



# SYRIAN ARAB REPUBLIC 2021 NEEDS AND RESPONSE SUMMARY

ISSUED MARCH 2021

Photo credit, OCHA

## 2021 NEEDS AND RESPONSE AT A GLANCE



**13.4M**

PEOPLE IN NEED



**12.3M**

INDICATIVE HRP TARGET



**\$4.2BN**

INDICATIVE REQUIREMENTS (US\$)

## 2021 HRP STRATEGIC OBJECTIVES



1. Save Lives



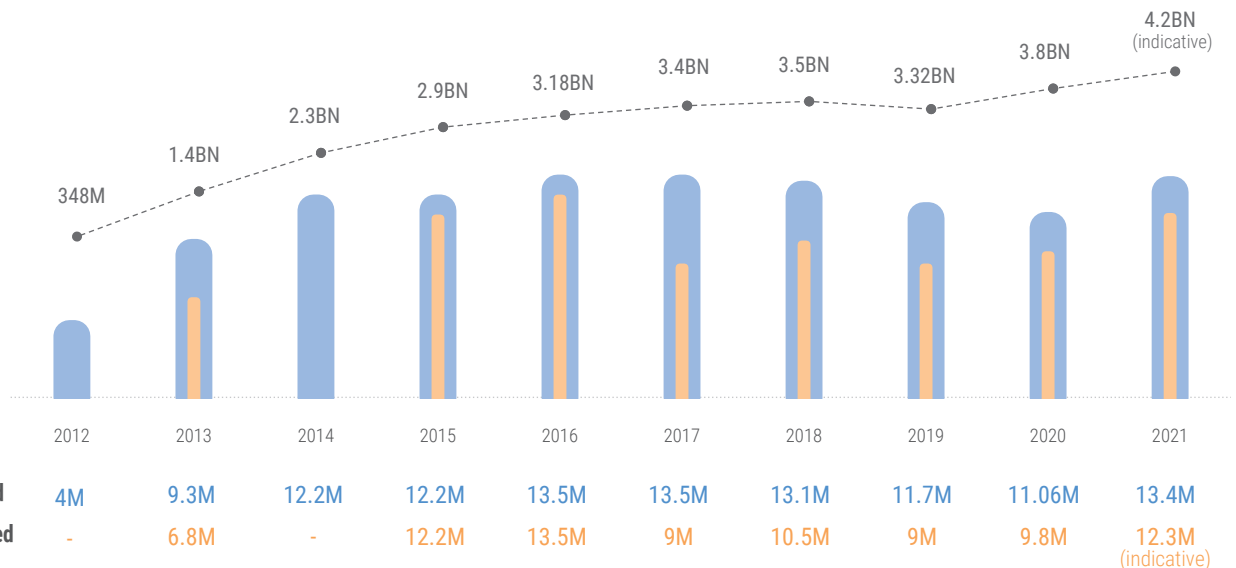
2. Enhance Protection



3. Increase Resilience and Access to Services

## EVOLUTION OF HUMANITARIAN PLANNING FIGURES

Financial Requirements (in US\$)



# Summary of Needs

in 2021

## Context and Humanitarian Impact

Syria remains one of the world's most complex humanitarian emergencies characterized by ongoing hostilities which have killed hundreds of thousands of people, triggered one of the worst displacement crises of our time, and led to the widespread destruction of civilian and agricultural infrastructure, including homes, schools, health facilities, water supply and irrigation systems. Today, 13.4 million people in Syria are in need of humanitarian assistance – a 21 per cent increase compared to 2020 – with needs increasingly being exacerbated by economic decline.

The decade-long crisis has inflicted immense suffering on the civilian population who have experienced massive and systematic violations of international humanitarian and human rights law, including more than 1,350 attacks on education and medical facilities and related personnel,<sup>1</sup> bombardment which has caused over 12 million people to flee their homes, and arbitrary detention, abduction, torture as well as other serious abuses. Almost 12,000 children have been killed or injured since 2011,<sup>2</sup> and 47 per cent of young people have had a member of their immediate family or close friend die.<sup>3</sup> With around half of Syria's children having known nothing but a lifetime of crisis - 2.45 million of whom were estimated to be out of school in 2020 alone - an entire generation is at risk of being lost. Long-standing and deep-rooted trauma, much of which remains unaddressed, means a mental health crisis looms large. While large-scale hostilities have reduced compared to the peak of the crisis, with frontlines not having shifted in a year,<sup>4</sup> frequent mutual shelling and rocket fire continues to be observed along contact lines, often causing civilian casualties.

The economy has experienced irreparable harm since the crisis began, with the gross domestic product having declined by 60 per cent and the government increasingly unable to raise sufficient revenue to subsidize essential commodities such as fuel and bread on which the most vulnerable families

rely. The Syrian pound is in virtual freefall having lost 78 per cent of its value since October 2019, while price increases for staple goods are at an all-time high. More than 90 per cent of the population is now estimated to live below the poverty line.<sup>5</sup> The COVID-19 pandemic has accelerated this economic downturn by further reducing already sparse income-generating opportunities in a context where 50 per cent of the work age population is now estimated unemployed, and curtailing women and children's access to critical services such as reproductive health and malnutrition screening. Remittances, on which millions of Syrians and particularly IDPs rely are understood to have halved, from US\$1.6 billion in 2019 to US\$800 million in 2020, due to global and regional economic contraction. COVID-19 has also impacted an already debilitated health system in which half of health facilities are partially or non-functional.<sup>6</sup>

## Humanitarian Conditions and Needs

Continued civilian casualties and forced displacement due to ongoing hostilities, in addition to reduced access to already degraded basic services, limited and inadequate housing and shelter options, and a wide array of specific protection risks and concerns continue to cause and perpetuate humanitarian needs among the population. While hostility-induced displacement in early 2020 generated additional needs amongst the population in Syria for internally displaced persons (IDPs), returnees and host communities, particularly in north-west Syria (NWS), the ripple effects of the economic downturn - including the loss of income and livelihoods, sharply reduced purchasing power and resulting financial unaffordability of food and other basic goods - have exacerbated living conditions for people who were already in humanitarian need, and have tipped previously less affected segments of the population into humanitarian need, including food insecurity, across the country.

1. *The Syria Monitoring and Reporting Mechanism (MRM) has recorded 723 attacks on education facilities and personnel and 640 attacks on medical facilities and related personnel. Syria MRM 2020*

2. *Syria Regional Crisis, 10 Years On, March 2021, UNICEF*

3. *A Decade of Loss: Syria's Youth After Ten Years of Crisis, ICRC, March 2021*

4. *United Nations Special Envoy to Syria, Geir O. Pedersen, Briefing to the Security Council on Syria, 15 March 2021*

5. *WoS Early Recovery Sector estimates, and Framework for the Immediate Socio-Economic Response to COVID-19*

6. *WHO Whole of Syria Consolidated Health Resources and Services Availability Monitoring System, Q3 2020.*

The crisis continues to have a gendered impact, with women and adolescent girls paying a high price for harmful and discriminatory gender norms, including gender-based violence, while men and boys face elevated risks linked to arbitrary detention, forced conscription and explosive ordnance, among others.

The economic deterioration has financially squeezed families further. Eighty-two per cent of assessed households in Syria report a significant deterioration in their ability to meet basic needs since August 2019, due mainly to price increases and loss of income.<sup>7</sup> With the WASH, health and education infrastructure considered poorly or non-functional in 48 per cent of all sub-districts,<sup>8</sup> access to basic services is severely hampered and increasingly unaffordable. This is particularly the case for over 1.9 million IDPs sheltering in informal settlements, planned camps and collective shelters, which offer inadequate protection against the elements and increase the risk of epidemic-prone diseases among this population. At the same time millions of people across Syria continue to live in damaged housing, particularly along former frontlines, with those paying rent now struggling more than before to do so.

Facing deteriorated living standards, families are increasingly adopting harmful coping mechanisms. Seventy-one per cent of households and 75 per cent of female-headed households have taken on more debt since August 2019.<sup>9</sup> Twenty-eight per cent of families now adopt 'crisis' or 'emergency' food related coping strategies, including withdrawing children from school to have them work instead, selling property, migrating due to lack of food and early child marriage.<sup>10</sup> Twenty-two per cent of assessed communities report child labour as frequently occurring, while child marriage of young and adolescent girls (12-17 years) is reported by 18 per cent of assessed communities as a very common issue.<sup>11</sup>

Worsening living standards and an increase in harmful coping strategies have led additional segments of the population to develop life-threatening physical and mental health needs. These include a 57 per cent increase in the number of food insecure people to 12.4 million (up from 7.9 million in early 2020). Of these, 1.27 million people are considered severely food insecure – twice as many as in early 2020.<sup>12</sup> In line

with this trend, malnutrition rates continue to peak, with more than 500,000 children under the age of five chronically malnourished and 90,000 acutely malnourished.<sup>13</sup> Mental trauma is widespread and under-assessed but certain to have long-term implications across all population groups. Twenty-seven per cent of households report signs of psychological distress in boys and girls, almost double the 2020 figure (14 per cent).<sup>14</sup> Critical protection needs persist and have been aggravated by the COVID-19 pandemic, including gender-based violence (GBV), with women and girls across the country reporting that it has become a feature of everyday life. One in two people in Syria is estimated to be at risk of explosive ordnance; needs for humanitarian mine action interventions, particularly survey and clearance activities, are therefore significant but currently not met at scale.<sup>15</sup> At the same time, the COVID-19 pandemic continues to affect the country with nearly 47,000 cases confirmed in Syria, including at least 1,972 deaths as of mid-March 2021, further straining the health system and reducing people's access to both emergency and non-emergency care.

In 2021, the increased scope and inter-linked nature of humanitarian needs among the population in Syria requires a comprehensive response across all sectors to save lives, protect people and prevent further deprivation.

*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 with 20,108 households surveyed 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.*

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

8. Health, Education and WASH Sectors, January 2021, based on a composite severity indicator capturing the functionality of primary health care centers, piped water access and ratio of fully functioning class-rooms to school-age population at sub-district level.

9. MSNA, October 2020

10. Households reported employing one or several of these strategies in the 30 days prior to being surveyed. Food Security and Agriculture (FSA) Sector, January 2021

11. Protection Sector, January 2021

12. FSA Sector, January 2021


13. Nutrition Sector, January 2021


14. MSNA, October 2020

15. Protection Sector, January 2020


## Context, Impact and Humanitarian Needs

### CRISIS CONTEXT

 76 explosive incidents per day on average in 2020


 50% of healthcare workers estimated to have fled the country


 47,812 confirmed cases of COVID-19 as of 23 March 2021


 Close to **90%** of the population live below the poverty line. **60-65%** are estimated to live in extreme poverty, up from **50-60%** in 2019.


 **78%** drop in value of Syrian currency since October 2019


### IMPACT


 28 attacks on health facilities and 61 attacks on schools and education personnel in 2020


 **+2K** 2,059 civilian casualties recorded in 2020, more than half of whom were children


 1/3 of populated communities estimated to be contaminated by explosive ordnance


 813 incidents of recruitment and use of children for combat verified by UN in 2020


 Only **58%** of hospitals and **53%** of primary health care centers are fully functional


 **2.45M** children were out of school in 2020 (number estimated to have increased since)


 **6.7M** people internally displaced

 **1.9M** people living in informal settlements and planned camps, a **20%** increase since January 2020

 **448,000** spontaneous IDP return movements in 2020, while **38,200** refugees returned to Syria, mainly from Lebanon and Iraq

 **300,000** jobs lost since the beginning of the COVID-19 pandemic, approximately **50%** unemployment

 **236%** price increase of the average food basket between December 2019 and December 2020

 **51%** of average household income spent on food in September 2020, % proportion estimated to have increased since

### HUMANITARIAN NEEDS



**13.4M**

PEOPLE IN NEED OF HUMANITARIAN ASSISTANCE



#### Living Standards

- **82%** of households indicate decreased ability to meet basic needs since mid-2019
- Growing income gap: average household income now **20%** below expenses
- Increasing unaffordability: households spend **51%** on food, leaving little room to meet other basic needs
- Lack of access to basic services due to non or severely reduced functionality of critical service infrastructure in **almost half** of all sub-districts and increasingly aggravated by reduced affordability



#### Coping Mechanisms

- **71%** of households have taken on more debt since mid-2019
- Child labour and child marriage reported as frequently occurring in **22%** and **18%** of assessed communities, respectively
- **28%** of households adopt crisis or emergency strategies to cope with increased food prices (including child labour and marriage, selling property, migrating due to lack of food)



#### Physical and Mental Wellbeing

- **12.4M** people are food insecure, of whom **1.3M** severely food insecure
- **600,000** children are chronically malnourished and **90,000** children acutely malnourished
- **27%** of households report their children show signs of distress
- Almost **one in three** pregnant women is anemic



**13.4M**  
PEOPLE IN NEED

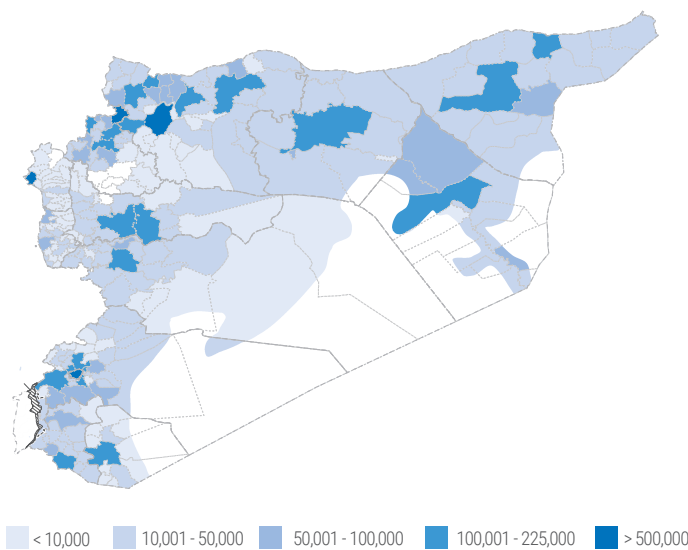
**PiN distribution**

by severity

MINIMAL	STRESS	SEVERE	EXTREME	CATASTROPHIC
<b>0.1%</b>	<b>4.6%</b>	<b>50.5%</b>	<b>33.7%</b>	<b>11.1%</b>
0.1M	0.62M	6.76M	4.51M	1.48M

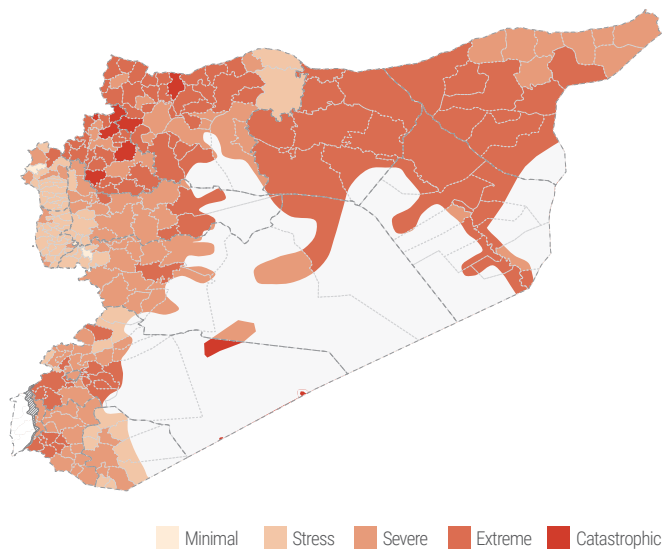
**Distribution of people in need**

by sub-district (in 2021)



**Inter-sectoral severity of needs**

by sub-district (in 2021)



**Priority Needs**

as expressed by heads of household\*

<b>71%</b> Food / Nutrition assistance	<b>50%</b> Livelihood assistance	<b>30%</b> Winterization assistance (e.g. NFI, Shelter)
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as expressed by people with disabilities

<b>78%</b> Food / Nutrition assistance	<b>42%</b> Livelihood assistance	<b>29%</b> Health assistance
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\* With expressed priorities showing no significant differences between female and male households  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Based on sectoral indicators and analysis at inter-sector level by OCHA and WoS Sectors.

# People in Need

## PiN by gender



	PEOPLE IN NEED	% PIN
Male	6.51M	48.7%
Female	6.87M	51.3%

## PiN by disability

	PEOPLE IN NEED	% PIN
Persons with disabilities	3.34M	24.9%

## PiN by age



	PEOPLE IN NEED	% PIN
Children (0 - 17 years)	6.08M	45.4%
Adults (18 - 59 years)	6.74M	50.4%
Elderly (59+ years)	0.56M	4.2%

## PiN by age and gender



	PEOPLE IN NEED	% PIN
Men (Over 18 years)	3.36M	25%
Women (Over 18 years)	3.95M	29%
Boys (0-17 years)	3.15M	24%
Girls (0-17 years)	2.93M	22%

## PiN by population group



	PEOPLE IN NEED	% PIN
Internally displaced people	6.7M	50.1%
Returnees	0.32M	2.4%
Residents	6.36M	47.5%

## PiN by governorate

GOVERNORATE	TOTAL POPULATION	PEOPLE IN NEED	PEOPLE IN EXTREME AND CATASTROPHIC NEED	% OF PIN INCREASE COMPARED TO 2020
Aleppo	4.0 M	2.7 M	1.5 M	11%
Al-Hasakeh	1.1 M	0.8 M	0.5 M	12%
Ar-Raqqa	0.7 M	0.5 M	0.5 M	7%
As-Sweida	0.4 M	0.2 M	-	18%
Damascus	1.8 M	1.1 M	-	56%
Dar'a	1.0 M	0.7 M	0.2 M	6%
Deir-ez-Zor	0.8 M	0.6 M	0.5 M	10%
Hama	1.5 M	0.8 M	-	80%
Homs	1.5 M	0.8 M	-	48%
Idleb	2.7 M	2.2 M	1.9 M	18%
Lattakia	1.2 M	0.6 M	-	57%
Quneitra	0.1 M	0.1 M	-	2%
Rural Damascus	3.0 M	2.0 M	0.8 M	11%
Tartous	0.9 M	0.3 M	-	14%

## Sub-districts with highest PiN

GOVERNORATE	SUB-DISTRICT	#OF PIN (in million)
Damascus	Damascus	1.10M
Aleppo	Jebel Saman	0.99M
Idleb	Dana	0.91M
Lattakia	Lattakia	0.54M
Hama	Hama	0.45M
Homs	Homs	0.38M
Rural Damascus	Jaramana	0.36M
Ar-Raqqa	Ar-Raqqa	0.26M
Idleb	Maaret Tamsrin	0.26M
Aleppo	A'ZAZ	0.24M



## 2021 HRP Objectives and Multi-Sectoral Response Priorities

As of March 2021, humanitarian partners in Syria are in the process of developing the 2021 Humanitarian Response Plan (HRP). All response targets, specific objectives and financial requirements in this document are estimates at this point. Finalization of the HRP is foreseen for the end of May, including a confirmed breakdown of financial requirements by sector, based on a projected 700 individual response projects by HRP partners across the country.

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 12.3 million people with humanitarian assistance in 2021, an increase from 9.8 million in 2020, at an estimated cost of US\$4.2 billion, a 12.8 per cent increase compared to 2020.



### Strategic Objective 1

#### Save Lives

Provide life-saving and life-sustaining humanitarian assistance to the most vulnerable people, with an emphasis on those in areas with a high severity of needs.

##### SPECIFIC OBJECTIVES

- 1.1.IDPs in planned camps, self-settled/spontaneous sites, collective shelters 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 five years of age is improved.



### Strategic Objective 2

#### Enhance Protection

Enhance the prevention and mitigation of protection risks, and respond to protection needs through supporting the protective environment in Syria, by promoting international law, IHL, IHRL and through quality, principled assistance.

##### SPECIFIC OBJECTIVES

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



### Strategic Objective 3

#### Increase Resilience and Access to Services

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.Access to adequate housing is improved.
- 3.2.Access to market-based livelihood opportunities and production is enhanced.
- 3.3.Access to basic services such as electricity, water, education or health is improved.

## 2021 Humanitarian Planning Figures

SECTOR	2021 PIN (in million)	% OF PIN INCREASE AGAINST 2020	2021 TARGET (in million)	% OF TARGET INCREASE AGAINST 2020	2021 INDICATIVE FUNDING REQUIREMENTS (US\$)	% OF REQUIREMENTS INCREASE AGAINST 2020*
Camp Coordination and Camp Management	1.95M	-68.3%	1.95M	116.7%	32.3M	-2.7%
Coordination					57M	2.5%
Early Recovery and Livelihoods	11.6M	17.2%	2.2M	15.8%	200M	2.5%
Education	6.9M	1.3%	5.2M	24.7%	392.9M	34.6%
Emergency Telecommunications					0.6M	-33%
Food Security and Agriculture	14.2M	44.9%	13.2M	34.7%	1.56BN	37.1%
Health	12.4M	3.5%	11.6M	1.9%	618M	2.8%
Logistics					12.6M	3.8%
Nutrition	4.9M	6%	4.1M	36.7%	60M	-33.4%
Protection	13.1M	-3.4%	13.1M	9.2%	400M	2.6%
Protection excl. AoRs			3.7M		190M	
Protection: Child Protection AOR			0.8M	-8.3%	78M	
Protection: Gender-Based Violence AOR			1.6M	0%	72M	
Protection: Mine Action AOR			2.8M	-34.9%	60M	
Shelter	5.9M	4.3%	3.5M	39.7%	225.3M	
NFI	4.7M	8.5%	4M	16.2%	373.1M	-0.8%
WASH	12.2M	13.6%	12.2M	14%	350M	-8.9%
<b>Inter-sector</b>	<b>13.4M</b>	<b>21.2%</b>	<b>12.3M</b>	<b>25.5%</b>	<b>4.2BN</b>	<b>12.8%</b>

\* The comparison is against 2020 HRP and COVID-19 response requirements



### 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 is US\$4.5 million for areas under the control of the Government of Syria (GoS) and North-east Syria (NES), and US\$2.5 million for North-west Syria (areas not under the control of the Government of Syria), targeting three 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 is US\$24.3 million for areas under the control of the GoS and NES, and US\$7.5 million for North-west Syria.

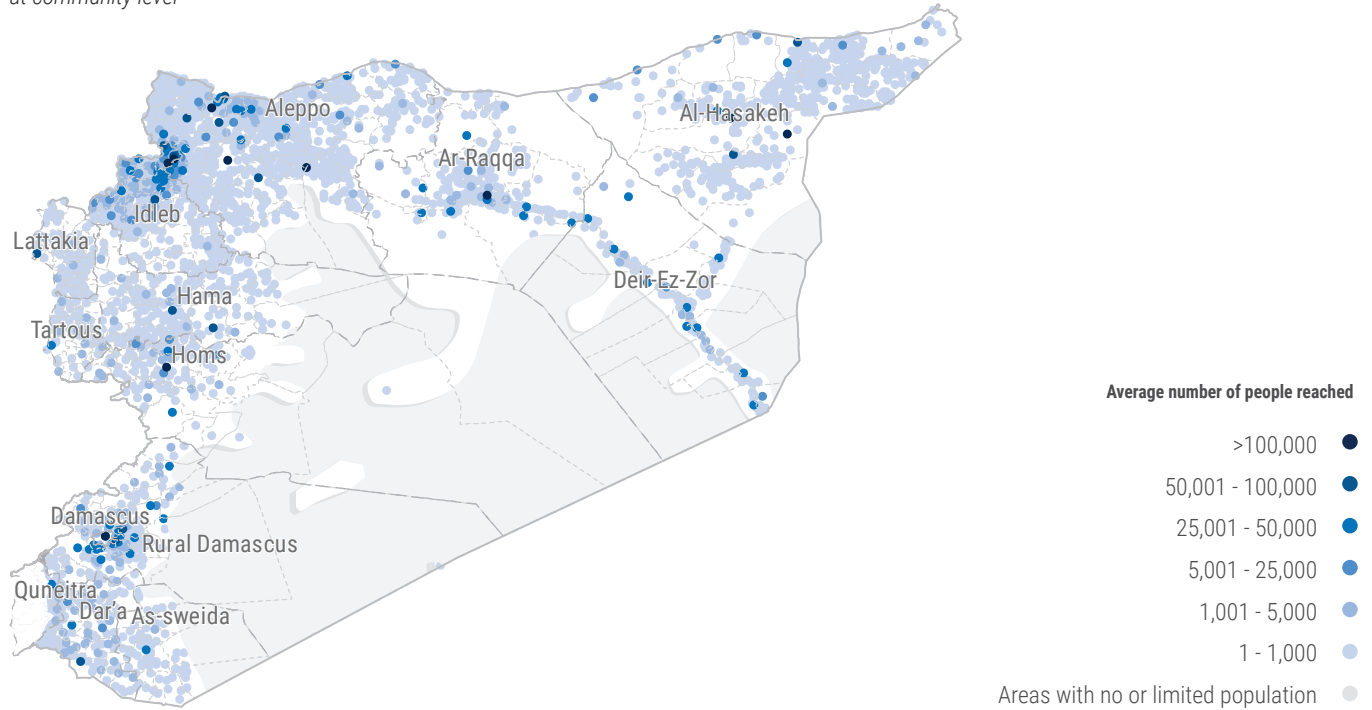
The total gap for operational costs to vaccinate 20 per cent of the population in 2021 is therefore **US\$38.8 million**, US\$8.91 per person (requiring two doses) for areas under the control of the GoS and NES, and US\$11.7 per person in North-west Syria (requiring two doses).



# Implementation Capacity

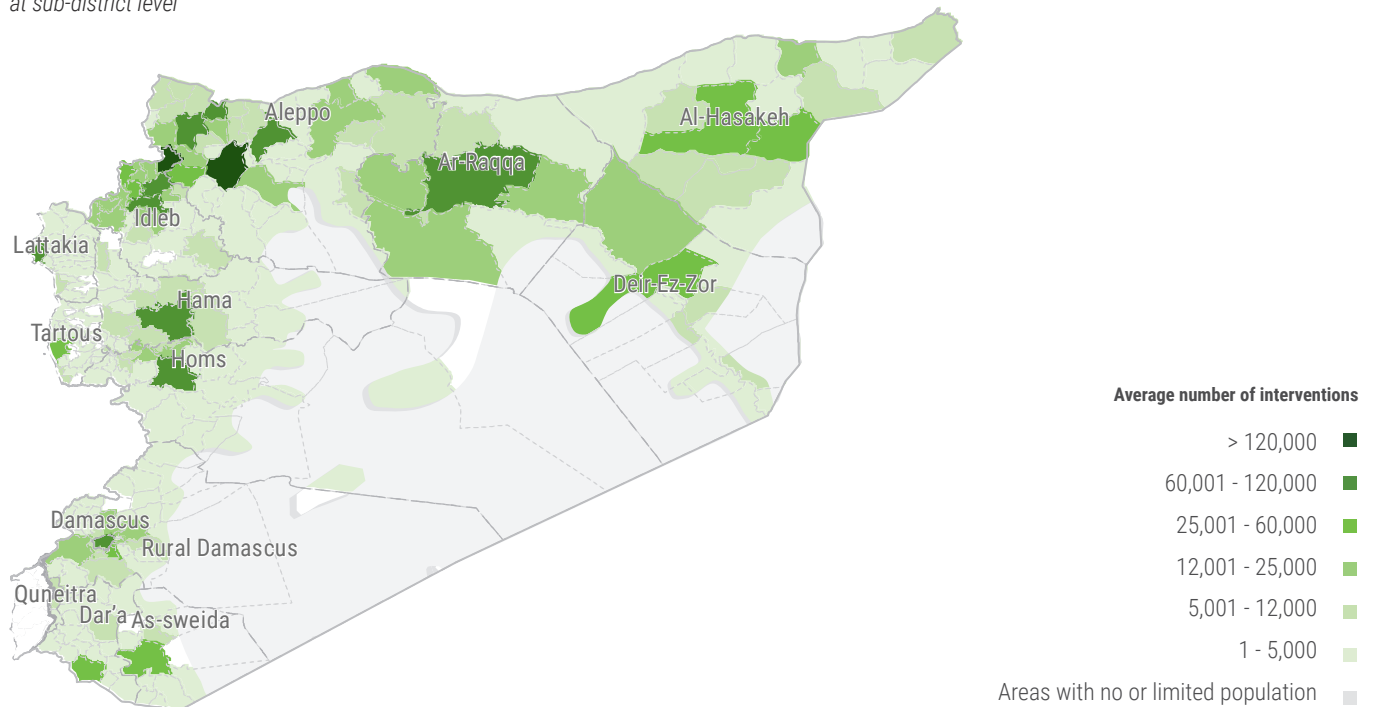
## Average number of people reached with humanitarian assistance

at community level



## Average number of service delivery interventions

at sub-district level



# 2021 Response Priorities and Requirements

by Sector <sup>16</sup>

## Protection



PEOPLE IN NEED

**13.1M**

INDICATIVE TARGET<sup>17</sup>

**13.1M**

INDICATIVE REQUIREMENTS (US\$)

**\$400M**

### Key Trends in Needs:

- Each year of the crisis has a compounding effect on protection needs, and increases complexity creating longer lasting or irreversible impact of unmet needs.
- In each governorate of Syria, there are at least five or more key protection issues perceived to be prevalent.<sup>18</sup>
- 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 through different forms of 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.
- Possibility of further incidents of conflict, especially in NWS and South Syria may impact severity of protection needs. Voluntary IDP returns and forced relocations as seen in NES will require response to resulting protection needs. Refugee returns to Syria although dropped in 2020, still continue and may increase in 2021 requiring further assistance to protection needs of returnees.
- Findings of a socio-economic assessment that the United Nations Relief and Works Agency for Palestine Refugees in the Near East (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.

### Response Priorities:

The Protection Sector and the Child Protection, Mine Action and Gender-Based Violence Areas of Responsibility will prioritize a community-based approach, adapting to evolving situation and maintaining emergency response capacity.

- Expand integrated protection services through a gender and age informed approach, while focusing on high vulnerability groups, and strengthening the inclusion of persons with disabilities.
- Strengthen communities' self-protection mechanisms, to ensure sustainability of initiatives.

16. Key need trends by sector, as identified in the 2021 HNO, are summarized below. 2021 overall target figures, indicative financial requirements by sector presented in this chapter are preliminary figures and will be finalized in the 2021 HRP by May 2021.

17. Overall protection target for 2021 is 13.13 million interventions. At overall sector level, protection report interventions instead of people targeted, while protection AoRs report people targeted at individual AoR level.

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

- Improve and establish protection services in IDP sites, return areas and newly accessible areas to facilitate access for vulnerable populations.
- Improve protection needs assessments, and monitoring to identify needs, risks, and challenges and inform advocacy.
- Expand legal awareness and counselling on civil documentation and HLP issues including technical support to responsible institutions. Strengthen referral mechanisms to increase access to specialized care and support, psychosocial support and case-management.
- Individual protection assistance through preventive and responsive material and financial assistance to households and individuals at risk, especially in situations of emergency for individuals exposed to hostilities and forcibly displaced in formal and informal sites and sites/collective accommodation, including host communities.
- Implement responses through a diverse approach of static, mobile and remote modalities, especially due to COVID-19 impediments, which include: (i) blending community centers, satellite/mobile teams and community-based volunteers/committees to ensure wider reach; (ii) static service centers, ranging from one-stop centers offering a full range of protection programming; (iii) direct presence of protection staff.
- Expand and prioritize remote and community-driven approaches, including mobilization of community volunteers and community-based organizations for better needs identification, service delivery and assistance, particularly case management and referral, including capacity building for key duty bearers.
- Collaboration with other sectors including guidance on protection risk analyses, protection mainstreaming, age gender and diversity (AGD) mainstreaming, and cross-cutting work on inclusion of persons with disabilities. Supporting sector member organizations to integrate their protection teams with the teams providing other sectoral services in order to facilitate access, acceptance, and trust among communities.

*The community in rural Homs took the initiative to help 60 people with disabilities staying safe by making sure they have easy access to sanitizer during COVID-19. They installed sterilizer cans on wheelchairs so it's a reach away.*

Photo by UNHCR Syria





**Mine Action (MA AoR) : Indicative Target 2.8 million people**

Explosive ordnance contamination remains a major protection concern, severely affecting the lives and livelihoods of the population and further amplifying the social and economic crisis aggravated by the COVID-19 pandemic. Despite a decrease in the number of explosive incidents recorded in 2020, localized hostilities and widespread explosive ordnance contamination continues to threaten lives<sup>19</sup> and hamper access to basic services including medical facilities, as well as the delivery of humanitarian assistance and early recovery of the community. All mine action response activities continue to be a priority. In 2021, the MA AoR will focus its response on:

- Supporting the expansion of survey and clearance activities, the only way forward to permanently remove the threat posed by explosive ordnance to civilians in Syria.
- Delivering tailored explosive ordnance risk awareness activities, including through remote and alternative

platforms, and mainstreaming risk education messages into other sector responses.

- Transferring and reinforcing local skills by training community members in the delivery of explosive risk awareness and education within their own Communities', which increases the community's response capacity and their self-sustainability, ultimately impacting communities' resilience.
- Enhancing referral mechanism, seeking to support and expand the availability, access, and provision of specialized services for persons with disabilities, including survivors of explosive ordnance and their families.
- Continue collaborating with the Child Protection AoR to enhance assistance provided to children and tailor response modalities to better mitigate the impact of explosive ordnance on children.

19. An average of 76 incidents per day was recorded in 2020, as opposed to 159 incidents per day recorded in 2019. Nevertheless, explosive ordnance incidents continues to occur at alarming rate with devastating impact on civilians particular in the North West.

Photo by GVC Syria





### Child Protection (CP AoR): Indicative Target 825,000 Children

Children comprise almost half of the affected population and continue to be exposed to multiple protection risks and severe abuses. Grave child rights violations remain significant, 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.<sup>20</sup> COVID-19 pandemic and deepening poverty worsen harmful coping mechanisms like child labour, including its worst forms, and strain the capacities of families and communities to protect children, particularly adolescent girls and boys.<sup>21</sup> Separation from caregivers and absence of alternative care options are persistent issues across Syria. High psychosocial distress among children reflects the cumulative toll on their mental well-being. Child Protection response activities will be guided by its three strategic pillars (community-based CP interventions, expanding reach and improving specialized CP services, and sustain capacity building of front-line CP responders) and will focus on:

- Structured and sustained child protection programmes including psychosocial support services for boys and girls.
- Parenting programmes and CP awareness-raising activities.
- Specialized child protection services for boys and girls through case-management.
- Capacity building of CP front-line responders including systematizing efforts to build a sustainable child protection workforce through ensuring minimum standards.
- Optimize child protection outcomes through engagement with Education and Early Recovery and Livelihood (ERL). CP AoR will increase engagement with the ERL and Education sectors on comprehensive responses to the needs of vulnerable children, especially child labour.
- Continue expanding the evidence base, generating evidence on core child protection issues to inform humanitarian responses and advocacy with duty bearers.

20. In 2020, the UN verified 2,388 of such violations against children in 12 out of 14 Governorates of Syria, illustrating persistent trends of violence though not the full range of protection risks affecting children. MRM for Syria data, 2020.

21. Child labour, including its worst forms is reported in all governorates and in 22 per cent of assessed communities as frequently occurring (MSNA data).

Photo by Mercy without Limits Syria





## Gender-Based Violence (GBV AoR): Indicative Target 1.6 million people

Economic deprivation, the COVID-19 pandemic, and the psychosocial impact of living with conflict for 10 years have led to an increase in GBV - within and outside the home – including the continued normalization of violence against women and girls across society. This is accompanied by a sense of powerlessness in the face of unequal gender norms and the threat of further violence. Women and girls face discrimination and exclusion, economic deterioration, limitations of their freedoms, high levels of insecurity and exposure to harmful coping mechanisms in almost all walks of life. Forms of GBV that continue to affect women and girls in Syria include intimate partner violence, sexual harassment and sexual violence, early marriage, sexual exploitation and abuse. GBV response will aim to ensure that survivors of GBV can access specialized/ response services and that the risks of GBV are prevented and mitigated by focusing on:

- Increasing the provision of quality, specialized GBV services, particularly psychosocial support and case-management.
- Enhancing inclusive GBV case-management for women and girls with disabilities, adolescent girls and older women and strengthening referral pathways.

- Establishing and maintaining women and girl safe spaces, community centers/ community well-being centers and safe spaces within health facilities.
- Enhancing integrated GBV/reproductive health (RH) services and enabling access for GBV survivors to mental health and psychosocial support (MHPSS).
- Continuing capacity building of service providers, including supervision and quality control and on new modalities of service provision (remote).
- Continuing strategizing towards prevention of GBV with a focus on changing harmful social norms through community engagement and engagement with men and boys.
- Coordinating the distribution of life-saving dignity kits to women and girls.
- Implementing Cash Voucher Assistance (CVA) as a consolidated modality of supporting GBV survivors and women and girls at risk.
- Continuing GBV risk mitigation across sectors,<sup>22</sup> including through training and advocacy for a better shared responsibility among humanitarian actors.

22. E.g. by sharing existing GBV risk mitigation checklists across sector/cluster partners, establishing GBV focal points in each sector linked to the GBV AoR



# Camp Coordination and Camp Management (CCCM)



## PEOPLE IN NEED

**1.95M**

## INDICATIVE TARGET

**1.95M**

## INDICATIVE REQUIREMENTS (US\$)

**\$32.2M**

### Key Trends in Needs:

- The CCCM has identified close to 1,766,874 people as being in need, including an estimated 1.6 million people in the NWS and almost 271,443 in the NES living in IDP sites,<sup>23</sup> 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. Almost nine out of ten IDPs – a massive 5.8 million people – have now been displaced for more than three years; more than half have experienced secondary or multiple episodes of displacement (with more than a quarter having been displaced at least four times); and 83 per cent reside in urban centers.
- 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. The majority (around 90 per cent) of IDP sites monitored by CCCM in NWS are self-settled.
- 80 per cent of people living in IDP sites monitored by the CCCM Cluster in NWS are women and children, with similar numbers, 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

<sup>23</sup> This includes five formal camps, five informal camps, 190 informal settlements and 154 collective shelters across Al-Hasakeh, Ar-Raqqa, Aleppo and Deir-Ez-Zor governorates, 80 per cent were women and children

Photo by Atma/Point Organization AI  
Hamza Camp 2020





were reported in 2020 that led to loss of life and injuries, as well as damage and destruction of tents, non-food items (NFIs) and IDP's belongings. Fire and flood incidents continue to be the most prevalent incidents affecting IDP sites in NWS.

### Response Priorities:

CCCM will focus on four critical and inter-related areas: 1) Monitor the provision of streamlined humanitarian lifesaving, multi-sectoral assistance in IDPs sites and strengthen basic infrastructure; 2) Improve the management quality and accountability of camp managers in IDP sites; 3) Strengthen household and communal coping mechanisms for IDPs in camps and camp-like settings and develop exit strategies when/where required; 4) Disseminate operational information on movements of IDPs on a timely basis. More specifically:

- Monitor the provision of multi-sectoral services in IDP sites to identify gaps, and to ultimately strive towards all IDPs having access to basic services i.e. food, shelter, health, safety, and security.
- In NES, closely monitor camp extensions and request for new camps, addressing challenges related to overcrowding and monitoring of the waiting list while maintaining emergency preparedness. There will be a strong focus on informal settlements in 2021 to mitigate the outflow of IDP to formal settlement where assistance is more accessible.
- Given the significant number of incidents affecting IDP sites in 2020, especially fires and floods, CCCM will focus

on improving fire response and mitigation measures, as well as maintenance activities to strengthen basic infrastructure in IDP sites. In addition, reduce the possible spread and impact of COVID-19 based on lessons learnt from 2020, aiming to reduce transmission among vulnerable populations by ensuring appropriate awareness and outreach while also working in partnership with health providers to ensure timely case detection and referral for moderate-to-severe cases.

- With the prevalence of self-settled, informal sites that lack camp management systems, continue to establish and reinforce camp management systems, by promoting participatory management structures such as committees, as well as training and capacity development for partners' staff and camp management actors through remote, mobile, and static camp management methods. Promote self-resilience by helping IDPs restore their physical and financial assets. To achieve this, CCCM will focus on resilience building and strengthening coping mechanisms inside planned camps.
- Given the remote management context due to COVID-19 and access challenges, coupled with mass, sudden displacements seen in 2020, coordinating and disseminating operational information on IDP sites are key priorities for CCCM to analyze trends and quickly identify IDPs in need of assistance. Such information/products are also crucial for partners and other sectors for timely planning and delivering of assistance.



# Early Recovery and Livelihoods (ERL)



## PEOPLE IN NEED

# 11.6M

## INDICATIVE TARGET

# 2.2M

## INDICATIVE REQUIREMENTS (US\$)

# \$200M

### Key Trends in Needs:

- 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).
- Nearly 75 per cent of PLWD are without access to economic, social, and medical support.<sup>24</sup>
- 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 are expected, adding to the risk of social fabric rupture.

### Response Priorities:

Scaling-up interventions to contain the impact of COVID-19 crisis and of the general economic deterioration affecting livelihoods, including:

- Income-generating activities, such as cash-for-work schemes linked to rehabilitation works and in the form of labor-force support to productive sectors.
- Grants, loans, and in-kind support to urban/rural micro, small, and medium enterprises (MSME), including locally organized community groups, impacted by multiple shocks as well as emerging entrepreneurial/manufacturing entities.
- Enhancing resilience-building through Vocational Training matching labor market characteristics, including through the facilitation of the encounter between labor demand and supply.
- Cash support to vulnerable families in urban and peri-urban areas to reduce their socio-economic vulnerability and their negative coping strategies.

24. [https://www.sy.undp.org/content/syria/en/home/library/Disability\\_Inclusion\\_Programme.html](https://www.sy.undp.org/content/syria/en/home/library/Disability_Inclusion_Programme.html); HNO KI Survey July 2020.

Photo by UNDP Syria



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

- Access to electricity, including sources of renewable energy.
- Restoration of basic services-related infrastructures such as hospitals, health care centers, schools, and access ways whose conditions hinder the delivery of assistance and pose a risk to the life of most vulnerable.
- Restoration of basic socio-economic and production services such as markets, shops, storages, warehouses as well as other labor-intensive infrastructures.
- Enhance absorption capacity of services/infrastructures hindering the safe return of displaced people to their places of origin.

### Support to Social Cohesion and Community Security:

- Existing and planned ERLs and other sectors' programming

and services shall be inclusive of all most vulnerable groups, including through social cohesion community initiatives and social cohesion community initiatives. Furthermore, the ERL will continue supporting enhanced partnerships with and capacity building of local civil society organizations.

### Support to PLWD and female-headed households (HHs):

- Scale-up cash-based and market-based transfer modalities to support PLWD, in particular children with severe disabilities, and female-headed HHs to enhance their access to livelihood opportunities.
- In line with the needs expressed by communities and based on the severity of the indicators related to the ERL activities, the most affected areas will be selected. With the consideration of the resilience-oriented nature of the ERL activities that require a degree of stability and regular access to the targeted locations, and where access to basic services is most limited.

## Education



#### PEOPLE IN NEED

**6.9M**

#### INDICATIVE TARGET

**5.2M**

#### INDICATIVE REQUIREMENTS (US\$)

**\$392.9M**

### Key Trends in Needs:

- An estimated 6.9 million people (97 per cent children) need education assistance with 94 per cent of school-aged children living in areas with severe, extreme or catastrophic education conditions mainly concentrated in Aleppo, Idleb and Rural Damascus governorates. The northeast remains underserved given the severity of the populations' education needs.
- In 2020, an estimated 2.45 million children were out of school and 1.6 million children were at risk of dropping out,<sup>25</sup> numbers that will certainly increase due to an increase in the school-aged population and the overall deteriorating situation, taking into consideration the cumulative effect of protracted conflict on education services, the closure of learning facilities and/or reduced learning hours due to COVID-19, worsening economic conditions, and displacement.
- The COVID-19 pandemic coupled with displacement and economic deterioration has exacerbated the consequences of underinvesting in education. COVID-19 has deepened the inequalities related to availability of, and access to,

continued learning. Most schools are not able to partially or fully implement COVID-19 detection, mitigation and referral measures; 87 per cent of households with school aged children face barriers accessing electronic based remote-learning.<sup>26</sup>

- Due to the compounding impact of the 2020 situation, many students are either behind in their learning, finding it difficult to return to school or are at risk of dropping out. Younger children, adolescents and children living with disabilities face further challenges accessing learning services due to limited availability of early childhood education (ECE) centers, 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 disabilities.<sup>27</sup>
- 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.
- Attacks on education and 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.

25. 2020 HNO (draft), 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.

26. 2021 HNO Education Sector analysis

27. Nationwide data on disabilities captures information on people over 12 years old. As there is no dataset for children three to 17 the highest estimate of females 12-24 (12%) and males 12-24 (15%) is used as a proxy. HNAP Summer 2020 Report Series

**Response Priorities:**

- School-aged children aged three to 17, teachers and education personnel are the primary population targets.<sup>28</sup> The response strategy is centered on (i) increasing the availability of and access to safe and equitable formal and non-formal education for children and youth (both in person and home-based); (ii) enhancing the quality of formal and non-formal education services; and (iii) strengthening education systems to deliver education services.
- Due to increasing economic duress, the sector will expand cash and voucher for education modalities and the provision teaching and learning of supplies to off-set the cost of education.
- The sector will expand and enhance education infrastructure to absorb and retain more students and better ensure safe and conducive learning environments through inclusive classroom repairs, providing temporary learning spaces and classroom equipment, providing teaching and learning materials, covering operation costs and heat, establishing or expanding gender and disability sensitive WASH facilities, and providing psychosocial support to students and education personnel. The sector will also promote child safeguarding in learning facilities.
- The sector will expand and improve non-formal education services to enable out of school children (OOSC) to access learning and support children who are behind in their learning to catch up. Non-formal education services will have clear pathways to a formal education system that is better able to absorb more students. The sector will enable adolescents and youth to continue their learning by increasing educational for the availability of upper primary and secondary schools and increasing technical and vocational training opportunities and foundational learning for those who may not return to school and may want to enter the labor market.
- As teachers are essential for learning and development to take place, the sector will invest in continuous professional development so that teachers can better meet the challenges of teaching in Syria, and provide remuneration incentives to ensure that trained teachers and other in-service personnel are retained.

28. Additionally, youth may benefit from vocational training and foundational skills





# Food Security and Agriculture (FSA)



## PEOPLE IN NEED

**14.2M**<sup>29</sup>

## INDICATIVE TARGET

**13.2M**

## INDICATIVE REQUIREMENTS (US\$)

**\$1.56BN**

### Key Trends in Needs:

- 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, an increase of 57 per cent compared to 2020, 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.

29. 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.

Photo by Violet Organization





**Response Priorities:****Scale-up and sustain minimum food consumption needs through lifesaving and life-sustaining food assistance.**

- Provide assistance through in-kind, cash and voucher, to those in need of assistance and scale up/expand to the newly food insecure caseloads in NES, NWS and South / Central Syria, including those impacted socio-economically by the protracted crisis and COVID-19. FAS will target geographical areas with severity 3 and above with food assistance.
- Provide emergency response to crisis affected vulnerable people within 72 hours of displacement with emergency food assistance through appropriate and preferred modalities.
- Provide the vulnerable food insecure populations with monthly food assistance through appropriate modalities, including protection Food Rations (FRs) to most vulnerable farming households.
- Provide persons with specific needs (PSN) with supplementary food assistance through appropriate modalities.
- Supply flour or bread directly to bakeries in areas with high severity and no access to subsidized bread in North Syria.

**Scale-up support to self-reliance of affected households by protecting and building productive assets and restoring or creating income generating opportunities to save and sustain lives.**

- Distribute agricultural inputs, including seeds, fertilizer, pesticides and equipment, coupled with related training.
- Support small-scale food production, including horticulture,

poultry-egg laying hens and market gardens.

- Support asset building and asset protection, including provision of small livestock, animal feed distribution, fodder production support and training, targeting vulnerable small-scale breeders.
- Provide emergency livestock treatment and training for veterinary services, including supporting community animal health workers (AHWs).
- Scale-up support to market-driven income-generating activities (IGAs) including vocational training based on beneficiary preferences. This includes beekeeping, food/dairy processing, mushroom production and vegetable production through provision of small business grants and micro-credit modalities, technical training and capacity building on business plan preparation and business management skills.

**Improve communities' capacity to sustain households' livelihoods by improving linkages with value chain through the light rehabilitation of productive and economic infrastructure.**

- Support two main phases of wheat value chain (processing and marketing) through light rehabilitation of bakeries, flour mills and silos, and providing support to the community-based wheat seed system.
- Support light rehabilitation of relevant economic/productive infrastructure through appropriate modalities, including irrigation canals, wells and irrigation systems.
- Establish and strengthen the capacity for the provision of essential services for local communities including early warning and disaster risk reduction (DRR) systems.

# Health



## PEOPLE IN NEED

# 12.4M

## INDICATIVE TARGET

# 11.6M

## INDICATIVE REQUIREMENTS (US\$)

# \$618M

### Key Trends in Needs:

- There are over 47,000 confirmed COVID-19 cases across Syria and positivity rates ranging between 24 and 38 per cent as of March 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, including adequate infection prevention and control (IPC) and community engagement.
- 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, numbers which drop to 6 per cent and 0 per cent respectively among public health facilities in northeast Syria.<sup>30</sup> 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 sub-districts, 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 vulnerable,<sup>31</sup> especially in the face of economic deterioration affecting key determinants of health.
- There is critical need to strengthen medical supply chains across all modalities, particularly for medical consumables.<sup>32</sup>
- 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 disease outbreaks, as well as monitoring of health outcomes and the burden of disease over time.

30. WHO WoS Consolidated HERAMS, Q3 2020

31. 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

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

Photo by WHO Syria  
Al Hol Camp, NES



### Response Priorities:

The health sector remains focused on three response priorities defined through health system monitoring and community feedback.<sup>33</sup>

- Ensure access to quality, lifesaving and life-sustaining health services across all levels of the health system – community, primary, secondary and tertiary. Essential services comprise surgical and trauma services, reproductive health, child health – including immunization and nutrition services, mental health, diagnostic services, and specialized care for persons with disability,<sup>34</sup> those with communicable<sup>35</sup> and non-communicable diseases,<sup>36</sup> and children with severe acute malnutrition with complications.
- Underpin service delivery by ensuring timely referral and continuity of care – including for emergency cases, survivors of GBV, and COVID-19 cases which require isolation and/or in-patient care; supply of essential diagnostics, medicines and therapeutics, medical supplies, vaccines and equipment; and availability of trained, qualified health care workers.
- Enhance early warning surveillance systems and ensure health system and laboratory capacity to prepare for, detect and deliver timely response to disease outbreaks, particularly threats of epidemic-prone and vaccine-preventable diseases.
- Strengthen COVID-19 preparedness and response pillars, with particular emphasis on case management and preparing for vaccine roll out across the country. To enable a safe and effective COVID-19 response, the health sector must limit disease transmission by reducing secondary infections among close contacts and health personnel. Health care workers must be equipped with adequate supply of personal protective equipment (PPE) and requisite knowledge on IPC, and WASH in health facilities must be ensured.
- Engage communities early and often to empower them to prevent and limit the spread of disease and improve health outcomes, enable early detection of disease events and counter misinformation.
- Lay groundwork for a more resilient health system and expanded community-based initiatives to mitigate continued and emerging threats to health. This includes strengthening health information systems, repairing damaged critical health infrastructure, and bolstering linkages with communities through outreach efforts such as community health workers, mobile medical units and ambulance services. Inter-sectoral efforts with nutrition, WASH, CCCM and protection to further address determinants of health and enhance communities' capacity to respond to and recover from future shocks.

33. Such as HERAMS, early warning systems, routine disease surveillance and MSNA.

34. Including rehabilitation and provision of assistive devices

35. Especially water-borne and vector-borne diseases, including leishmaniasis

36. Including cancer and thalassemia.



# Nutrition



## PEOPLE IN NEED

# 4.9M

## INDICATIVE TARGET

# 4.1M

## INDICATIVE REQUIREMENTS (US\$)

# \$60M

### Key Trends in Needs:

- Urgent and life-saving nutrition needs for 4.9 million mothers and children in Syria are anticipated in 2021, Where most of the nutrition needs lies in high severity areas.
- Chronic malnutrition is anticipated to increase, with nearly 600,000 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 of child-bearing age will continue to suffer the consequences of maternal anemia and/or malnutrition if not treated appropriately.
- An estimated 141,540 children aged 6-59 months face an elevated risk of morbidity and mortality attributed to acute malnutrition, out of which 37,863 children are under the direct risk of death because of severe acute malnutrition and additional 103,677 moderately malnourished children are at risk of co-morbidities and development of severe acute malnutrition if they are not treated appropriately.
- Poor dietary diversity is observed among women and children in Syria and will impact mothers' capability to optimally breastfeed their children. Therefore, 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 aged 6-59 months in Syria. Similar effect will be potentiated by maternal anemia and malnutrition.

Photo by Nutrition sector



### Response Priorities:

Based on the mentioned vulnerabilities as well as the ongoing COVID-19 pandemic and the devaluation of local and household economy, Nutrition Sector is prioritizing the following responses in 2021:

- Strengthen adherence to operational guidance for response adaptations in the context of COVID-19 to mitigate risk of infection, including roll out of the family Mid-Upper Arm Circumference (MUAC) approach to increase early acute malnutrition case detection and referral for treatment.
- Quality improvement in the treatment of acute malnutrition through mobile and fixed delivery modalities.
- Prevention of acute and chronic malnutrition through blanket supplementary feeding and cash and voucher assistance targeting children aged 6 -59 months and PLW.
- Prevention of micronutrient deficiencies using different modalities; supplementation through distribution of micronutrient powder and tablets targeting children aged 6 - 59 months and PLW in collaboration with the Health sector; and diet diversification awareness, and fortification.
- Protect, promote and support recommended infant and young child feeding practices in emergencies (IYCF-E) including breastfeeding/complementary feeding, mainly via counselling or education and use of additional platforms such as mobile text messages, radio, TV and social media.
- Nutrition situation assessment and monitoring through SMART surveys, surveillance and community screening, and timely analysis and dissemination.
- Prevention of chronic malnutrition and maternal malnutrition through adequate focus on the first 1000 days of the child's life including the pregnancy period.
- Capacity building of partners on key nutrition interventions: community-based management of acute malnutrition, promotion of appropriate infant and young child feeding and caring practices, age-appropriate micronutrient supplementation, Rapid Nutrition Assessments/SMART, cash and/or voucher assistance to improve nutrition outcomes, home fortification and strengthening Nutrition Information Management.
- Strengthen resilience by focusing on building nutrition information systems to improve evidence-based programming (nutrition surveillance at both facility and community levels).
- Ensure adherence to the Whole-of-Syria standard operating procedures for breastmilk substitute (BMS) guidelines and address the issue of non-breastfed infants appropriately.
- Strengthen collaboration between Nutrition, Health, WASH, Protection, and FSL sectors on implementing an integrated response that addresses the immediate and underlying causes of acute and chronic malnutrition.
- Development of NWS Nutrition Sector contingency plan for 2021 which will be updated following UNSC decision on UNSCR 2533 in July 2021.

# Shelter and Non-Food Items (SNFI)



## Shelter

### PEOPLE IN NEED

**5.9M**

### INDICATIVE TARGET

**3.6M**

### INDICATIVE REQUIREMENTS (US\$)

**\$225M**

## Non-food Items

### PEOPLE IN NEED

**4.7M**

### INDICATIVE TARGET

**4M**

### INDICATIVE REQUIREMENTS (US\$)

**\$337M**

### Key Trends in Needs:

- The shelter situation has continued to deteriorate given the unavailability of adequate and affordable shelter, the limited response for longer-term solutions, 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 5.9 million in 2021 which is a four per cent increase from 2020 (5.7 million).
- Access to markets and 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. Over 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 in NWS due to price fluctuations. The NFI PiN rose to 4.7 million in 2021, which is a nine per cent increase from the revised mid-year 2020 PiN (4.3 million) and a 6.8 per cent increase from 2019 (4.4 million).
- Palestine refugees continue to struggle after ten years of conflict. It is estimated that sixty per cent have been displaced at least once and 40 per cent remain in protracted displacement, with Yarmouk, Ein El-Tal and Dera'a Palestine refugee camps still largely in ruins. A number of Palestine refugees have been spontaneously returning to these camps and to other places of habitual residence, despite the challenging conditions. Many among them struggle to secure basic shelter and NFI needs.

Photo by UNHCR





### Response Priorities:

The sector will provide emergency NFIs, seasonal assistance and shelter support in last resort sites to vulnerable IDPs, returnees and host communities as well as integrated shelter support in underserved areas. The sector's response priorities will include:

- Continued distributions of kit-based core relief items to those who have experienced sudden onset displacement, are in last resort sites or are unable to access items. Including seasonal items, fans and shading for summer, warm clothing and thermal blankets for winter, will also be distributed to reduce the impact of exposure to extreme conditions.
- Access particularly in underserved and rural communities, given the noted increase of people in need of basic items with the ongoing economic crisis. Cash and flexible modalities to be deployed in line with agreed recommendations from the Cash Working Group (CWG), will be encouraged to help ensure that assistance addresses specific, individual needs. All emergency support will consider COVID-19 precautionary measures which include spacing at distributions, alternative modalities, smaller distributions or distributions joined with other interventions. The sector will aim to reach 4.0 million people with core NFIs and 3.9 million people with seasonal NFIs.
- Prioritized delivery of life-saving emergency response through the provision of timely, targeted and appropriate emergency shelter assistance while considering COVID-19 precautionary measures. Sector partners will install and repair tents, distribute shelters kits and make repairs in formal camps, informal settlements, transit sites and collective centers. Activities will focus on reducing overcrowding, increasing privacy and improving sanitation, particularly in collective centers. The Sector is targeting 1.95 million people; however, this may vary depending on the displacement context.
- Commitment to strengthening the resilience and cohesion of vulnerable communities by improving access to housing and related community or public infrastructure. Planned activities include housing repair and rehabilitation, HLP rights activities, and associated small-scale infrastructure that is part of an integrated and coordinated response. The sector will aim to address 1.7 million people which is based on previous years' experience, partner capacity, and expected funding. The sector will continue to advocate for long-term shelter solutions as the response has been so far limited, due to operational challenges and weak funding.

## Water, Sanitation and Hygiene (WASH)



### PEOPLE IN NEED

# 12.2M

### INDICATIVE TARGET

# 12.2M

### INDICATIVE REQUIREMENTS (US\$)

# \$350M

### Key Trends in Needs:

- With 36 per cent of general population relying on alternatives 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 29 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 adherence to preventive measures 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. 74 per cent of the HHs residing out of IDP sites that reported using water trucking as the main water supply modality spend more than five per cent of household's income on purchasing water only, while the combined costs for water and sanitation services should not exceed five per cent of a household's income.<sup>37</sup> In Governorates such as Dara'a and Quneitra, WASH-related spending (e.g. for water purchase, hygiene items, garbage removal and desludging) makes up 16 per cent of average household expenditures, implying many families spend significantly above that figure and recommended thresholds. High average household expenditures for WASH are also observed in As-Sweida, Rural Damascus, Hama and Deir-ez-Zor (14%), as well as Al-Hasakeh and Idleb (13%). Reported coping mechanisms highly undermine sectoral efforts to curb the transmission of COVID-19.

37. *The Human Right to Water and Sanitation – Media Brief* [https://www.un.org/waterforlifedecade/pdf/human\\_right\\_to\\_water\\_and\\_sanitation\\_media\\_brief.pdf](https://www.un.org/waterforlifedecade/pdf/human_right_to_water_and_sanitation_media_brief.pdf)

### Response Priorities:

The sector will focus both on direct emergency life-saving WASH interventions as well as support resilience of existing WASH systems (water supply and sewer networks, solid waste management) and WASH in institutions, such as schools and healthcare facilities. Complementarity of these approaches is more important nowadays than ever due to ongoing COVID-19 pandemic and deepening economic crisis, and will result in saving lives, improved access to basic WASH services and reduced recourse to harmful coping strategies that have negative cascade effects on individuals and communities in terms of public health, environment, nutritional status, inequality and poverty.

- Sustain provision of comprehensive WASH package throughout the year for 1.9 million IDPs in 1,750 last-resort sites across NW and NE Syria. More sustainable solutions like connection to existing water networks and/or establishment of simplified water and sewer networks should be considered, where possible.
- Prioritize contingency planning and prepositioning of supplies for NWS in case of non-renewal of the UNSC Resolution 2533.
- In both rural and urban communities, support the continuation of light, but durable rehabilitations of water and sanitation infrastructure, including solid waste management (SWM), as public WASH systems are the most economically viable and equitable way to provide services at scale. Light rehabilitations of WASH systems must be combined with support to operation and maintenance, including electricity systems, and capacity building of technical staff. Given challenges with electricity network functionality and as a contribution to a greener climate, the sector will prioritize use of renewable energy wherever feasible.
- Due to imposed coercive measures, the entire Syrian population relies on humanitarian community for provision of chemical treatments for drinking water.
- Priority will be given to continue surveillance and advocacy for uninterrupted water systems functionality, maintain emergency preparedness and support alternative water supply options to population affected by deficient or disrupted large water supply systems, like Alouk Water Station.
- With anticipation of continued community transmission of COVID-19, especially given low adherence to preventive measures in some areas, mainstreaming COVID-19 response throughout all regular WASH activities is crucial to mitigate risks. Focus will go on ensuring appropriate water, sanitation and handwashing standards in IDP sites setting, strengthening WASH infection prevention and control measures in schools, communities and health care facilities, hand hygiene promotion and proposing a systematic approach to address behavior change. Mass and social media will continue to be used to disseminate messages.

Photo by WASH sector





# Logistics



## PEOPLE IN NEED

Support to the humanitarian community

## INDICATIVE TARGET

Support to the humanitarian community

## INDICATIVE REQUIREMENTS (US\$)

**\$12.6M**

### Response Priorities:

The Logistics Sector will facilitate access to common logistics services that include air and surface transportation, warehousing and cross-border transshipment services. These will be reinforced by a robust logistics coordination and information management platform that brings together UN agencies, NGOs, INGOs and national societies operating in Turkey and Syria into one single coordination mechanism.

- Support UN agencies in accessing vulnerable populations and the prepositioning of relief supplies in areas in the NWS by providing coordination support and facilitating access to common services for UN cross-border operations from Turkey into Syria, first authorized under UNSCR 2165 in July 2014.
- Support the coordination of inter-agency humanitarian convoys, providing the humanitarian community with logistics solutions to crossline missions for the delivery of critical life-saving humanitarian supplies.
- 7,850 m<sup>2</sup> of free-to-user common warehousing will be made available across Aleppo, Rural Damascus, Homs and Al-Hasakeh governorates to the whole humanitarian community, and if needs arise, the Logistics Sector remains on standby to increase common storage capacity or facilitate mobile warehouse space in additional locations.
- Organize coordination meetings in operational areas on a monthly basis, and information products, including maps, snapshots, situation updates, meeting minutes, and capacity assessments, will continue to be produced and shared with the humanitarian community.
- Ensure flexibility to create and produce additional information products where operational needs require it.
- The United Nations Humanitarian Air Service (UNHAS) has been established in Syria to ensure safe, reliable and sustainable air access to beneficiaries for the humanitarian community assisting in the country. UNHAS transports passengers and light relief cargo and provides the required capacity for medical and emergency evacuation. All these activities will transform the humanitarian landscape by facilitating more efficient and timely delivery of humanitarian assistance to populations in need.
- Provide capacity strengthening opportunities to organizations through diverse logistics trainings to augment logistics expertise. These trainings will be implemented in line with partners' expressed needs. Due to COVID-19 restrictions, the initial focus will be on remote training solutions.
- Remain on standby to facilitate emergency access to fuel as a last resort, in case the fuel needs reach crisis point.

Photo by Silan Reyhanogullari, WFP/  
Logistics Cluster





# Emergency Telecommunication



## PEOPLE IN NEED

Support to the humanitarian community

## INDICATIVE TARGET

Support to the humanitarian community

## INDICATIVE REQUIREMENTS (US\$)

**\$600K**

### Response Priorities:

The WFP-led Emergency Telecommunications Cluster (ETC) was activated in January 2013 to provide shared security telecommunications and Internet connectivity services benefiting the humanitarian community responding to the crisis in Syria and surrounding countries. The ETC operates under the Whole of Syria (WoS) approach for an effective humanitarian response inside Syria. Since its activation, the ETC has become a key enabler of the humanitarian response - across eight common operational areas within Syria; Aleppo, Damascus, Deir Ezzor, Hama, Homs, Qamishli, Tartous and Latakia governorates, where it provides its services to over 500 humanitarian workers from 15 partner organizations. The humanitarian community relies on technology services and communication networks in all aspects of their operations to coordinate an effective response, ensuring assistance reaches those who need it most. The ETC will focus on the following priorities:

- Support the security and safety of humanitarian staff in the field is a key ETC priority – in coordination with UNDSS and the UN's Telecommunication Security Standards (TESS), the ETC maintains and enhances the humanitarian security telecommunications infrastructure across the country, including six UNDSS-managed Security Operation Centres (SOCs).

- Mitigate the issue of frequent power outages in the country, which severely impact the availability of communications services. The ETC is preparing to install solar power equipment in all SOCs to provide a reliable power supply, and a power backup system to support ETC data connectivity services in the inter-agency hubs in Homs and Aleppo. These improvements are part of a large-scale exercise by the ETC to procure and install equipment to upgrade the SOCs and enhance services for humanitarians throughout Syria in 2021.
- Conduct an assessment and oversight mission to all inter-agency hubs where ETC data connectivity services are provided, to identify where improvements can be made to enhance the reliability of services.
- Continue to build the capacity of national ICT staff to strengthen the emergency telecommunications response in Syria as well as continuously assess needs on the ground to support and enable humanitarian activities where, when, and as needed.

Photo by ETC, Aleppo, 2020



# Coordination



## PEOPLE IN NEED

Support to the humanitarian community

## INDICATIVE TARGET

Support to the humanitarian community

## INDICATIVE REQUIREMENTS (US\$)

**\$57M**

### Response Priorities:

- Coordination and common services will continue to support humanitarian actors throughout all stages of the Syria humanitarian programme cycle (coordinated needs assessment, strategic response planning, implementation, resource mobilization, monitoring), related information management and advocacy for humanitarian access in line with humanitarian principles.
- In line with Inter-Agency Standing Committee (IASC) guidelines, operational coordination mechanisms will be streamlined to strengthen operations, enhance advocacy and facilitate safe, secure and timely access to people in need through the most effective routes. The IASC-mandated coordination structures will work closely with NGO coordination platforms and assist with reinforcing the capacity of all humanitarian partners.
- In response to the priorities of national NGOs, capacity building will remain critical in 2021, as national organizations continue to be among the frontline responders. Efforts to strengthen the response capacity of national humanitarian actors and improve the coordination in all aspects of the response will continue in 2021. The safety and protection of humanitarian personnel operating within Syria will also remain crucial and a key priority for the sector.
- Coordination activities by UNWRA specifically will ensure that the needs of Palestine refugees in Syria continue to be reflected in common plans and responded to; and that opportunities for collaboration and partnership are maximized with the aim to provide a comprehensive response to Palestine refugees, including to their medium and longer term needs.

Photo by OCHA/Halldorsson



# 2020 Funding and Reach

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

Funding towards the 2020 HRP (including COVID-19 response) reached \$2.22bn or 58.1 per cent of the US\$3.82bn requirements, as of 17 March 2021\*.

### Overall Funding

## \$2.22BN

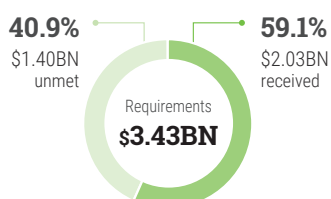
**\$3.82BN** Total Requirements

**\$1.60BN** Total Unmet

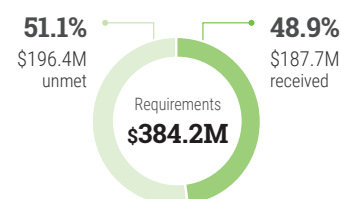
**58.1%** Overall Funding Received



### 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	57.3% 641.8 M	37.8 M	21.4% 8.1 M
Health	443.2 M	31.6% 140.3 M	158 M	43.8% 69.1 M
Education	264.4 M	36.4% 95.9 M	27.4 M	18.9% 5.2 M
Shelter / NFI**	569.9 M	13.2% 75.5 M	33.2 M	3.1% 1 M
Protection	184.3 M	35.8% 65.9 M	-	-
Protection: Child Protection AOR	75.7 M	9.2% 6.9 M	12.8 M	52.4% 6.7 M
Protection: Gender-Based Violence AOR	64.4 M	8.2% 5.3 M	-	-
Protection: Mine Action AOR	52.6 M	17% 8.9 M	-	-
WASH	314.4 M	20.2% 63.5 M	69.9 M	33.4% 23.3 M
Nutrition	79.3 M	41.2% 32.7 M	10.9 M	0% -
Early Recovery and Livelihoods	174.4 M	11.2% 19.4 M	20.7 M	41.8% 8.7 M
Coordination and Common Services	52.5 M	21.9% 11.5 M	-	-
Logistics	11.8 M	81.6% 9.6 M	0.4 M	54.7% 0.2 M
Camp Coordination and Camp Management	25 M	13.3% 3.3 M	8.1 M	6.5% 0.5 M
Emergency Telecommunications	0.9 M	54.1% 0.5 M	-	-
Not specified	-	100% 705.4 M	-	-
Multiple clusters/sectors (shared)	-	100% 140.6 M	5.1 M	100% 9.4 M
<b>Total</b>	<b>3.43 BN</b>	<b>2.03 BN</b>	<b>384.2M</b>	<b>187.7 M</b>

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

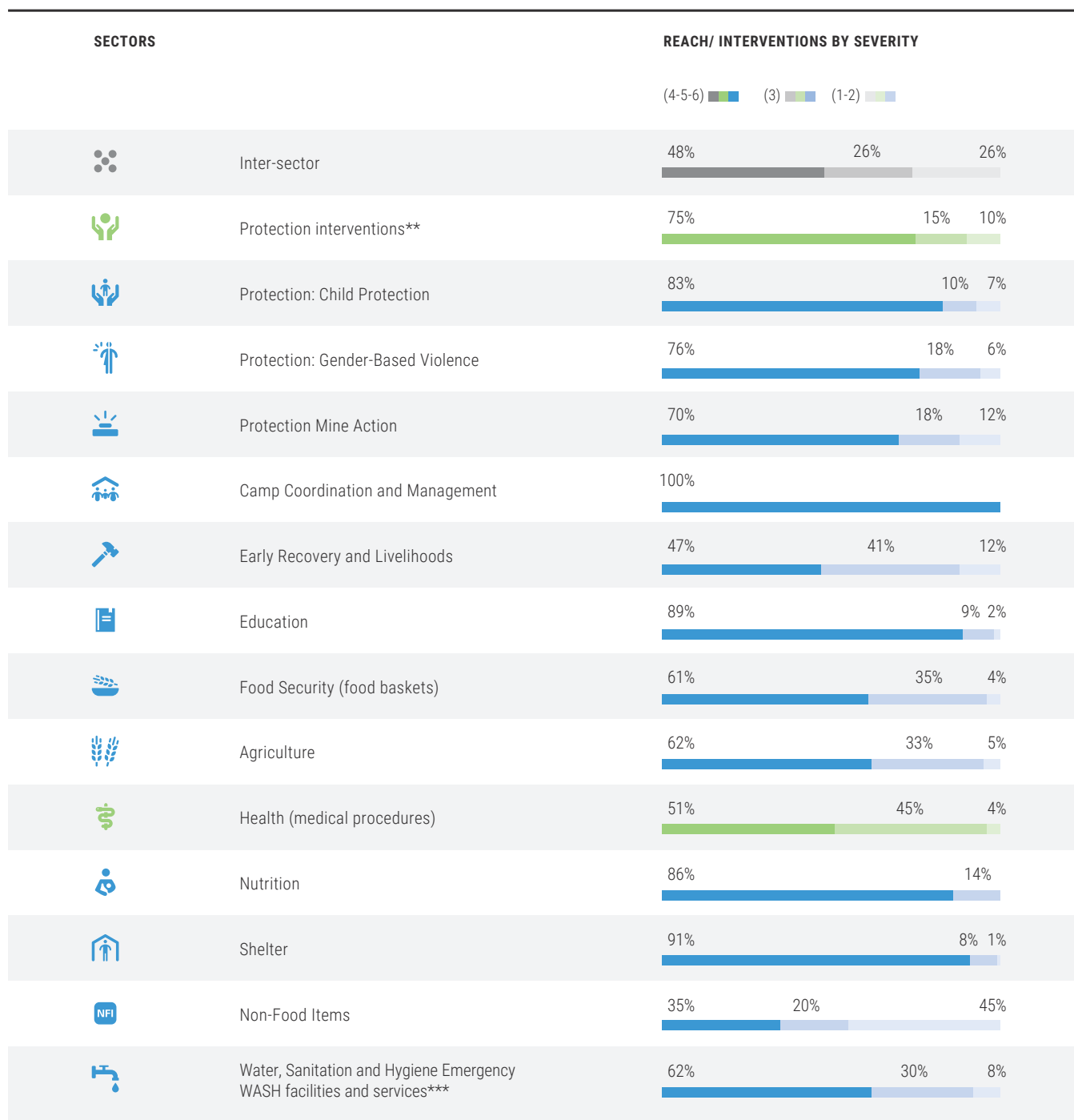
\*\* While FTS recorded 73 million (or 12.8%) per cent funded and for COVID-19 response 0.5 million (or 1.6%), the SNFI Sector reported that an estimated 367.1 million (or 64.5%) has actually been funded and for COVID-19 response an estimated 26.9 million (81%) has been received, based on inputs and response from partners.



# Key achievements in 2020

# 7.7 Million

Inter-sector reach: 7.7 million people were reached with humanitarian assistance on average each month in 2020 (January to December 2020), an increase of 1.7 million people compared to 2019.\*



\* Inter-sector people reached reflects 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) on average by 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**.<sup>38</sup>
- **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 2020.<sup>39</sup> 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 shortages<sup>40</sup> 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.

## 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 in NES and **1.3 million** reached from within Syria, through multiple agricultural livelihoods 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.

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

39. WHO Whole of Syria Consolidated HERAMS, Q3 2020

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

## Education

- Over **2.8 million** children and youth benefited from formal education support and over **743,000** benefited from non-formal education support.
- Over **678,000** of the children, youth, teachers and other education personnel that were reached were reached within a covid-19 related response.

## 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

- **3.1 million people** received core NFIs, 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.
- Almost **940,000 people** received emergency shelter assistance, such as tents, emergency shelters and collective shelter repairs; more than **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 and safe way to provide water at scale).

## 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 per cent** increase over 2019.
- **1,449 m<sup>3</sup>** of COVID-19 related relief items were received into common warehouses of the Logistics Sector.
- The Logistics Sector supported **77 partners**, including 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 NES across sectors.



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

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ISSUED MARCH 2021