the impact of the crisis (macro and micro level)		of the Crisis	<ul style="list-style-type: none"> 4 quarterly updates of the Impact of the Crisis report
Develop and regularly update an interactive database capturing needs, priorities and changing trends in impacts of the crisis on different socio-economic sectors	ALL	<ul style="list-style-type: none"> Database established Number of reports and maps generated from the database 	<ul style="list-style-type: none"> One comprehensive database established Quarterly reports and maps generated based on available info on livelihoods
<p>Develop urban and neighborhoods plans and integrated support for priority urban neighborhoods</p> <p>Develop area-based response plans to address the emerging needs of the affected population engaging all concerned parties</p>	Homs, Aleppo, Lattakia, Tartous, Rural Damascus, Hama, Hassakeh	<ul style="list-style-type: none"> Number of urban plans and neighbourhood action plans developed Number of neighbourhood and local coordination mechanisms established No. of comprehensive area based initiatives informed by area based response plans. 	<ul style="list-style-type: none"> 6 urban plans developed in 6 major cities in the Governorates of Homs, Aleppo, Lattakia, Rural Damascus, Hama At least 20 area-based initiatives developed based on the area-based response plans
<p>Build the capacities of urban stakeholders, private sector, charities and professionals in development of urban response plans and execution</p> <p>Develop the capacities of municipalities in solid waste management and other service delivery mechanisms</p> <p>Develop and implement a capacity development programme targeting NGOs and local associations working in the field of ER&L</p>		<ul style="list-style-type: none"> Capacity assessment of NGOs, local actors and municipalities for ER&L initiatives and service delivery Number of NGOs and local partners benefitting from the CD programme A standard training curriculum is made available to NGOs and local associations working in the field of ER&L 	<ul style="list-style-type: none"> One capacity assessment exercise finalized A standard training curriculum is developed and made available to NGOs and local associations working in the field of ER&L At least 100 NGOs and local partners trained on ER&L methodologies and initiatives

Projects

Government body	Ministry of Local Administration (MOLA)
Appealing Agency	UNITED NATIONS HUMAN SETTLEMENTS PROGRAMME (UN-HABITAT) (UN-HABITAT)
Project title	Community grants to address priority infrastructure and basic service needs in 5 cities
Objectives	<ol style="list-style-type: none"> Enhanced resilience of 20 neighbourhoods in 6 heavily affected cities through quick impact projects to address priority needs identified through neighbourhood plans Increased capacity of 5 local authorities in 6 heavily affected cities to prioritize needs, coordinate interventions and monitor implementation of humanitarian assistance programmes
Beneficiaries	Total: 120,000 24 neighbourhoods as direct beneficiaries of community grants. 120,000 IDPs and affected non-IDP with local coping options, guidelines and training, 240 neighbourhood/local development committee members trained, 120 local authority officials trained Children: 72,000 Women: 24,000
Participants	MOLA, NGOs,
Budget (\$)	\$2,796,980

Government body	Ministry of Health (MoH)
Appealing Agency	UNITED NATIONS POPULATION FUND (UNFPA) UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Rehabilitation of maternal health centre in affected areas
Objectives	Support rehabilitation of maternal health centre to strengthen delivery of life-saving reproductive healthcare services including emergency obstetric care and family planning
Beneficiaries	Total: 600,000 women and men of RH age Women: 500,000 Other group: 100,000 men
Participants	MOH
Budget (\$)	\$3,250,000
Government bodies	Ministry of Social Affairs, Ministry of Local Administration, municipalities
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Enhancing service delivery, early recovery and livelihood programming, planning and management among local NGOs in Syria
Objective	To strengthen the assessment, planning, response and monitoring capacities of international, national and local partners in the early recovery and livelihoods field for coherent and coordinated response.
Beneficiaries	Total: 50 Local NGOs workers taking into consideration gender balance Women: 25
Participants	MOSA, SARC participating International and National NGOs
Budget (\$)	\$450,789
Government bodies	Ministry of Social Affairs, Ministry of Local Administration, municipalities
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency Livelihoods and Cash for Work Support to Female-Headed Households, Persons with Disability and Other Persons with Special Needs
Objective	To provide targeted rehabilitation and livelihoods support to vulnerable groups including female headed households and persons with disability.
Beneficiaries	Total: 1,370 Displaced and affected population in all governorates in Syria, Children: 411 Women: 685
Participants	MOSA, SARC participating International and National NGOs
Budget (\$)	631,104
Government bodies	Ministry of Social Affairs, Ministry of Local Administration, municipalities
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Restoring coping mechanisms of the most vulnerable affected families and individuals affected by the crisis in Syria
Objective	To provide emergency support and restoration of disrupted livelihoods to enhance community resilience (through market rehabilitation, assets replacement, start-up grants, vocational training and micro-financing)
Beneficiaries	Total: 6,064 Displaced and affected population in all governorates in Syria, Children: 1,308 Women: 3,032
Participants	MOSA, SARC participating International and National NGOs
Budget (\$)	\$1,781,075

Government bodies	Ministry of Social Affairs, Ministry of Local Administration, municipalities
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Emergency rehabilitation and repair of essential community facilities through community participation and cash for work schemes in selected areas in Syria
Objective	To create emergency employment opportunities for rehabilitation of basic and social infrastructure
Beneficiaries	Total: 11,500 Displaced and affected population in all governorates in Syria, Children: 3,450 Women: 5,750
Participants	MOSA, SARC participating International and National NGOs
Budget (\$)	\$1,339,486
Government bodies	Ministry of Agriculture and Agrarian Reform (MAAR)
Appealing Agency	FOOD & AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)
Project title	Emergency response to restore/sustain livelihoods of vulnerable households affected by the crisis in the Syrian Arab Republic.
Objective	Enhance availability of and access to minerals and protein rich foods of internally displaced people, vulnerable host communities, and women-headed households, through backyard poultry and vegetable production
Beneficiaries	Total: 210,000 Beneficiary selection will specifically target women, internally displaced poor host communities and other vulnerable groups Children: 84,000 Women: 107,100
Participants	Ministry of Agriculture and Agrarian Reform (MAAR), Ministry of Water Resources, Syrian Arab Red Crescent (SARC), and in cooperation with CBOs and local NGOs
Budget (\$)	\$7,500,000
Government bodies	Ministry of Agriculture and Agrarian Reform (MAAR)
Appealing Agency	FOOD & AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)
Project title	Support of agriculture based livelihoods through implementation of Cash for Work and labour-intensive schemes for the rehabilitation of damaged critical on-farm irrigation canals in severely affected areas of Hama, Homs, Hassakeh, Deir ez Zor
Objective	1. To support crisis-affected population through cash transfer intervention 2. To rehabilitate basic irrigation infrastructure for immediate availability of irrigation water to resume food production.
Beneficiaries	Total: 105,000 internally displaced, Children: 42,000 Women: 53,550
Participants	Ministry of Agriculture and Agrarian Reform (MAAR), Ministry of Water Resources, Syrian Arab Red Crescent (SARC), and in cooperation with CBOs and local NGOs
Budget (\$)	\$5,400,000
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST
Project title	Strengthen coping mechanisms and early recovery activities through microloans for vulnerable Palestine Refugees and Syrians
Objective	1) Support the resilience and early recovery activities of vulnerable Palestine refugees and Syrians through provision of sustainable microloans; 2) Generate income and employment for vulnerable Palestine refugees and Syrians through support to micro and small scale enterprises; 3) Support to local market rehabilitation and restoration of local manufacturing and agricultural economies
Beneficiaries	Total: 6,000 Individuals Children: 22,000 Women: 20,000
Participants	GAPAR
Budget (\$)	\$3,885,000

Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Emergency employment programme for basic and social infrastructure rehabilitation including rubble removal
Objective	Based on the UNDP Early Recovery and Livelihoods strategy, this project will strengthen the resilience of the Syrian affected population and prevent further deterioration of the socio-economic and living conditions through the creation of emergency employment opportunities while improving the living conditions and facilitating access to better basic and social services
Beneficiaries	Total: 5,200 workers/families
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$13,000,000
Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Restoration of disrupted livelihoods programme for enhanced community resilience
Objective	Strengthen the coping mechanisms of affected population and restore their disrupted livelihoods through tools replacement/provision, vocational training and cash for business restoration in target areas
Beneficiaries	Total: 4,000 owners of local businesses
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$10,000,000
Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Emergency employment programme for improved solid waste management
Objective	Strengthen the resilience of the IDPs and affected population and improve their living conditions, through the creation of emergency employment opportunities for solid waste removal and disposal and alleviate health and environmental hazards in target areas
Beneficiaries	Total: 4,000 workers residents of targeted neighbourhoods
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$6,000,000
Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Emergency livelihoods support to female headed households
Objective	To improve the livelihoods of the households that lost their main income earner and the female headed households in the Governorates of Aleppo, Hama, Hassakeh, Tartous, Homs, Lattakia, Damascus, RD, Deir Ezzor
Beneficiaries	Total: 2,500 female headed household
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$5,000,000

Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	An Integrated rehabilitation programme for persons with disability
Objective	Enhance the resilience of the persons with disabilities through targeted rehabilitation and livelihoods support adopting an integrated rehabilitation approach to disability, starting from the provision of disability aid and the related rehabilitation services to vocational training, micro grants and production workshops in target Governorates
Beneficiaries	Total: 5,000 Persons with disability
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$2,000,000
Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Early Recovery and Livelihoods related macro and micro level assessments
Objective	Conduct macro and micro level assessments related to early recovery and livelihoods (i.e. impact, damage, livelihoods) to enable better design and implementation of early recovery and livelihoods response
Beneficiaries	Total: 1,000,000 affected population
Participants	MOSA, MoLA, Moa, Participating INGOs and Local NGOs
Budget (\$)	\$1,000,000
Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Capacity development of NGOs, CBOs and local actors in the field of ER&L
Objective	Enhance the ER&L planning and implementation capacities of NGOs/CBOs to engage in the early recovery process
Beneficiaries	Total: 150 NGOs, CBOs, local entities
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$1,000,000
Government bodies	Ministry of Social Affairs (MOSA)
Appealing Agency	UNITED NATIONS DEVELOPMENT PROGRAMME (UNDP)
Project title	Enhance social cohesion through youth led community based activities
Objective	Enhance community resilience and ensure social cohesion among affected youth groups through the provision of psychosocial support and involvement in community based activities and drama therapy in target governorates
Beneficiaries	Total: 50,000 youth
Participants	MOSA, Participating INGOs and Local NGOs
Budget (\$)	\$1,300,000
Government bodies	Ministry of Culture
Appealing Agency	UNITED NATIONS EDUCATIONAL, SCIENTIFIC AND CULTURAL ORGANIZATION (UNESCO)
Project title	Emergency measures to be taken to protect heritage sites and to deter illicit trafficking of cultural items
Objective	Protect and revitalize the Syrian cultural sites and artefacts
Beneficiaries	local and national protectors of cultural heritage
Participants	SARC, Ministry of Culture, local NGOs
Budget (\$)	\$2,500,000

COORDINATION SECTOR



Lead agency: Office of the Resident and Humanitarian Coordinator (RCO)
Contact information: Yacoub El Hilo (yacoub.elhilo@one.un.org)
Government Counterpart: Ministry of Foreign Affairs and Expatriates, High Relief Committee



ORGANISATIONS IN NEED

101



ORGANISATIONS TARGETED

101



REQUIREMENTS (US\$)

50 million



OF PARTNERS

All UN agencies, INGOs, Local NGOs

Strategy

The implementation of this Response Plan, in will be undertaken under the leadership of the Office for the Resident and Humanitarian Coordinator, coordination.

Given the scale and complexity of the humanitarian crisis in Syria, it is critical to ensure the delivery of an effective, coordinated and principled humanitarian response and to ensure that urgent needs are addressed across the various sectors.

In 2014, the Humanitarian Country Team (HCT) under the leadership of the Resident and Humanitarian Coordinator will continue to advocate for the protection of civilians and unhindered access to affected populations to facilitate speedy and effective response to the humanitarian crisis. The HCT will also address gaps needs analysis and assessment, emergency preparedness and contingency plan; and strengthening the operation and delivery of humanitarian convoys.

Humanitarian presence will be strengthened through the establishment of additional UN hubs, advocacy for the increase in the number of INGOs and addressing of bureaucratic challenges through active engagement with the Government Furthermore, attention will also be provided to joint programming and integrated humanitarian interventions in specific areas / sectors.

STRATEGIC OBJECTIVE 1: Advocate for the protection of civilians, and in particular of those with specific vulnerabilities and prioritize their needs in accordance with principles of international law, international humanitarian and human rights law.

Sector objective:

Advocate for the protection of civilians.

Top-priority activities:

Activity	Locations	Indicator	Target
Produce regular humanitarian updates on the situation of civilians in affected areas	All	# Number of humanitarian updates	24

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Cluster objective 1A:

Contribute to an effective resource mobilisation strategy

Top-priority activities:

Activities	Locations	Indicator	Target
Support the development of a common response plan to support response to immediate emergency needs	All	SHARP 2014 revised at Mid-Year	1 (or more depending on emerging needs)
		Number of meetings and level of participation	Over 250, including in 5 humanitarian hubs and at national level.
Local and International NGO's supported to access ERF	All	Number of NGOs accessing ERF funding	12

Cluster objective 1B:

Strengthen inter-agency convoys to deliver timely assistance to affected populations in hard-to-reach areas, frequent field missions and regular joint assessment

Top-priority activities:

Activities	Locations	Indicator	Target
Coordination of inter-agency convoys targeting hard-to reach areas	All	Number of inter-agency convoys / number of people reached	Over 70 /

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Cluster objective 2A:

Strengthen the capacity of local and international NGOs to effectively respond to humanitarian needs

Top-priority activities:

Activity	Locations	Indicator	Target
Training of local NGOs on humanitarian principles and humanitarian response	5 Hubs locations	Number of NGOs trained	70

STRATEGIC OBJECTIVE 5: Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

Cluster objective 3:

Facilitate timely assessments and provision of resources to support humanitarian response

Top-priority activities:

Activities	Locations	Indicator	Target
Mobilize emergency funding to respond to deteriorating humanitarian crises or on-set emergencies	All	Number of partners receiving CERF and ERF Funding	12
Information management strengthened to support effective response		Joint humanitarian needs assessment conducted	2

Projects:

Government body	Ministry of Foreign Affairs & Expatriates
Appealing Agency	OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS (OCHA)
Project title	Strengthening humanitarian coordination and advocacy in Syria
Objectives	Address and alleviate the needs of the most vulnerable populations, including women and children, through enhanced coordination mechanisms.
Beneficiaries	Populations affected by the current events in Syria, UN agencies, SARC, participating local associations and international NGOs
Participants	UN agencies, SARC, participating local associations and national and international organizations
Budget (\$)	\$8,045,138
Government body	Ministry of Local Administration (MOLA)
Appealing Agency	UNITED NATIONS HUMAN SETTLEMENTS PROGRAMME (UN-HABITAT)
Project title	Rapid City Profiles and information system for improved emergency response in 20 cities
Objectives	1. Improved information and analysis of multi sectoral needs, identifying gaps in assistance and monitoring emerging trends in 20 cities most affected by the ongoing crisis 2. Strengthened urban information management systems for emergency response in Syrian Cities through information support 3. Partner with professionals, universities and municipalities to strengthen capacity to develop, manage and produce city profiles, information systems and analysis to monitor humanitarian needs and design needs based programmatic response
Beneficiaries	Total: 400,000 IDPs and host communities in 10 cities, including 40 "hot spot" neighborhoods most heavily impacted by the crisis; 100 staff in 10 local authorities; humanitarian agencies, partners, donors Children: 180,000 Women: 220,000 Other group: 100 city population in most affected cities
Participants	NGOs, MOLA and universities
Budget (\$)	\$2,183,590

Government bodies	Ministry of Social Affairs, Ministry of Local Administration, municipalities
Appealing Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
Project title	Capacity Building of SARC and National Partners on Assessments and IDP Profiling
Objective	To promote evidence-based and targeted humanitarian response in Syria through enhanced information management, and displacement tracking and monitoring.
Beneficiaries	Total: 4,250,000 displaced populations in public and unofficial shelters as well as host communities. In addition, assessing the special needs of vulnerable groups including women, children, elderly and people with disability. Children: 1,275,000 Women: 2,125,000
Participants	MOSA, SARC participating International and National NGOs
Budget (\$)	\$4,410,000
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST
Project title	Emergency repair of UNRWA facilities and collective shelters
Objective	Crisis-damaged and degraded UNRWA facilities are maintained and repaired
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$2,775,000
Government bodies	GAPAR
Appealing Agency	UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST
Project title	Management and monitoring of UNRWA emergency projects in Syria
Objective	Emergency projects covering the needs of 440,000 crisis affected Palestine refugees are effectively managed and monitored
Beneficiaries	Total: 440,000 Palestine refugees Children: 136,400 Women: 219,000
Participants	GAPAR
Budget (\$)	\$13,238,476
Government bodies	Ministry of Foreign Affairs and Expatriates
Appealing Agency	UN RESIDENT COORDINATOR'S OFFICE (UN RESIDENT COORDINATOR'S OFFICE)
Project title	Support to UN system coordination and presence countrywide
Objective	Support to UN system coordination and humanitarian operations countrywide
Beneficiaries	Populations affected by the humanitarian crisis in Syria, UN agencies, national and international NGOs, the Syrian Arab Red Crescent, and the Red Cross family
Participants	UN agencies, INGOs, SARC, and National NGOs
Budget (\$)	\$2,318,690
Government bodies	Ministry of Foreign Affairs and Expatriates
Appealing Agency	UN RESIDENT COORDINATOR'S OFFICE (UN RESIDENT COORDINATOR'S OFFICE)
Project title	Establishment of UN common premises.
Objective	Support to UN system humanitarian operations and outreach
Beneficiaries	UN agencies and partners
Participants	UN agencies
Budget (\$)	\$17,843,320

EMERGENCY TELECOMMUNICATIONS



Sector Strategy

- Access to telecommunications remains very limited inside Syria, and in many areas not available at all. Operational challenges include deteriorating security situation, licensing issues including of satellite communication and radio networks, procurement and importation of equipment, limited security telecommunications coverage across the country, restricted access due to deteriorating security, lack of reliable local infrastructure, difficulty in inter-sector coordination due to the lack of adequate communications and staff safety and security concerns due to the lack of operational COMCENS (Radio Rooms) with coverage in all operational areas. Given that the humanitarian community is planning for an increased case load in and around Syria, the ETC will accordingly be required extend its planned service provision to cater for this. However, these expansion of operations remain dependent on improved access to the affected areas, and expansion of regional operations supporting the Syria operation
- The main focus of the ETC in 2014 will be ensuring and enabling operating environment/protection of all humanitarian operations to respond to emergencies by implementing data connectivity, basic security telecommunications and their backup power in three hubs and enhance security telecommunications
- Through implementation of activities, the ETC will enable the humanitarian community to minimize risks and implement an efficient emergency response. ETC also will continue to standardize ICT platforms, provide training and procedures to avoid duplication and ensure cost effective services.

Sector Activities:

- Coordinate Emergency Telecommunications Cluster (ETC) activities in Syria in close cooperation with the humanitarian community in the wider region.
- Liaise with local authorities for importation of emergency ICT equipment and approval of licenses that may be required.
- Provide security telecommunications, voice and data connectivity services to the humanitarian community to improve operational and security environment for staff and assets.
- Maintain an information management platform for information sharing on ETC activities and other related issues.
- Provide training to humanitarian workers on the use of common telecommunications equipment and services.
- Coordinate and build preparedness capacity to ensure adequate support can be provided to any expansion of humanitarian operations.

STRATEGIC OBJECTIVE 2: Increase the provision of appropriate emergency life-saving and relief supplies for affected people in Syria, especially in the sectors of food and agriculture, water, sanitation, health, nutrition, shelter, education and essential non-food items.

Top-priority activities:

Activity	Locations	Indicator	Target
Provide security telecommunications, voice and data connectivity services to the humanitarian community to improve operational and security environment for staff and assets	Damascus , Aleppo, Homs, Qamishli	Percentage of operational areas covered by data communications services.	3
		Percentage of operational areas covered by common security telecommunications network	3
Maintain an information management platform for information sharing on ETC activities and other related issues	Web Based platform for sharing reports	- Number of Situation Reports published Global and Local	12
		Coordination meeting conducted.	24
Provide training to humanitarian workers on the use of common telecommunications equipment and services.	Damascus , Aleppo, Homs, Qamishli, Amman, Beirut	Number of UN agency and NGO staff trained in radio communications	200

STRATEGIC OBJECTIVE 5: Ensure adequate levels of preparedness to respond to further emerging humanitarian needs.

Top-priority activities:

Activities	Locations	Indicator	Target
Build preparedness capacity to ensure adequate support can be provided to any expansion of humanitarian operations.	BEIRUT , DUBAI , AMMAN	- Number of ETC kits pre-positioned and	2
		- Staff ready to be deployed	6

All other:

Activities	Locations	Indicator	Target
Build preparedness capacity to ensure adequate support can be provided to any expansion of humanitarian operations.	BEIRUT , DUBAI , AMMAN	- Number of ETC kits pre-positioned and	2
		- Staff ready to be deployed	6

Table of planned coverage per location (Will be generated by OPS once coordinated project planning is finished)

Projects:

Government bodies	Ministry of Foreign Affairs & Expatriates, Ministry of Interior, Ministry of Local Administration
Appealing Agency	WORLD FOOD PROGRAM (WFP)
Project title	Telecommunications augmentation and coordination to support Humanitarian Operations in Syria
Objective	Provide the humanitarian community with adequate Information and communications Technology (ICT) capabilities and enhanced emergency telecommunications coordination mechanisms to enable delivery of relief items to the affected population in Syria.
Beneficiaries	Humanitarian Community (UN Agencies/NGOs utilizing ETC services)
Participants	WFP, UNDSS and other UN agencies
Budget (\$)	\$1,584,010

STAFF SAFETY SERVICES



Lead agency: UN Department of Safety and Security (UNDSS)
Contact information: Sabir Mughal (sabir.mughal@undss.org)
Government Counterpart: Ministry of Interior



ORGANISATIONS IN NEED
31



ORGANISATIONS TARGETED
31



REQUIREMENTS (US\$)
4.1 million



OF PARTNERS
31

Response strategy

Following from the escalation of unrest in Syrian Arab Republic since 2011, violence continued throughout 2012/13 and has been intensified during the past months. As a result of widespread violence in/around major cities, large numbers of civilians remain in close proximity to the crisis or displaced to other part of the country including a large numbers leaving to neighboring countries. Despite high levels of insecurity, increasing hardship, lack of access to crisis areas and diverse security challenges created by continued violence UN Agencies with others humanitarian partners have been actively providing assisting where possible.

Given the widespread unrest and violence in many areas, despite limited resources the UNDSS for the safety and security of UN/humanitarian personnel has been providing security assistance enabling humanitarian response countrywide despite numerous security challenges for the safety and security of United Nations personnel, their dependents and assets in addition to meeting the security needs for humanitarian community serving in Syria. This section sets the sector strategy for 2014 in order to maintain an adequate security support for UN Hubs established for humanitarian response assistance, early recovery and development programme/activities countrywide.

The security support capacity of UNDSS in Syrian Arab Republic was designed and budgeted for a standard country Office where the program activities did not include prolonged emergency or large scale humanitarian related activities. Therefore the core security capacity will be supplemented by the proposed Security Project for Humanitarian Support, which provides for much needed additional security capacity to address the needs associated with the changing (and increasing) program needs in a very challenging field security environment due to ongoing active crisis and widespread violence, have shifted with additional demands resulting from the spread of services. It is anticipated that since the violence has spread across country, more humanitarian programs will be required and hence security support needs, coordination and liaison with the Host Government security and other entities will increase as well as increased number of program assessments for security support needs.

The sector response will ensure that humanitarian relief programs can be safely implemented and vulnerable beneficiaries are reached by creating additional capacity for security management system.

STRATEGIC OBJECTIVE 4: Enhance the operational capacity of national and international humanitarian responders and support existing local and community coping mechanisms.

Activities	Locations	Indicators	Targets
Establishment and strengthening of security support in UN Hubs	Damascus, Tartous, Homs, Aleppo, Qamishly, and other areas to be opened	Safe access to areas of operation	All areas of operation
Strengthening of capacity on security information analysis	Damascus, Tartous, Homs, Aleppo, Qamishly, and other areas to be opened	Number of incident reports produced	(# TBD)

Activities	Locations	Indicators	Targets
Provide all staff and eligible dependents with security awareness and skill training	Damascus, Tartous, Homs, Aleppo, Qamishly, and other areas to be opened	Radio Operators successfully recruited for the 6 UN Hubs	4/7 emergency communication through Emergency Operation Centre (EOC) at each UN Hub
Provide agencies with timely and proactive structured security advice	Damascus, Tartous, Homs, Aleppo, Qamishly, and other areas to be opened	Number and frequency of security reports	TBD
Provide security awareness and training to UN/INGO and implementing partners staffs	Damascus, Tartous, Homs, Aleppo, Qamishly, and other areas to be opened	Number of INGO staff members trained or provided with awareness raising	# TBD
Facilitate safe access to humanitarian operations	Damascus, Tartous, Homs, Aleppo, Qamishly, and other areas to be opened	Number of missions facilitated	TBD

Project

Government body	Ministry of Foreign Affairs
Appealing Agency	United Nations Department of Safety and Security (UNDSS)
Project title	UN Security Support for Humanitarian Operations
Objectives	<ul style="list-style-type: none"> Establishing and strengthen security support in the Field UN Hubs for humanitarian activities to ensure safe implementation of UN programmes in specific and its implementing partners in general with an emphasis on the increased number of Humanitarian Need Projects while ensuring the security, safety and wellbeing of staff as a high priority Developing capacity of security information analysis and operations of potential threats but in addition to analyze program security support needs that will be closely coordinated or required from the Host Government/local authorities Timely and proactive sharing of security information to mitigate risks and enhance safe implementation Timely and proactive structured security advice and supporting materials for Agencies and the broader humanitarian community utilizing the existing UNDSS and UN country security management system in close cooperation with the Host Government/local authorities Timely support to staff members in distress, including through liaison with the Host Government and other entities at national and governorate/districts level Improve security awareness through security training programs with increased capacity in order to offer training to UN/INGO and implementing partners staffs as per schedule <p>Facilitate safe access to humanitarian operations in close coordination with Host Government and other entities at national and governorate/district level</p>
Beneficiaries	In support of humanitarian project beneficiaries as defined in the Syrian Humanitarian Assistance Response Plan (SHARP 2014) <ol style="list-style-type: none"> All UN International and nationals staff members and their dependents including staff members and dependents of UN implementing partners/INGOs at all UN Hubs Direct beneficiaries (IDPs) and refugees (inside Syria)
Participants	NA
Budget	\$4,021,060.00