

SYRIAN ARAB REPUBLIC **2021 NEEDS AND RESPONSE SUMMARY**

ISSUED FEBRUARY 2021



Photo by Ahmad Akacha

2021 Humanitarian Needs

Ten years into the Syria crisis, humanitarian needs are deepening. Ongoing insecurity and the compounded impact of displacement, combined with worsening socio-economic conditions characterized by sharp currency depreciation, record-level price increases and cuts in subsidized goods have prompted an almost 20 per cent increase in the number of people in need compared to early 2020 - with a disproportionate impact on women and children. As of January 2021, around 13.4 million people are estimated to require some form of humanitarian and protection assistance, including 6 million in acute need, due to a convergence of factors arising from a sharp reduction in purchasing power, the loss of essential livelihoods and income, mounting food insecurity, limited access to basic services such as health, WASH, education, nutrition and critical protection services, inadequate shelter conditions as well as the immediate and longer-term effects of the COVID-19 pandemic.

While conflict-related displacement in early 2020 generated additional needs for IDPs, returnees, host communities particularly in north-west Syria, and Palestine refugees, the severe economic deterioration and its knock-on effects on income loss and reduced purchasing power have tipped previously less affected segments of the population into humanitarian needs, and have exacerbated living conditions

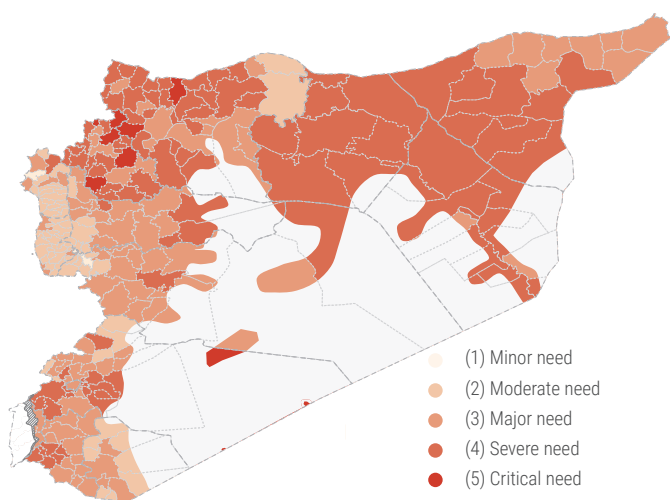
for those with pre-existing humanitarian needs. While there are significant nuances by geography and population group, the principal, often inter-linked drivers of need in Syria at the start of 2021 are growing food insecurity; loss of income and livelihoods; lack of and increasingly unaffordable critical basic services, including health care, safe water provision, education and protection services; a wide array of specific protection risks and needs; and inadequate and unaffordable shelter/housing. These findings are corroborated by preferences expressed by communities: when asked, Syrians prioritize access to food as by far their number one need, followed by livelihood and income support, and NFI and shelter assistance¹.

Needs analysis and related data in this document are based on the 2021 Humanitarian Needs Overview (HNO) for Syria. The 2021 HNO was informed by several assessments, including the Multi-Sector Needs Assessment (implemented country-wide at household level in September/October 2020, complemented by key informant interviews); household-level assessments by the WASH and Food Security and Agriculture Sectors, respectively; key informant-based assessments by the Early Recovery Sector and complemented by regular needs and operability monitoring by the Health, Nutrition and Child Protection Sectors, respectively, and by UN Sector Lead Agencies.

1. Multi-Sector Needs Assessment (MSNA), October 2020

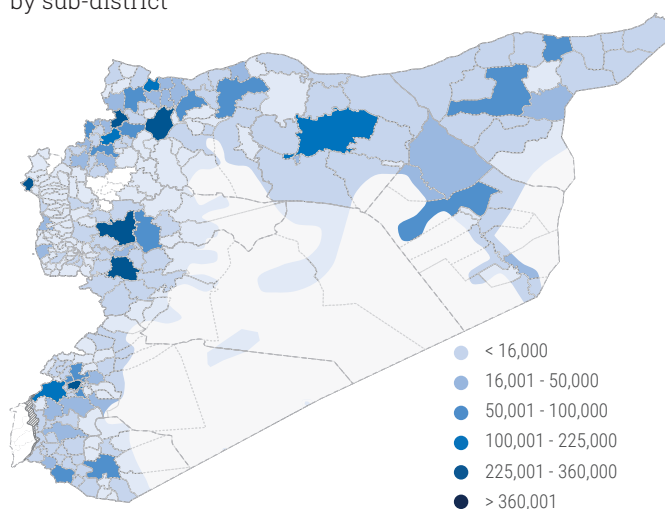
Inter-Sector Severity of Needs 2021

by sub-district



Distribution of People in Need (PIN) at Inter-Sector Level

by sub-district



PEOPLE IN NEED 2021 (DRAFT)

13.4 Million

PIN by Severity Category*

MINIMAL	STRESS	SEVERE	EXTREME	CATASTROPHIC
0.01 M	0.62 M	6.76 M	4.51 M	1.48 M

By Gender

	People in Need	% PIN
Male	6.51M	48.7%
Female	6.87M	51.3%

By Age Groups

	People in Need	% PIN
Children (0 - 17)	6.08M	45.4%
Adults (18 - 60)	6.74M	50.4%
Elderly (60+)	0.56M	4.2%

By Population Groups

	People in Need	% PIN
Internally displaced people	6.7M	50.1%
Returnee	0.32M	2.4%
Resident	6.36M	47.5%

	People in need	% PIN
Persons with disabilities	3.34M	24.9%

2020 and Draft 2021 PiN/acute PiN

Governorate	2020	2021	
Total	11.06 M 4.65 M	13.38 M 5.99 M	
Aleppo	2.47 M 0.90 M	2.73 M 1.54 M	
Al-Hasakeh	0.7 M 0.36 M	0.78 M 0.46 M	
Ar-Raqqa	0.5 M 0.36 M	0.53 M 0.53 M	
As-Sweida	0.17 M -	0.20 M -	
Damascus	0.70 M 0.46 M	1.10 M -	
Dar'a	0.62 M 0.35 M	0.66 M 0.24 M	
Deir-ez-Zor	0.50 M 0.40 M	0.56 M 0.48 M	
Hama	0.46 M 0.01 M	0.83 M 0.03 M	
Homs	0.54 M 0.10 M	0.81 M 0.02 M	
Idleb	1.85 M 1.18 M	2.18 M 1.94 M	
Latakia	0.41 M -	0.64 M -	
Quneitra	0.06 M 0.05 M	0.06 M -	
Rural Damascus	1.8 M 0.48 M	1.98 M 0.75 M	
Tartous	0.28 M -	0.32 M -	

* Joint Intersectoral Analysis Framework (JIAF), August 2020, please see https://assessments.hpc.tools/sites/default/files/km/03.HPC_2021-JIAF_Guide.pdf

2021 Needs and Response Summary

Context and Impact :

- **2,059** documented civilian casualties in 2020, more than half were children (OHCHR)²
- **10%** increase in IDPs from Aug 2019 to Aug 2020, to 6.7m
- **20%** in increase in IDPs sheltering in camps and informal settlements from January 2020 to January 2021, to 1.8m
- **448,019** spontaneous IDP returns in 2020
- **78%** drop in value of Syrian currency in just one year (to SYP 3,030/US\$1 on informal market (WFP, December 2020)).
- **70%** of sewage being discharged untreated and at least half of the 42 built up sewage treatment plants not fully functional
- **236%** increase in average price of food basket in December 2020 compared to Dec 2019, 29 times pre-crisis levels
- **200,000-300,000** jobs lost since March 2020 (United Nations, COVID-19 Socio-Economic Impact Assessment, August 2020)
- Only **58%** of hospitals and **53%** of primary health care centers are fully functional across Syria
- **50%** estimated decrease in remittances by August 2020 (United Nations, Socio-Economic Response Plan, August 2020)
- **2 million** Syrians now estimated to live in extreme poverty.
- In North-west Syria, **2.4 million** people are reached on a monthly basis through cross-border humanitarian assistance.

Resulting Humanitarian Needs³ :

- **5.9 million** people across Syria are in need of shelter assistance.
- At least **12.4 million** people are estimated to be food insecure.
- **2.4 million** children out of school.
- **82%** of Syrians report a significant deterioration in their ability to meet basic needs since August 2019
- **71%** of Syrians have increased debt to survive since August 2019
- **65%** of Syrians report currently being unable to meet the basic needs of their household

- **27%** of households report that children show signs of psychological distress – almost double the figure in 2020 (**14%**).
- Top **3** priority needs as expressed by households:
 1. Access to food/nutrition (**71%**)
 2. Livelihood support (**50%**)
 3. Winterization/shelter support (**30%**)

People in Need Figures by Sector (in million)



2. Civilian casualties and incidents included are not comprehensive but rather reflect what OHCHR could verify to reflect human rights concerns, patterns and the impact of the armed conflict and violence on civilians in Syria. Actual civilian casualties could be higher.

3. MSNA, October 2020

* Out of 14.2 million people in need of some form of food and agriculture assistance, 12.4 million people are estimated to be food insecure.

2021 Response and Immediate Priorities

2021 HRP Objectives and Multi-Sectoral Response Priorities⁴

At the time of publication, humanitarian partners in Syria are in the process of developing the 2021 Humanitarian Response Plan (HRP).

Finalization of the HRP is foreseen by the end of April, including a breakdown of financial requirements by sectors, based on an estimated 700 individual projects by HRP partners across the country.



Strategic Objective 1:

Save lives

Strategic Objective 1: Provide life-saving humanitarian assistance to the most vulnerable people with an emphasis on those in areas with high severity of needs.

Specific Objectives:

- 1.1 IDPs in planned camps and last resort self-settled/spontaneous sites, collective and reception centers regularly access quality life-saving and sustaining basic services and humanitarian assistance.
- 1.2 The health, nutrition and food security status of pregnant and lactating women (PLW) and children under 5 years of age is improved.



Strategic Objective 2:

Enhance protection

Strategic Objective 2: Enhance the prevention and mitigation of protection risks and respond to protection needs through supporting the protective environment in Syria, by promoting international law, International Humanitarian Law (IHL) and International Human Rights Law (IHRL) and through quality, principled assistance.

Specific Objectives:

- 2.1 Specific protection needs are mitigated through the provision of quality and integrated protection services.
- 2.2 The threat posed by explosive ordnance is mitigated to ensure safe access to service and inclusive protection environment.



Strategic Objective 3:

Increase resilience and access to services

Strategic Objective 3: Increase the resilience of affected communities by improving access to livelihood opportunities and basic services, especially among the most vulnerable households and communities.

Specific Objectives:

- 3.1 People live with improved access to adequate housing and with improved access to basic service.
- 3.2 Enhance access to market-based livelihood opportunities and production so as to reduce reliance to negative coping mechanisms.

Humanitarian responders will continue to leverage and advocate for all response modalities—cross-border and cross-line—to access people in need. The UN and partners aim to target 10.5 million people with humanitarian assistance in 2021, an increase from 9.5 million, at an estimated cost of US\$4.2 billion, a ten percent increase compared to 2020⁵.

3. The Strategic Objectives and Specific Objectives are currently being developed and will be updated in the HRP 2021 document.

5. Global Humanitarian Overview 2021: <https://gho.unocha.org/syria>

Programmatic Priorities During Q1 (Jan-Mar) 2021

Key trends in needs by sector, as identified in the 2021 HNO, are summarized below. 2021 financial requirements by sector for the 2021 HRP will be finalized in March/April 2021.

Protection

Key Trends in Needs :

PiN: 13.1 million

- Each year of the crisis has a compounding effect on protection needs, and increases complexity creating longer lasting impact of unmet needs.
- In each governorate of Syria, there are at least five or more key protection issues perceived to be prevalent⁶.
- Restrictions on freedom of movement were reported in 65 per cent of assessed communities, lack and loss of Civil Documentation in 61 per cent of assessed communities, and Housing Land and Property (HLP) issues in 50 per cent of assessed communities. These have cross-cutting impacts on ability of people to access rights, assistance, and ability to return.
- Deepening poverty continues to fuel harmful coping mechanisms and strain the capacities of families and communities to protect children, particularly adolescent girls and boys: child labor, including its worst forms is reported in all governorates.
- Children comprise almost half of the affected population. Grave child rights violations remain a significant concern, including in areas where hostilities have declined, with children at risk of being killed or injured, recruited and used in hostilities, tortured, detained, abducted and sexually abused.
- Armed conflict, economic deterioration, displacement and the COVID-19 pandemic all have a gendered and disproportionate impact on girls and women in Syria, which manifests itself through different forms of gender-based violence (GBV), especially early/forced marriage, domestic violence, sexual harassment and/or violence, denial of resources, and psychological and/or physical abuse, in all walks of life.

- In parts of the country, the civilian population is still exposed to ongoing and new hostilities, resulting in civilian casualties and forced displacements as people seek safety. Country-wide, the prolonged and widespread use of weaponry has left behind a range of explosive ordnance, each posing their own risks worsened with each subsequent year of the crisis.
- Refugee returns to Syria, still continue and may increase in 2021, requiring further assistance to protection needs of returnees, including for IDP returnees.
- Findings of a socio-economic assessment that UNRWA in Syria conducted in June 2020 reflect that Palestine refugees in Syria, being already one of the most vulnerable populations in the country, are heavily impacted by the current COVID-19 pandemic and economic crisis.

Immediate Response Priorities

- Ensure Community-based approach to respond to emergency situations through the rapid deployment of mobile teams to address urgent protection needs arising from renewed hostilities or sudden displacement as well as taking initial measures to ensure basic protection and risk mitigation.
- Provide integrated protection services via community-based facilities and outreach activities such as case management and Referral, Mental health and psychosocial support (MHPSS), Legal assistance including civil documentation, HLP, community and youth-based initiatives to foster social cohesion and community participation and inclusion.
- Expand focus on persons with disabilities and the elder persons.
- Expand protection monitoring and needs assessments to understand protection trends and identify individuals with specific protection needs.
- Increase individual protection assistance to achieve protection outcomes through preventive and responsive material and financial assistance to households and individuals at risk.

Mine Action (MA AoR):

- Explosive ordnance contamination remains a major protection concern, severely impacting the lives and livelihoods of the population and further amplifying the social and economic crisis aggravated by the COVID-19 pandemic
- While explosive ordnance risk education continues to be a key life-saving activity to for the vulnerable people to adopt safe behavior to minimize risks posed by explosive

6. MSNA 2020 - Community Level Assessment - eight key Protection issues assessed: civil documentation, HLP, early marriage, family separation, explosive hazards, kidnapping and abduction, child labour preventing school attendance, movement restrictions.

2021 Needs and Response Summary

contamination, clearance is the only way forward to permanently remove the explosive ordnance threat on communities at risk in Syria.

- Ensure all pillars of mine action response (risk education, victim assistance, survey and clearance) are implemented as they are critical to reducing the risk and impact of the explosive hazard contamination on the population.

Child Protection (CP AoR):

- Effective CP response requires predictability and consistency. Ensuring flexible, unrestricted, multi-year funding will be key in meeting the immediate and longer-term protection needs of children across Syria.
- Further advance advocacy and service delivery to address grave child rights violations, including, but not exclusively, within the Action Plan on Children Associated with Armed Forces and Groups (CAAFAG).
- Provide more tailored responses based on disability, sex and age, recognizing adolescence as a tipping point for exposure to greater range of protection threats.
- Continue to adapt and innovate existing activities to respond to the impact and challenges presented by COVID-19. Expand on the enhanced collaboration between the MA and CP AORs to respond to children impacted by explosive ordnance.

Gender Based Violence Area of Responsibility (GBV AoR):

- Scale up support for multi-sectoral GBV response services to include emerging needs due to COVID-19, including case management, psychosocial support, cash assistance/emergency case funds, referrals, and income generating ventures to foster greater resilience among women and girls.
- Ensure continuity of services at existing Women and Girls Safe Spaces, often the only place where women and girls can access prevention and response GBV services in a safe and confidential manner.
- Tailor GBV programmes for wider accessibility, particularly in light of COVID-19, and adopt a combination of in-person and remote service provision.
- Need continuous capacity building given the high turnover rate among GBV staff in certain locations, particularly for the provision of specialized services.
- Localization and the terms of The Grand Bargain should be factored into the response, with greater support given to local, women-led organizations.
- Distribution of dignity kits remains a life-saving and under-funded service that should be standardized throughout the response.

- GBV coordination in all areas remains a key component to ensure the provision of GBV prevention and response services to GBV survivors and women and girls at risk.



Camp Coordination and Camp Management (CCCM)

Key Trends in Needs:

PiN: 1.8 million

- The CCCM has identified close to 1,766,874 people as being in need, including an estimated 1.5 million people in the north-west and almost 266,874 in the North-east Syria (NES) living in IDP sites, often with inadequate access to basic services.
- The risk of sudden, mass displacement continues, alongside the increasing needs of those who have been displaced multiple times and/or for protracted periods. Some 56 per cent of IDP households in North-west Syria (NWS) have been displaced for five years or more, while a further 31 per cent have been displaced for one to five years.
- The majority (around 90 per cent) of IDP sites monitored by CCCM in NWS are self-settled. The prevalence of self-settled, informal sites that lack camp management systems means that the delivery of dignified protection and multi-sectoral assistance cannot be guaranteed by humanitarian actors in both NWS and NES.
- 80 per cent of people living in IDP sites monitored by the CCCM Cluster in NWS are women and children, whereas in NES this is 81 per cent. As a result, the needs for education, nutrition, maternal and child health services are prevalent.
- Incidents continue to impact IDP sites, exacerbating existing challenges and vulnerabilities. Over 100 incidents in NWS were reported in 2020 that led to loss of life and injuries, as well as damage and destruction of tents, NFIs and IDP's belongings. Fire and flood incidents continue to be the most prevalent incidents affecting IDP sites in NWS.

Immediate Response Priorities

- CCCM Cluster will continue to enable a livable environment for people displaced in the most vulnerable temporary settlements by ensuring equitable access to services and protection, while emphasizing the promotion of health, safety, and environment of collective centers, camps (spontaneous and planned), camp-like settings, and communal settlements.
- Monitor the provision of streamlined lifesaving, multi-sectoral assistance in IDP sites.
- Improve the camp management quality and accountability in IDP sites.

2021 Needs and Response Summary

- Strengthen household and communal coping strategies in IDP sites and develop exit strategies.
- Disseminate operational information on IDP figures and movements on a timely basis.
- Establish and support of camp management systems to continue monitoring provision of services and mitigating protection risks (e.g., fire management) with respective clusters.
- Building IDP resilience remains challenging due to continuous emergencies and multiple displacements experienced by most of the IDP population. The CCCM Cluster will continue its efforts in coordinating with respective clusters on resilience programming, especially with livelihood and cash interventions.



Early Recovery and Livelihoods (ERL)

Key Trends in Needs :

PiN: 11.6 million

- In 2021, ERL sector estimates 11.6 million people in need of early recovery and livelihood support. 51 per cent are estimated to be women, 45 per cent children, and 26 per cent persons living with disabilities (PLWD).
- At the end of 2020, unemployment is estimated at 50 per cent of the working-age population, and over 60 per cent of youth.
- Overall poverty is estimated close to 90 per cent, with an increase of 3-4 per cent points compared to 2019 (emergence of “working poor” category). Extreme poverty is estimated between 55 and 65 per cent.
- Safety nets are more strained than ever, with unaffordability of goods/services and negative coping mechanisms on the rise (e.g. depleting savings, reducing number and quality of meals).
- Near 75 per cent of PLWD are without access to economic, social, and medical support.
- Access to electricity remains low across the country, with less than 12 hours a day of electricity for 69 per cent of the communities.
- 74 per cent of available basic socio-economic infrastructures are damaged (53 per cent severely damaged).
- Further deterioration of the socio-economic conditions affecting IDPs, residents, and potential returnees is expected, adding to the risk of social fabric rupture.

Immediate Response Priorities

Scaling-up interventions to contain impact of COVID-19 crisis and recent economic deterioration on livelihoods, including:

- Income generating activities, such as cash-for-work schemes linked to rehabilitation works and in the form of labour-force support;
- Grants and loans to urban/rural existing Micro, Small, and Medium Enterprises (MSME) impacted by multiple shocks as well as to new entrepreneurial/manufacturing entities;
- Enhancing resilience-building through Vocational Training;

Restoring and rehabilitating services/infrastructures viable for quick resumption of economic activity and livelihoods creation, including:

- Access to electricity, including sources of renewable energy;
- Rehabilitation of basic humanitarian infrastructure such as hospitals, health care centres, and schools, as well as other labour-intensive infrastructures (e.g., markets/access ways to IDP sites);
- Enhance absorption capacity of services/infrastructures hindering the safe return of displaced people to their places of origin

Support to PLWD and female headed households (HHs):

- Scale-up mainstreaming of PLWD and female headed HHs support to enhanced access to livelihoods opportunities.

Priority will be given to areas with high severity of need, where access to basic services is most limited, with highest rate of people in need and population density, highly destroyed/impoverished, as well as where spontaneous returns/high influx of IDPs occur.



Education

Key Trends in Needs :

PiN: 6.9 million

- An estimated 6.9 million people (97 per cent children) need humanitarian education assistance with 94 per cent of school-aged children living in areas with severe, extreme or catastrophic education conditions mainly concentrated in Aleppo, Idlib and Rural Damascus governorates.
- In 2020, an estimated 2.45 million children were out of school and 1.6 million children were at risk of dropping out⁷, numbers that will certainly increase due to an overall increase in the school-aged population and the overall deteriorating situation.
- Due to the compounding impact of the 2020 situation, many

7. Ages 3-17. According to another study conducted by the Ministry of Education (2019), an estimated 1.1 million children aged six-14 are out of school.

2021 Needs and Response Summary

students are either behind in their learning, finding it difficult to return to school or at risk of dropping out. Younger children, adolescents and children with disabilities face further challenges accessing learning services due to limited availability of ECE centers⁸, secondary education services and vocational training opportunities, or education facilities that can provide inclusive education for the estimated 15 per cent of school aged children with disabilities⁹.

- Key reasons children were not going to school include, schools not being in their area, schooling not being affordable and children working to support the household
- The use of schools for non-educational purposes and other safety concerns continue to impact the safe use and availability of education services—particularly in the north.

Immediate Response Priorities

- Significant gap in early childhood education services and the lack of secondary schools continue to limit primary school graduates from continuing their learning. Access to education services in IDP camps/settlements/sites remains extremely limited.
- To ensure student retention and improved learning outcomes services need to address the cognitive and social-emotional development of children. Teachers are essential to education and continuous professional development is needed for them to meet the challenges of teaching in Syria. Additionally, there continues to be insufficient numbers of in-service teachers and thousands of in-service teachers who work without pay over a year.
- To ensure learning in safe environments, particularly given COVID-19 and other factors, new learning spaces and WASH facilities need to be established and existing spaces to be repaired and furnished. Basic winterization measures should be in place (heaters with fuel, ventilation, cemented floors, etc.).
- To ensure that out of school children can catch-up, non-formal education services must be expanded and have clear pathways to formal education, and vocational training expanded for adolescents and youth who will not return to school. The absorption capacity of the formal education systems must be expanded if pathways are expected to be effective.
- To enable families to prioritize education, the direct and indirect costs of children attending school needs to be addressed through cash and voucher-based education assistance and teaching and learning supplies, including teacher incentives provided to schools.

Food Security and Agriculture (FSA)

Key Trends in Needs :

PiN: 14.2 million¹⁰

- The situation continues to deteriorate drastically with an estimated 14.2 million people in need of some form of food and agriculture assistance, compared to 9.8 million in the previous year. The food insecurity PiN has risen by 45 per cent in the last year.
- At least 12.4 million people are estimated to be food insecure, of which 1.3 million people are considered severely food insecure. Food prices in Syria have increased dramatically in 2020 and WFP's national standard reference food basket price in November 2020 was 251 per cent higher when compared to November 2019.
- The agriculture sector, which was once a cornerstone of the Syrian economy, has been severely impacted, with half (i.e. 50 per cent) of national grain requirements met through imports.
- According to Food and Agricultural Organization (FAO), high cost and limited availability of quality crop and livestock production inputs, damaged irrigation infrastructure across the country, degradation of livelihoods and income earning opportunities, coupled with the direct and knock-on effects of Covid-19 and climate-induced shocks continue to drive more people into food insecurity.

Immediate Response Priorities

- Scale-up and sustain minimum food consumption needs, both through direct humanitarian food transfer as well as emergency livelihood support, to those under assistance and expand to the newly food insecure caseloads impacted by the socio-economic downturn and by the protracted crisis and COVID-19 across all of Syria's governorates.
- Further expand life-saving food assistance to cover the food gap of the most vulnerable population segments who have depleted all forms of coping mechanisms to secure their basic food needs, through in-kind food and, where feasible and cost-effective, market-based responses (i.e. cash transfers).
- Scale-up immediate food assistance to avoid imminent catastrophic food insecurity through in-kind and market-based responses, including support to the bread value chain to strengthen local economies and consumers' purchasing power.
- Enhance food availability and restore food stability,

8. Formal and non-formal early childhood education centers.

9. Nationwide data on disabilities captures information on people 12 years and older. As there is no dataset for children three to 17 the sector uses the rate for children between 12-17 years as a proxy. HNAP Summer 2020 Report Series.

10. Out of 14.2 million people in need of some form of food and agriculture assistance, 12.4 million people are estimated to be food insecure.

2021 Needs and Response Summary

focusing on primary food production (i.e. cereals, pulses and vegetables), livestock and poultry production, including interventions that improve access to water, which is key to food security. Support to agriculture will help address issues related to localized produce deficit.

- Stabilize livelihoods through increased funding, ensuring that returnees, IDPs and Palestine refugees are also targeted. Targeting returnees will increase resilience, promote sustainable returns, and reduce humanitarian needs and the spiraling food insecurity levels. Also key is livestock asset building and protection through emergency animal health services, provision of livestock inputs, including support to fodder production, in areas with high severity of needs, targeting livestock farmers.
- Enhance integrated programming, self-reliance and graduation of beneficiaries from life-saving assistance to longer-term livelihoods programming and nutrition.
- Adjust targeting approach to adapt to the socio-economic indicators.
- Improve the quality and impact of livelihoods programming by promoting best practices, coordination among partners and better capacity building and support to partners in the field.



Health

Key Trends in Needs :

PiN: 12.4 million

- There are over 44,000 confirmed COVID-19 cases across Syria and positivity rates ranging between 24 and 38 per cent as of mid-February 2021 while more than 2,700 health care workers reportedly fell ill in 2020, underscoring the critical need for an expanded comprehensive response to the COVID-19 pandemic.
- Essential health services are the backbone of any resilient health system yet only 58 per cent of hospitals and 53 per cent of primary health care centers (PHCs) in Syria are fully functional. The intense demands of the COVID-19 response over the course of 2020 engaged resources and capacity that normally would be expended in support of routine health services delivery. Renewed attention on essential health services – with particular focus on the 135 subdistricts, home to 12.2 million persons, with ratios of health care workers and functional PHCs below emergency standards – is required in 2021 to serve the needs of the most vulnerable¹¹.
- The removal of border crossings in Iraq and Turkey from the

UN Security Council Resolution authorizing cross-border humanitarian action further highlighted the critical need to strengthen medical supply chains across all modalities, particularly for medical consumables¹².

- With worsening economic conditions and just 58 per cent of sub-districts in the country reporting sufficient knowledge of the risks posed by COVID-19, linkages between health facilities and communities must be strengthened. Outreach and support to mothers is critical to proper care for the newborn at home, including feeding.
- Lack of robust, fully integrated disease surveillance and health information systems across the health sector response in Syria, hinders rapid detection of and response to outbreaks, as well as monitoring of health outcomes and the burden of a disease over time..

Immediate Response Priorities

- Providing access to life-saving and life-sustaining essential health services across all levels of the health system, comprising reproductive health, child health – including immunization and nutrition services, mental health, and specialized care for persons with disability and those with non-communicable diseases. Underpinning service delivery is the need to ensure referral and continuity of care – including for survivors of GBV; supply of essential medicines, medical supplies, vaccines and equipment; and availability of trained, qualified health care workers.
- Ensuring health system capacity to prepare for, detect and deliver timely response to disease outbreaks, including COVID-19. To enable a safe and effective response, the health sector must ensure adequate supply of personal protective equipment (PPE) for health care workers, while also engaging communities to prevent the spread of disease. Health actors will strengthen surveillance and laboratory capacity for all diseases of epidemic potential while focusing on COVID case management and preparing for vaccine roll out across the country.
- Laying the groundwork for a more resilient health system and expanded community based-initiatives. This includes strengthening health information systems, repairing of damaged critical health infrastructure, and bolstering linkages with communities and increasing capacity for early disease detection. Inter-sectoral efforts with nutrition, WASH and protection further enhance communities' capacity to respond to and recover from future shocks.
- The health sector remains focused on key vulnerable groups¹³ and will target areas with health severity level 3 (severe) and higher, aiming to reach those most vulnerable and most in need.

11. Including an estimated 1.41 million children under 5, 3.32 million women of reproductive age –including 498,480 women who are expected to become pregnant in 2021, more than 536,000 elder persons and 3.1 million persons with disabilities.

12. Medical consumables include pediatric medicines, psychotropic drugs, noncommunicable disease (NCD) medicines and specialized medicines for tuberculosis and leishmaniasis

13. Children under 5 years, women of reproductive age, older persons, displaced persons –including IDPs and returnees, and persons with disability

 **Nutrition**

Key Trends in Needs :

PiN: 4.9 million

- Urgent and life-saving nutrition needs for 4.9 million mothers and children in Syria are anticipated in 2021, a where most of the nutrition needs lies in high severity areas.
- Chronic malnutrition is anticipated to increase, with nearly 0.5 Million children losing their learning and developmental potentials every year in Syria.
- Prevalence of maternal anemia and maternal malnutrition is expected to continue rising due to deteriorating socio-economic conditions. During 2021, an estimated 1.2 million mothers and women at child-bearing age will continue to suffer the consequences of maternal anemia and/or malnutrition if not treated appropriately.
- It is expected that acute malnutrition among children 6-59 months in hard-to-reach areas and IDP camps will continue spiking, endangering the survival and wellbeing of nearly 90,000 children in Syria. Without appropriate care as high as 50 percent of these children might lose their lives because of acute malnutrition related complication.
- Poor dietary diversity among children as well as mothers in Syria will impact their capability to optimally breast feed their children and hence the already low levels of poor infant feeding and caring practices will continue to be evident. Poor infant feeding and caring practices will adversely deteriorate the levels of acute and chronic malnutrition among children 6-59 months in Syria. Similar effect will be potentiated by maternal anemia and malnutrition.

Immediate Response Priorities

- Scaling up the prevention and the treatment of acute malnutrition by increasing community management of acute malnutrition (CMAM), promotion of optimal infant and young child feeding and caring practices (IYCF) and age-appropriate micronutrients supplementation, including ensuring healthy and sustainable supply chain of life-saving nutrition supplies.
- Additionally, nutrition sector will increase the depth of its integrated programs with food security sector such as food-based prevention of acute malnutrition (using Fortified Foods and Lipid Nutrients Supplements), and cash-based programming, while continuing its integrative activities with health sector, such as using nutrition as entry point to scale up primary health care and maternal health.
- Finally, nutrition sector will ensure functional and high-quality nutrition surveillance systems especially among displaced and hard to reach population.

 **Shelter and Non-Food Items (SNFI)**

Key Trends in Needs :

Shelter PiN: 5.9 million

NFI PiN: 4.7 million

- The shelter situation has continued to deteriorate given the unavailability of adequate and affordable shelter, the limited response for longer-term solutions, the new challenges for communal shelters with COVID-19 and the displacement trends in NES and NWS. An estimated 31 per cent of the overall population continue to live in inadequate shelter conditions, with returnees and IDPs being the worst affected.
- The Shelter PiN increased to 5.88 million in 2021 which is a 4 per cent increase in PiN from 2020 (5.7 million).
- Access to markets and non-food items (NFIs) is undermined by the widespread economic vulnerability that is driven further by COVID-19, the drop in the Syrian Pound, diminished income opportunities, rising prices and economic restrictions. Almost 90 per cent of families reported diminished access to NFI's with unaffordability being the main driver.
- Improvements in NFI access were short-lived. The NFI PiN increased from 3.4 million by nearly one million in mid-2020 due to developments in NWS and the price fluctuations. The NFI PiN rose to 4.69 million in 2021, which is a 9 per cent increase from the revised mid-year 2020 PiN (4.33 million) and a 6.5 per cent increase from 2019 (4.4 million).

Immediate Response Priorities

- Winter assistance continues to be lifesaving as harsh winter conditions adversely affects those living in inadequate shelter such as tents, collective centers, and damaged buildings. Continued winter support in the form of blankets, fuel and warm clothes remains a priority to ensure families can live safely.
- In order to respond to urgent needs, the sectors must ensure adequate and pre-positioned contingency stock.
- Infrastructure upgrades to tented settlements particularly in NWS remains underfunded. Upgrades such as building roads, ensuring proper drainage are critical to prevent flooding during winter season, ensure safety and enable humanitarian partners to provide basic services.
- Collective centers across Syria and particularly within NES continue to be a refuge for many, the need to upgrade the privacy, protection from extreme weather and health conditions of such shelters remain a priority, specifically with the spread of COVID-19.

Water, Sanitation and Hygiene (WASH)

Key Trends in Needs:

PiN: 12.2 million

- With 36 per cent of general population relying on alternative to piped water and often unsafe water supply modalities to meet or complement their water needs, with at least 70 per cent of sewage being discharged untreated and at least half of the sewerage systems not functional, and with about 12 per cent of garbage inappropriately disposed, the WASH infrastructure and service provision in many parts of Syria require significant repair and operational support (incl. capacity building for operation and maintenance of infrastructure and on-grid electricity supply).
- Community transmission of COVID-19 is anticipated to continue in 2021, especially given low awareness of population in some areas. Therefore, mainstreaming COVID-19 response throughout all regular WASH activities is crucial to mitigate risks.
- Depreciation of Syrian currency erodes households purchasing power and subsequently spending capacity on WASH services, supplies and consumables. The overall estimated average expenditures on WASH services and supplies (water, hygiene items, garbage removal and desludging) make up to 15 per cent of household's income in some governorates or population groups like returnees (17 per cent) and could be way higher at the individual household level. Reported coping mechanisms highly undermine sectoral efforts to curb the transmission of COVID-19.

Immediate Response Priorities

- Sustain uninterrupted provision of comprehensive WASH services for 1.9 million people living in IDP sites across NWS and NES. In NWS alone, 630,000 IDPs in 429 camps urgently need continued humanitarian WASH assistance.
- Support to contingency planning and prepositioning of supplies for NW Syria in case of non-renewal of the UNSC Resolution 2165.
- In communities, continuation of rehabilitations of water and sanitation infrastructure, including solid waste management (SWM), as centralized public WASH systems are the most feasible and equitable way to provide services to the maximum number of people.
- Due to imposed coercive measures, the entire Syrian population relies on humanitarian community for chemical treatments for drinking water, requiring 600 MT of sodium hypochlorite each month.
- Support for operation and maintenance, including electricity, of critical drinking water supply infrastructure and

capacity building of technical staff. Maintain emergency preparedness and support alternative water supply options to population affected by deficient or disrupted large water supply systems, like Alouk Water Station. Additionally, continuation of operational support to 92 water stations supplying potable water to over 735,000 IDPs in NW Syria is indispensable.

- Mainstreaming COVID-19 response throughout all regular WASH activities with focus on ensuring appropriate water, sanitation and handwashing standards in IDP sites setting, strengthening WASH infection prevention and control (IPC) measures in schools, communities and health care facilities, hand hygiene promotion and a systematic approach to address behavior change are crucial to mitigate risks.

Logistics

Immediate Response Priorities

- Maintain regional Whole-of-Syria inter-agency logistics coordination and information management services.
- Continue to facilitate access to services required to fill logistics gaps, including landside transportation, air cargo transportation and warehousing
- Provide coordination support and facilitate access to common services for UN cross-border operations from Turkey into Syria, first authorized under UNSCR 2165 in July 2014.
- UN Humanitarian Air Service (UNHAS) to continue operating regular scheduled flights between Damascus, Qamishli and Aleppo for humanitarians and diplomatic missions to ensure actors have safe and reliable air access to beneficiaries.
- Develop e-learning solutions that ensure provision of capacity strengthening opportunities to augment logistics expertise.
- Updates to the Logistics Capacity Assessment (CLA) are on-going, with particular focus on cold-chain capacity, in support of a potential roll out for COVID-19 vaccines.
- Remain on standby to facilitate emergency access to fuel as a last resort.
- The cluster will undertake a thorough Gaps and Needs Assessment and draft an action plan in collaboration with partners to address needs, for example, logistics challenges for the northeast.

Common Relief Commodity Pipelines: Immediate Funding Requirements During Q1 (January - March 2021)

UN-managed relief commodity pipelines typically comprise 50 per cent of overall funding requirements in Syria Humanitarian Response Plans, many of which are centrally managed on behalf of other sector partners¹⁴. The details presented below give the status of the major pipelines, including critical funding gaps which need to be addressed by end-March to secure pipelines until July. A total of **\$359 million** is urgently required.

UN AGENCY	ITEMS (UNIT)	IN HAND	GAP	IMMEDIATE FINANCIAL REQUIREMENTS JAN-MARCH/APRIL 2021 (US\$)
UN High Commissioner for Refugees (UNHCR)	Core Relief Items (CRI) kits	10,776 kits	8,000 kits	3,100,000
	Family tents	108,000 tents	10,000 tents	2,000,000
UN Children's Fund (UNICEF)	Education supplies ¹⁵	1,048,615 US\$	Funding required to sustain current level of response until end of March 2021	6,260,000
	Family hygiene kits	75,000 kits	265,000 kits	5,460,000
	Sodium Hypochlorite (MT)	800 MT	1,000 MT	340,000
	Nutritional items ¹⁶	Funding required to sustain current level of response until end of March 2021		6,500,000
UN Population Fund (UNFPA)	Reproductive health kits	1,096 kits	619 kits	615,000
	Dignity kits	-	150,000 kits	2,900,000
	Bulk family planning commodities	136,394 items	90,000 items	400,000
World Food Programme (WFP)	School-Feedings, Livelihoods, and Nutrition, sector activities	Funding required by end March to sustain current level of response until July 2021, including monthly assistance to some 4.8 million people		183,400,000
	General Food Assistance ¹⁷			89,100,000
	UNHAS	Funding required to sustain current UNHAS operations until March 2021		1,500,000
International Organization for Migration (IOM)	Family tents	10,140 tents	5,000 tents	3,000,000
	NFI kits	11,975 kits	8,200 kits	1,500,000
	Camp infrastructure	-	-	5,500,000






14. Several NGOs also manage complementary dedicated pipelines

15. UNICEF Education Supplies include: School in a box/stationery, ECD kits, Recreation kits, Replenishment kit, Plastic tarpaulins, Tents, SLP books, Hygiene materials/soap, school furniture.

16. UNICEF nutrition items include: Ready to use therapeutic food, therapeutic milk and micronutrient supplementation.

17. WFP's general food assistance programme has a four-month lead time to import food.

2021 Needs and Response Summary

UN AGENCY	ITEMS (UNIT)	IN HAND	GAP	IMMEDIATE FINANCIAL REQUIREMENTS JAN-MARCH/APRIL 2021 (US\$)
World Health Organization (WHO)¹⁸	<i>lifesaving and life-sustaining items</i>			
	Essential medicines	700,000 US\$		3,300,000
	Emergency health kits	1,300,000 US\$	Funding gap until	700,000
	Life-saving medical consumables	1,200,000 US\$	end of March 2021	3,300,000
	Medical equipment	1,800,000 US\$		2,700,000
	<i>COVID-19 supplies</i>			
	Diagnostic supplies	1,700,000 US\$		2,000,000
	PPE and IPC supplies	1,200,000 US\$	Funding gap until	4,300,000
	Medical equipment	1,600,000 US\$	end of March 2021	4,900,000
	Laboratory equipment	1,500,000 US\$		7,800,000
Food and Agricultural Organization (FAO)	Wheat and other cereals see	-	28,000 tons	3,000,000
	Early generation wheat seed	-	800 tons	2,000,000
	Vegetable packages (including irrigation kits)	450 packages	11,000 packages	 3,000,000 (to start summer season production)
	Light rehabilitation of basic irrigation infrastructure	2,200,000 US\$	24,800,000 US\$	 3,000,000 (required for summer season)
	Poultry production package (Chicken, Chicken feed, Hormones and Mineral)	-	15,000 packages	2,000,000
	Ruminant stock and feed	1,000 sheep	26,000 sheep	 3,000,000
		1,500 tons feed	10,000 tons feed	 2,000,000 (to complete vaccine campaign by March)
	Ruminant vaccines	300,000 doses LSD vaccine	1,600,000 doses	 2,000,000 (to complete vaccine campaign by March)
Total				358,575,000

COVID-19 vaccination - Critical operational costs

According to WHO and UNICEF, the estimated required funding for the Phase I COVID-19 vaccine roll-out under COVAX are US\$4.5 million for areas under the control of Government of Syria and North-east Syria, and US\$2.5 million for North-west Syria (areas not under the control of Government of Syria), which targets 3 per cent of the population, including front-line health workers and social workers, during Q1 and Q2 (January – June 2021).

The phase II COVID-19 vaccine roll-out will take place in Q3 and Q4 (July – December 2021), targeting an additional 17 per cent of the population, including elders and persons with chronic diseases. The estimated required funding for phase II are US\$24.3 million for areas under the control of Government of Syria and North-east Syria, and US\$7.5 million for North-west Syria.

The total gap for operational costs to vaccinate 20 per cent of the population in 2021 is therefore US\$38.8 million, \$8.91 per person (requiring two doses) for areas under the control of Government of Syria and North-east Syria, and US\$11.7 per person in North-west Syria (requiring two doses).

18. WHO funding requirements for service delivery during the first quarter stand at US\$20 million

Funding Status of Country-Based Pooled Funds (CBPF)

The two OCHA managed Country-Based Pooled Funds are the quickest and most flexible modality for disbursing funding to partners and enabling timely response. However, due to recent disbursements and emergency allocations, funding available to pooled funds is critically low and require early replenishment with the current allocation/preparation ongoing under their respective first standard allocation for 2021. As of mid-February 2021 the available balance of the two OCHA-managed pooled funds is as follows: Syria Cross-border Humanitarian Fund (SCHF) **US\$1 million**; Syria Humanitarian Fund (SHF) **US\$0**. Since the UN Security Council passed its resolution 2504, NGOs operating in Northeast Syria without authorization from the Government of Syria are unable to access UN-managed humanitarian financing.

The Syria Cross-border Humanitarian Fund

The SCHF remained a major funding mechanism for the Syria cross-border response in 2020. Thanks to the generous contributions of 15 donors, the SCHF allocated a record **\$189 million** through two standard and four emergency reserve allocations to support people with basic services, and prioritize urgent needs related to COVID-19 and winterization.

The SCHF started the year with a balance of \$17.4 million and to date, \$11.8 million has been pledged by one donor. With \$33 million now available for funding, preparations are underway for a first standard allocation of \$32 million. Given the current high levels of complex and diverse needs, mobilizing funding is critical to allow for a robust allocation strategy in the first half of the year ahead of the vote of the UNSC cross-border resolution.

The Syria Humanitarian Fund

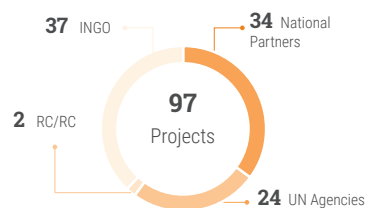
The SHF allocated **\$68.6 million** in 2020 thanks to the generous contributions of 17 donors. Of this, \$39.7 million was allocated under a standard allocation to address critical humanitarian need in underserved areas, and \$28.9 million was allocated through a reserve allocation modality to support COVID-19 prevention and response efforts.

The SHF recorded a 23 per cent decrease in contributions (\$55.3 million) compared to 2019 (\$71.8 million). In January 2021, the SHF allocated \$5.06 million under its first reserve allocation to provide critical humanitarian assistance to vulnerable populations in Deir-ez-Zor and rural Damascus. The SHF is fast depleting with only \$17.8 million available at the start of the year, which will all be used for the planned standard allocation currently in process.

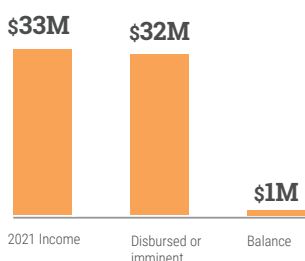
2020 SCHF projects by partner type



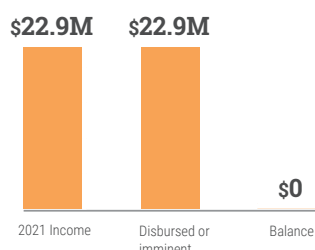
2020 SHF projects by partner type



Syria Cross-border Humanitarian Fund Status (in US\$ millions)



Syria Humanitarian Fund Status (in US\$ millions)



2020 Reach and Funding

Overview of funding against the 2020 HRP and COVID-19 response plan:

Funding towards the 2020 HRP (including COVID-19 response) reached \$2.13bn or 55.8 percent of the US\$3.82bn requirements, as of 15 February 2021*.

Overall Funding

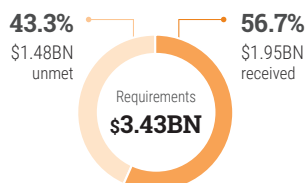
\$2.13BN

\$3.82BN Total Requirements

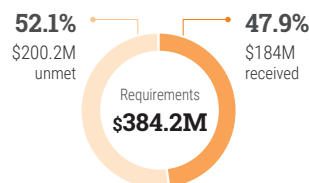
\$1.69BN Total Unmet

55.8% Overall Funding Received

Humanitarian Response Plan 2020



Additional COVID-19 Response



SECTOR	2020 HUMANITARIAN RESPONSE PLAN		ADDITIONAL COVID-19 RESPONSE PLAN	
	REQUIREMENTS (US\$)	FUNDING (US\$)	REQUIREMENTS (US\$)	FUNDING (US\$)
Food Security and Agriculture	1,120.5 M	568.9 M	37.8M	5.7 M
Health	443.2 M	137.7 M	158M	67.3 M
Education	264.4 M	96.3 M	27.4M	5.2 M
Shelter / NFI**	569.9 M	73 M	33.2M	0.5 M
Protection	184.3 M	65.9 M		
Protection: Child Protection AOR	75.7 M	6.9 M		
Protection: Gender-Based Violence AOR	64.4 M	5.3 M	12.8 M	6.7 M
Protection: Mine Action AOR	52.6 M	8.9 M		
WASH	314.4 M	63.1 M	69.9M	23 M
Nutrition	79.3 M	22.3 M	10.9M	-
Early Recovery and Livelihoods	174.4 M	19.4 M	20.7M	7.9 M
Coordination and Common Services	52.5 M	11.5 M	-	-
Logistics	11.8 M	7.4 M	0.4M	0.2 M
Camp Coordination and Camp Management	25M	2.8 M	8.1 M	0.5 M
Emergency Telecommunications	0.9 M	-	-	-
Not specified	-	714.5 M	-	57.5 M
Multiple clusters/sectors (shared)	-	140.6 M	5.1 M	9.4 M
Total	3.43 BN	1.95 BN	384.2M	184 M

* Source of data (FTS) <https://fts.unocha.org/>
















** While FTS recorded 73 million (or 12.8%) per cent funded and for COVID-19 response 0.5 million (or 1.6%), the SNFI Sector reported that an estimated 367.1 million (or 64.5%) has actually been funded and for COVID-19 response an estimated 25 million (75.4%) has been received, based on inputs and response from partners.

Key achievements in 2020*

PEOPLE REACHED

7.6 Million

Inter-sector reach: 7.6 million people were reached with humanitarian assistance on average each month in 2020 (January to September 2020), an increase of 1.9 million people compared to 2019.

SECTORS		REACH***/ INTERVENTIONS BY SEVERITY		
		(4-5-6)	(3)	(1-2)
	Inter-sector**	49%	26%	25%
	Protection interventions****	75%	14%	11%
	Protection: Child Protection	83%	9%	8%
	Protection: Gender-Based Violence	79%	16%	5%
	Protection Mine Action	70%	18%	12%
	Camp Coordination and Management	100%		
	Early Recovery and Livelihoods	47%	36%	17%
	Education	88%	9%	3%
	Food Security (food baskets)	62%	35%	3%
	Agriculture	50%	43%	7%
	Health (medical procedures)	52%	44%	4%
	Nutrition	90%	10%	
	Shelter	91%	8%	1%
	Non-Food Items	28%	18%	54%
	Water, Sanitation and Hygiene Emergency WASH facilities and services*****	73%	23%	4%

* The Inter-sector and sector reach figures in the table covers Jan-Sep 2020. The Jan-Dec 2020 data are still being finalized.

** Inter-sector calculated by monthly average.

*** People reached is the number of people provided with humanitarian assistance by one or more sectors (Food Security, NFI/Shelter, WASH (direct beneficiaries), ERL (direct beneficiaries), Education, and Nutrition) for the month, taking the highest sector per community. People reached does not necessarily mean that all of their humanitarian needs are fully covered, nor does it convey the type and quality of assistance people have received.

**** Interventions contain the Protection sector's overall reach figures represent the total number of distinct protection interventions conducted through the sector's prevention, response and capacity building activities, and medical procedures include sum of outpatient consultations, trauma consultations, mental health consultations, physical rehabilitation sessions, vaginal deliveries, C-sections, and referral cases

***** Number of people with improved access lifesaving/emergency WASH facilities and services and received essential WASH NFIs Hygiene promotion

Sector Achievements

January - December 2020



Protection

- **7,815,000 interventions** were provided to people in need by Protection sector and AoR partners, in **3,293 communities** in **99%** of sub-districts in Syria. Of these more than **200,000 protection interventions** were provided to assist people living with disabilities.
- **286,345 GBV** response services were provided in **725 communities** in **152 sub-districts**.
- **13,475 survivors** were provided assistance services by Mine Action AoR partners.
- Child Protection prevention and response services were provided to over **1,954,423** girls, boys and parents/caregivers in **1,301 communities** in **215 sub-districts**.
- More than **345,000 people** received legal counselling or assistance including on civil status documentation or housing land and property issues.



Health

- **23.3 million outpatient** consultations – representing **111%** of the health sector annual target – were provided, of which **43% of patients** were male and **57% were female**, while **46% were children** under the age of 18. Overall, health actors delivered **25.17 million medical procedures**¹⁹.
- **8 fully functioning health facilities** offering emergency obstetric and new-born care (6 basic and 2 comprehensive) were added to the overall health system capacity in the third quarter of 2020²⁰. Further, health actors provided **969,965 antenatal care visits** during the year, an average of **2 visits per pregnant woman** despite access challenges and severe health care worker shortages²¹ in **7 of 14 governorates**.
- **325 health facilities** were refurbished or rehabilitated, while health partners supported an average of 264 mobile medical units and 304 ambulances each month during 2020.

COVID-19:

- **5,708 responders** were trained on infection prevention and control (**91% of target**) while **3,853 health care workers** were trained on clinical case management of COVID-19 (**110% of target**).
- **10 laboratories** in 7 governorates throughout Syria were collectively capable of performing **2,770 COVID-19 PCR tests per day**.
- A total of **4,008 dedicated hospital beds** for COVID-19 cases were operational: **2,756** for moderate cases (**86%** of target) and 1,252 beds for critical cases (**77%** of target) – an increase of **92%** and **313% respectively** over the final 5 months of 2020.

19. Medical procedures include sum of outpatient consultations, trauma consultations, mental health consultations, physical rehabilitation sessions, vaginal deliveries, C-sections, and referral cases.

20. WHO Whole of Syria Consolidated HERAMS, Q3 2020.

21. Below SPHERE standards of at least 22 health care workers (doctors, nurses, midwives) per 10,000 population



Food Security and Agriculture

- **5.4 million people** were reached with regular food baskets on a monthly basis across Syria.
- At least **1.7 million people** have benefitted from lifesaving assistance including distribution of wheat, bread and bakery support monthly.
- In addition to regular food basket distributions, a total of **5.9 Million** people benefitted from Emergency Food Rations (EFRs), including **5.2 Million (88%)** people through cross-border from Gaziantep. EFR support included emergency cash assistance, cooked meals, ready to eat rations and emergency food baskets.
- Agriculture and livelihood support reached **3.7 million** people across Syria, both at household and community level. Cross-border assistance from Gaziantep reached **1.3 million**, with a further **1.1 million** people reached with agricultural and livelihoods assistance in NES through multiple modalities.



Camp coordination and camp management

- Over **1.5 million displaced** persons were reached with multi-sectoral assistance.
- Close to **263,000 displaced persons** live in camps which have women included in participatory management committees.



Education

- Over **2 million children and youth** were supported in formal education, while over **470,000** were supported in non-formal education.
- **211,000 children** were supported with distance/home-based learning



Nutrition

- **1.5 million pregnant and lactating women** and children under age five were provided with life-saving curative and preventive nutrition services.
- **1.3 million children** between 6-59 months of age and close to **0.5 million pregnant and lactating women** were screened for malnutrition.



Shelter and Non-Food Items

- **3.9 million people** received core non-food items, such as mattresses, blankets, plastic sheets, containers for water, cooking utensils and soap.
- Almost **2.9 million people** received winter NFIs, including winter jackets, heaters and fuel.
- Over **879,800 people** received emergency shelter assistance, such as tents, emergency shelters and collective shelter repairs; close to **1.2 million people** were assisted with longer-term shelter repairs.



Water, Sanitation and Hygiene

- **3.7 million people** were reached by hygiene promotional activities/campaigns, as well as **4.5 million** with emergency provision of water facilities and services respectively.
- Around **one million people** gained improved access to gender and disability friendly WASH facilities and medical waste management systems through WASH interventions in Health Care Facilities
- Around **3 million** (only **50% of target** due to underfunding) benefited from repair and rehabilitation of water systems (the most equitable, accessible and safer way to provide water to the maximum number of people).



Early Recovery and Livelihoods

- Around **815,000 direct beneficiaries** and **5 million indirect beneficiaries** were reached with early recovery and livelihoods interventions across the country.



Logistics

- **264,037 mt** of humanitarian assistance were delivered through UN Security Council Resolution 2504/2533 approved border crossings.
- **12,082 trucks** were transhipped into Syria from Turkey in 2020. This is the highest number of trucks transhipped in a year since the operation began in 2014, and a **50 percent** increase over 2019
- **1,449 m³** of COVID-19 related relief items were received into common warehouses of the Logistics Sector.
- The Logistics Sector supported **77 partners**, including United Nations (UN) agencies, national and international non-governmental organizations as well as national societies operating inside Syria and in Turkey.
- UNHAS carried **806 passengers** and transported **15.4 metric tonnes** of light cargo (including COVID-19-related and other medical supplies), supporting the humanitarian response of **26 humanitarian organizations** in north-eastern Syria across sectors.

SYRIAN ARAB REPUBLIC
**2021 NEEDS AND RESPONSE
SUMMARY**

ISSUED FEBRUARY 2021