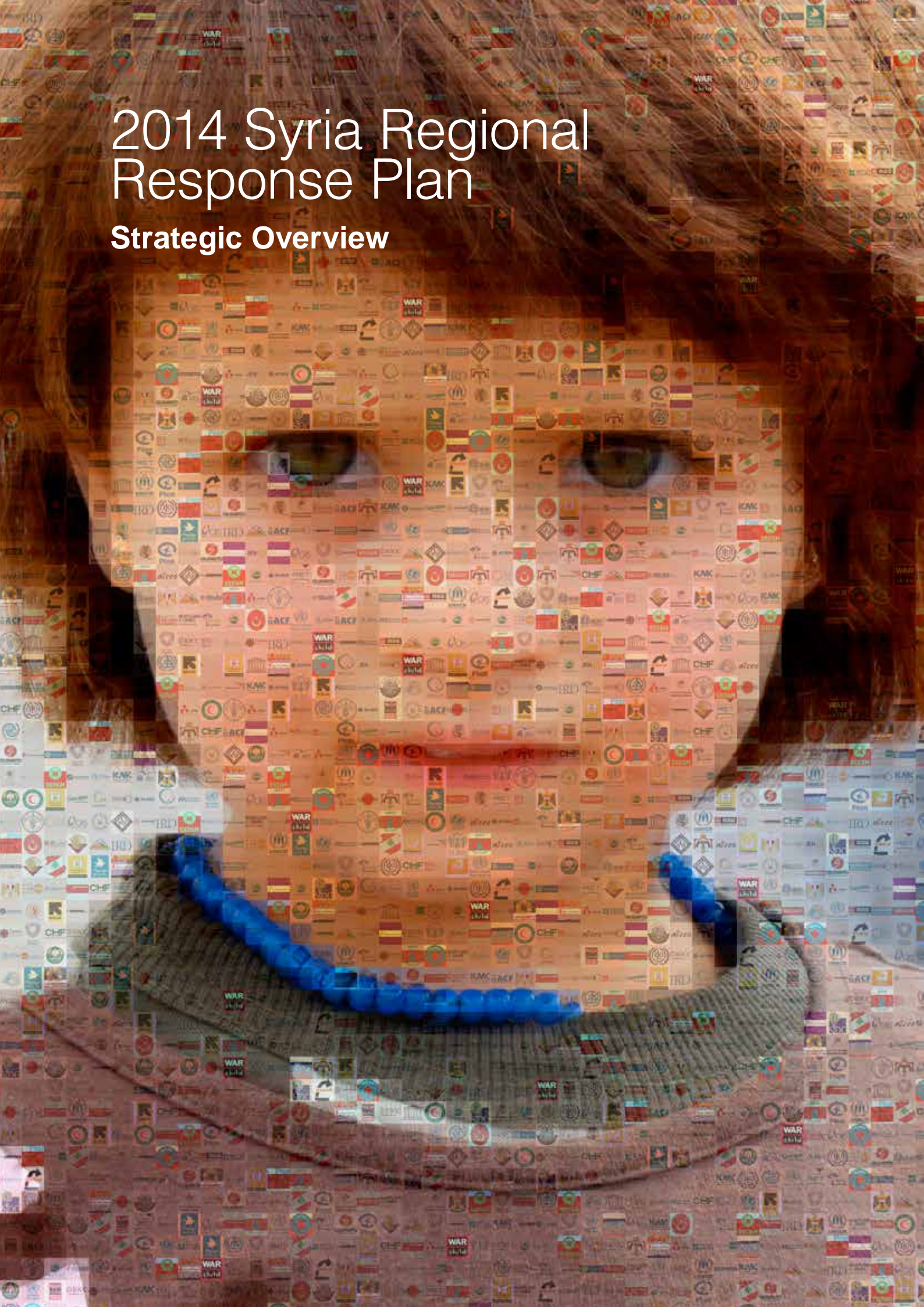


2014 Syria Regional Response Plan

Strategic Overview





2014 Syria Regional Response Plan

Strategic Overview

Planning and budgeting:	January - December 2014
Refugees by end-2014:	4.1 million people
Target beneficiaries:	Syrian refugees and other people of concern fleeing Syria, including those accommodated in camps, urban and rural areas, as well as their host communities
New arrivals by end-2014:	1.7 million people
Host community members to be assisted:	2.7 million people
Total funding requested:	US\$4.2 billion

6+6 Breakdown of 2014 RRP Requirements

Country	Jan-Jun 2014 by category			Total Jan-Jun 2014	Total Jul-Dec 2014	2014
	Life-saving measures	Vulnerabilities	Capacity-Building			
Egypt	60.9	31.5	8.9	101.4	67.4	168.8
Iraq	170.7	99.1	17.7	287.4	265.1	552.5
Jordan	391.2	252.3	37.6	681.1	519.6	1,200.7
Lebanon	526.2	260.8	62.7	849.6	874.2	1,723.9
Turkey	147.3	86.3	23.7	257.3	265.1	522.4
Total	1,296.3	730.0	150.6	2,176.8	1,991.4	4,264.7*

** this includes US\$ 96.4 million in regional requirements*

Host Government Requirements for 2014 (in US\$ millions)	
Egypt	4.3
Jordan	413.7
Lebanon	165.1
Total	583.1

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Foreword

Over 2 million people have fled Syria since the beginning of the conflict in 2011. This is one of the largest refugee exoduses in recent history, with no end yet in sight.

The Syria Regional Response Plan (RRP) for 2014 is one of the largest appeals ever presented for a refugee emergency. Over 100 partners – UN agencies as well as national and international NGOs – are working together to address the needs of Syrian refugees and assist the countries in the region who have so generously taken them in. The Plan calls for further efforts to benefit host communities, who offer front-line protection and essential support to refugees.

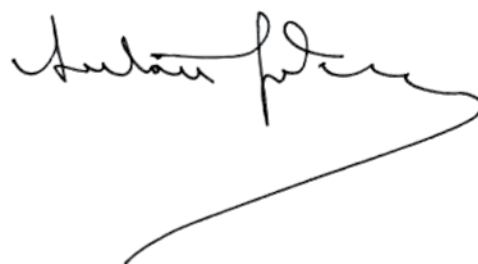
As the crisis worsens, RRP partners have identified areas of strategic importance to address. The re-emergence of polio, more than a decade after its disappearance, is a global public health emergency that must be contained. Hundreds of thousands of children are missing the opportunity to engage in learning and safe childhood activities; and donors, partners and communities are called upon to urgently help prevent a “Lost Generation”. A majority of refugee families struggle to obtain essential services, find shelter, pay rent, put food on the table for their families and receive healthcare. Too many Syrian women and girls are confronted with sexual and gender-based violence, forced into early marriage, or compelled to resort to survival sex. In addition, I am particularly concerned about refugees’ access to asylum, in the region and further afield.

Donor support has been generous, with a total of over US\$2 billion to refugee operations this year alone. As the conflict drags on, we must continue to respond together, but finding new and additional means of financing is becoming an increasing challenge. We have carefully reviewed and assessed all activities in this Plan, to ascertain that they are based on priority needs and fit into one of three categories: saving lives, preventing the deterioration of vulnerabilities, and strengthening capacity and resilience among refugees and host communities.

The RRP is based on a shared analysis of regional developments with partners in the Syria Humanitarian Assistance Response Plan (SHARP). Moreover, recognizing the scope and magnitude of this crisis, the humanitarian response must be closely aligned with development actions. This is the aim of the collaborative effort to design a comprehensive regional strategy led by the Regional Humanitarian Coordinator. A thorough review of the RRP is foreseen after six months to evaluate progress and provide an opportunity for planning revisions, also in relation to other resource mobilization platforms and national strategies. Meanwhile, three of the five host Governments (Egypt, Jordan and Lebanon) are also presenting their priority response activities either within or as an annex to this document.

I wish to express my gratitude to all agencies involved in this endeavour. The sturdy partnership that has enabled our collective planning and response will continue to form our greatest strength as we confront the daunting task before us.

António Guterres
UN High Commissioner for Refugees

A handwritten signature in black ink, appearing to read 'António Guterres', with a long, sweeping underline that extends to the right and then curves downwards.

Introduction

Planning and budgeting	January – December 2014
Target beneficiaries	Syrian refugees and other people of concern fleeing Syria, including those accommodated in camps, urban and rural areas, as well as their host communities
New arrivals by end-2014	1.7 million people
Refugees by end-2014	4.1 million people
Host community members to be assisted	2.7 million people
Total funding requested	US\$4.2 billion

Syria Regional Response Plan

The humanitarian situation in the Syrian Arab Republic (Syria) is of grave concern, with growing domestic, regional, and international consequences. As the conflict enters its fourth year, insecurity, generalized violence, and specific persecution continue to force the people of Syria to seek safety and protection elsewhere. In 2013 the numbers of Syrians displaced within their homeland and seeking refuge in the five main host countries increased dramatically. With no immediate prospect for peace in sight, the combination of the conflict, deteriorating economic opportunities, and shrinking social services are likely to generate further levels of displacement within Syria and the region.

By 30 November 2013, nearly 2.2 million refugees had been registered in the Arab Republic of Egypt (Egypt), the Republic of Iraq (Iraq), the Hashemite Kingdom of Jordan (Jordan), the Lebanese Republic (Lebanon), and the Republic of Turkey (Turkey). This figure does not include Palestine and other refugees displaced from Syria, nor the hundreds of thousands who may not have registered or who became refugees “sur place”, a total that could exceed three million people. In addition, over 31,000 Syrians have sought asylum in more than 90 countries outside the region.

In 2013 alone, some 1.7 million refugees have been registered, an increase of over 340 per cent compared to the previous year. The enormous generosity of the Governments and the peoples of the neighbouring countries have, however, been accompanied by considerable economic and social consequences. Government resources have been depleted and the coping capacities of local authorities and populations have been stretched to the limit. Notwithstanding the exceptional level of financial support from the donor community, the situation of many refugees remains precarious.

UNHCR data indicates that between May and November 2013, an average of 127,000 people were registered each month. Based on an analysis of population movements within and from Syria, the sixth Syria Regional Response Plan (RRP6) foresees up to 4.1 million refugees in the region by the end of 2014. This would make Syrians the largest refugee population in the world.

The RRP6 addresses three specific target populations, namely: refugees in fixed settlements like camps; refugees living outside camp settlements; and host communities. The Plan foresees a coordinated response to the needs of new arrivals, clearer assessments of vulnerability among the existing refugee populations, and to address the most immediate local priorities such as waste management, water supply, small-scale reconstruction and health service delivery. The response strategies were developed with a view to ensuring cost-efficiency, impact and effectiveness, as well as accountability towards refugees and donors. This protracted displacement has placed great pressure on refugees' capacity to be self-sufficient, and many resort to negative coping strategies.

Whilst refugee influxes invariably incur local socio-economic consequences, the scale and depth of the Syrian refugee crisis represents an unprecedented and urgent challenge for host country authorities and the international assistance community. Consequently, an important component of the RRP6 is devoted to strengthening local service delivery and resilience, thereby promoting social cohesion and enhancing refugee and host community protection. Although limited in its intended scope and duration, the RRP6 is designed to complement longer-term development interventions upon which stabilization processes in the region will largely depend. The strategic response plan is intended to be flexible, and will be modified as conditions change. It will be re-visited in mid-2014 to validate planning assumptions and harmonize interventions with other emerging platforms and plans.

The RRP6 has drawn on a common set of needs assessments based on qualitative and quantitative data collected from refugee and local communities. The Plan has been developed in a participatory manner with several contributors – national governments, international inter-governmental agencies (IGOs), as well as international and national non-governmental organizations (NGOs) and refugee communities, and incorporates the outcome of consultations with donors and other stakeholders. While all country strategies in the RRP6 have been developed in close consultation with relevant national authorities, the Governments of Egypt, Jordan and Lebanon have chosen to present their financial requirements jointly in this Plan.

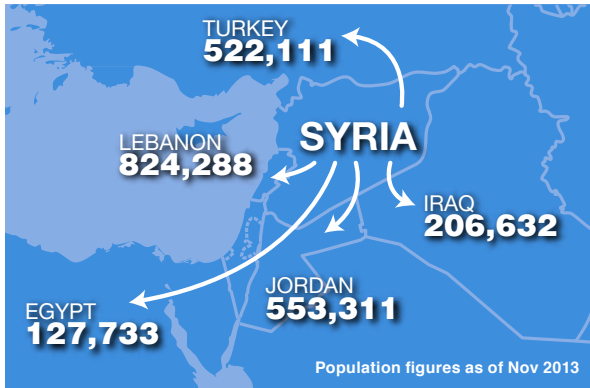
The RRP6 is structured in three parts: the strategic overview, outlining the main strategic features of the Syria regional refugee response; five country chapters setting out the context and response strategy for each of the main host countries; and 35 country sector chapters providing detailed information on specific needs and objectives per sector. In recognition of the total length of the plan, the document is available digitally from the Syria Regional Refugee Response portal (<http://data.unhcr.org/syrianrefugees>).

RRP6 components

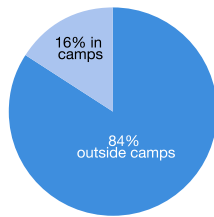
1	STRATEGIC OVERVIEW	Overall presentation at situation level of needs, response and key strategic outlook
5	COUNTRY CHAPTERS	Country overview of needs, vulnerabilities, response strategy and priorities
35	COUNTRY SECTORS	Statement of needs, objectives, results, outputs, categorization and financial requirements

Refugee Response Dashboard

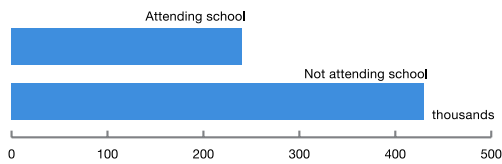
SYRIA REGIONAL RESPONSE PLAN 2014



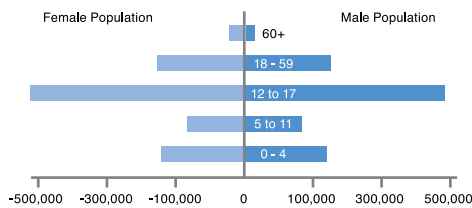
Syrian refugees in the region projected by Dec 2014
4,100,000



Syrian refugee children aged 5 to 17 attending school



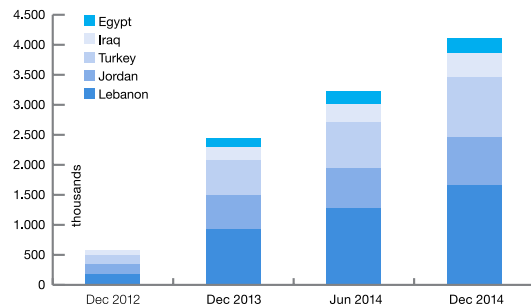
Age & Gender of Syrians in the region



Strategic Objectives

- Up to 4.1 million refugee women, girls, boys, and men fleeing the Syrian conflict have equitable access to effective protection, including access to territory.
- The most vulnerable among the 660,000 refugees accommodated in organized refugee settlements, and up to 3,440,000 residing in private accommodation or settlements benefit from improved essential services.
- The most vulnerable host communities benefit from improved access to quality essential services and access to livelihood opportunities, thereby ensuring that an increased number of refugees benefit from community-based protection.
- The targeting and planning of long-term national aid programs is informed by structured dialogue and the timely provision of quality inter-agency assessment information on refugees and host communities.
- Up to 4.1 million refugees will benefit from the early planning for longer-term durable solutions strategy in accordance with international law.








Refugee population in 2012, 2013 and projection 2014



REFUGEE PLANNING FIGURES

2014 PLANNING FIGURES (persons – rounded to thousands)						
As of	Lebanon	Jordan	Turkey	Iraq	Egypt	Total
Dec 2012	180,000	168,000	148,000	74,000	13,000	588,000
Dec 2013	905,000	575,000	562,000	216,000	145,000	2,403,000
June 2014	1,277,000	687,000	781,000	308,000	197,500	3,252,000
Dec 2014	1,650,000	800,000	1,000,000	400,000	250,000	4,100,000

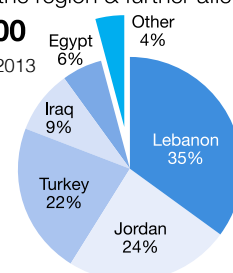
PRIORITY AREAS OF HUMANITARIAN INTERVENTION

	Protection	<ul style="list-style-type: none"> • 4,100,000 Syrians will have access to asylum and safety and will be registered to ensure their safety and protection • Service providers, authorities and the community capacities to prevent SGBV are strengthened and holistic and safe response services are accessible to all survivors • National and community-based child protection mechanisms are strengthened to prevent and respond to abuse, neglect, violence and exploitation and access to appropriate services is immediate • 817,000 individuals in host communities will benefit from community-support projects and services
	Food	<ul style="list-style-type: none"> • 3,100,000 Syrian refugees, Palestinian refugees from Syria, Lebanese returnees and host communities overall will be provided with food assistance including in-kind, cash or vouchers
	Education	<ul style="list-style-type: none"> • 749,000 girls and boys will be supported in attending formal education • 246,000 children will benefit from psychosocial support activities in education settings • 115,000 educational personnel in host communities will benefit from training and capacity-building activities
	Shelter	<ul style="list-style-type: none"> • All newly-arrived refugees will receive temporary emergency shelter upon arrival to asylum country • 500,000 Syrians in camps will be supported with shelter assistance • 228,000 refugees will be covered by a variety of other assistance related to accommodation and shelter
	Basic Needs	<ul style="list-style-type: none"> • 1,200,000 refugees will be provided with core relief items • 465,000 refugee households will receive winterization relief items and assistance
	Health	<ul style="list-style-type: none"> • 1,500,000 Syrians will be assisted with primary health care services • 653,000 Syrians will be provided with secondary and/or tertiary health care • 21,000,000 people will be immunized against polio
	WASH	<ul style="list-style-type: none"> • 1,072,000 refugees in the camps and outside camps will have access to safe drinking and cooking water • 700,000 Syrians will be provided with sanitation assistance • 285,000 individuals in host communities will benefit from the promotion of safe hygiene practices
	Livelihoods	<ul style="list-style-type: none"> • 1,045,000 Syrians will benefit from projects increasing livelihood opportunities

HOST COMMUNITIES IN ASYLUM COUNTRIES BENEFITING FROM ASSISTANCE PROJECTS

Asylum country	Host communities assisted (individuals)
Egypt	250,000
Iraq	300,000
Jordan	700,000
Lebanon	1,500,000
Turkey	10,000
Total	2,760,000

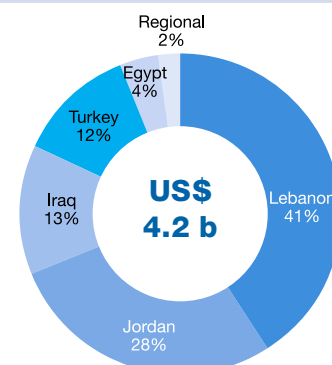
Syrians in the region & further afield
2,273,000
as of 1 Dec 2013



FUNDING REQUIREMENTS

Country	First six months 2014 by category				Last six months 2014	Host Govts
	2014	Life-saving measures	Vulnerabilities	Capacity-Building		
Egypt	168.8	60.9	31.5	8.9	67.4	4.3
Iraq	552.5	170.7	99.1	17.7	265.1	-
Jordan	1,200.7	391.2	252.3	37.6	519.6	413.7
Lebanon	1,723.9	526.2	260.8	62.7	874.2	165.1
Turkey	522.4	147.3	86.3	23.7	265.1	-
Total	4,264.7*	1,296.3	730.0	150.6	1,991.4	583.1

*This includes US\$ 96.4 million in regional requirements



Key elements

- The Syria Humanitarian Assistance Response Plan (SHARP) outlines a scenario of continued conflict, violence, persecution and economic decline in Syria, driving internal displacement and refugee arrivals. By the end of 2014, it is anticipated that an additional 1.7 million refugees will have been registered in neighbouring countries. **The total registered refugee population in the region is expected to reach 4.1 million by December 2014.**
- As the refugee crisis enters its fourth year, the **RRP6 will address three target groups: refugees in camps; refugees residing outside camps; and host communities.** More than 4.1 million refugees and 2.7 million people from host communities will benefit from this plan.
- The **RRP6 maintains protection as its core objective** and responds to the immediate humanitarian needs of refugees including protection and essential services, including food, health, education, and material assistance in support of the most vulnerable. These services save lives and prevent a further escalation of vulnerabilities. Response strategies have been developed to be cost-efficient, to have a high impact and to provide accountability benchmarks towards refugees and donors.
- Refugee protection within the context of the Syria refugee response focuses on five priority objectives: access to territory and registration, prevention and response to Sexual and Gender-Based Violence, Child Protection – including strategic links between SGBV, Child Protection and Education – meaningful community participation and durable solutions.
- **Children** suffer indiscriminately as a result of the conflict. The number of children living as refugees is expected to exceed 2 million by December 2014. Investments in life saving assistance for children including health and clean water are critical. It is equally important to invest in children's learning and protection spaces, ensuring that a future generation of Syrians is not lost.
- The detection of **polio** in Syria has been declared a public health emergency. Low immunization rates among children, coupled with large population movements, have created a high-risk environment for further transmission which must be urgently addressed.
- The overall complexity of the Syrian crisis and its impact on neighbouring countries merits a **comprehensive regional response**, aligned with national plans and strategies led by Governments. The preparation of the RRP6 has been coordinated with host Governments across the region whose own contributions to the refugee crisis have been the most substantial. The RRP6 budget features a special provision for Government requirements.

- Providing appropriate support for the local authorities and populations most severely affected by the conflict and the large refugee presence is an important new aspect of the strategy. **Building resilience and ensuring social cohesion** among local and refugee populations will be key objectives in future.
- The RRP6 was drafted through a **broad participatory planning process** coordinated and led by UNHCR. It is the product of the combined efforts of Governments, UN agencies, other IGOs, international and national NGOs and refugee communities.



*Syrian children express their feelings through art as part of a UNICEF-supported programme in the Osmaniye and Sariçam camps in Turkey.
UNICEF Turkey/Lucy Watt*

Planning

Planning scenario

The RRP6 planning scenario is aligned with the Syria Humanitarian Assistance Response Plan (SHARP) scenarios and anticipates continued insecurity in Syria with population flows to and across borders. Sustained and escalating violent conflict, with pockets of entrenched fighting in densely populated areas causing civilian casualties and destruction to homes and infrastructure, are drivers of the conflict. The conflict is further characterized by widespread violations of human rights and international humanitarian law, such as targeted attacks against civilians including children, as well as against services and supplies.

Consequences include a deepening economic crisis, reduced resilience and coping mechanisms with more than half of the population in Syria estimated to be living in poverty. Inflation is as high as 100 per cent in some areas, and according to WFP the import of basic commodities such as oil, rice and lentils has increased up to 60 per cent. Disruptions have weakened health and social services, and reduced the availability of basic medications. More than 3,000 schools have been destroyed and at least 1.9 million children have dropped out of school. People living certain areas are considered to be sealed-off from humanitarian assistance. Populations are often displaced repeatedly as they seek safety for their families. Moreover, there are concerns that some of the displaced are unable to freely access and cross borders to seek asylum.

The planning scenario counts on continued excellent cooperation with Governments in the region, who allow free and unhindered access to borders for people who are seeking international protection. Humanitarian space in refugee-hosting countries is expected to be preserved, with continued strong collaboration among actors to respond collectively to this humanitarian crisis. Calls for international burden-sharing will continue, and all countries beyond the region are urged to put in place mechanisms to allow refugees humanitarian access.

Population planning figures

As of November 2013, more than 2.2 million refugees are registered or awaiting registration with UNHCR or respective refugee-hosting Governments in the region. The current monthly trend reflects a net influx of 127,000 Syrians fleeing from their country each month. In addition, more than 31,000 Syrians have sought asylum globally during the first half of 2013.

2014 PLANNING FIGURES							
		Lebanon	Jordan	Turkey ⁱ	Iraq	Egypt	Region
2013	As of 31 December 2012	180,105	167,959	148,441	73,749	13,059	583,313
	Projected December 2013	904,873	574,808	562,187	216,283	145,042	2,403,192
2014	Projected as of June 2014	1,277,436	687,404	781,093	308,141	197,521	3,251,596
	Projected as of December 2014	1,650,000	800,000	1,000,000	400,000	250,000	4,100,000
i The Government of Turkey foresees a total of 1.5 million Syrians in the country by end-December 2014. An enhanced registration capacity for Syrians outside camps is planned by the Government of Turkey in 2014. The planning figure for Turkey will be adjusted in accordance with changes in the registration environment as implemented in 2014.							

The RRP aims to assist up to 4.1 million refugees as well as up to 2.7 million people who are members of hosting communities. The estimated numbers of people living in host communities are based on the planned outputs and estimated populations in a given geographic area.

Objectives

The strategic regional objectives address protection and humanitarian needs of new arrivals as well as asylum-seekers, refugees and others in need of international protection and assistance. RRP partners are committed to ensuring that humanitarian assistance equitably addresses the needs of people of concern residing in camps, informal settlements and other rural or urban areas. The RRP6 objectives are designed to ensure meaningful participation of communities, promote community-based protection and provide support to vulnerable individuals, host communities and municipalities, complementing or supporting national government-led responses. The objectives are not intended to comprehensively address institutional or economic and social development gaps of refugee-hosting countries.

By December 2014:

- **4.1 million** refugee women, girls, boys and men fleeing the Syria conflict have equitable access to effective protection, including access to territory.
- The most vulnerable among the **660,000** refugees accommodated in organized refugee settlements, and **3,440,000** residing in private refugee accommodation or settlements benefit from improved essential assistance services.
- The most vulnerable host communities benefit from improved access to quality essential services and access to livelihood opportunities, thereby ensuring that refugees benefit from community-based protection.
- The targeting and planning of long-term national aid programmes is informed by structured dialogue and the timely provision of quality inter-agency assessment information on refugees and host communities.
- **4.1 million** refugees will benefit from the early planning for longer-term durable solutions strategy in accordance with international law.

Categorization of response priorities

This response plan classifies expected outputs into three categories: life-saving or preventing immediate risk of harm; preventing deterioration of vulnerabilities; and strengthening capacity and resilience among refugees and host communities. This categorization takes into consideration the risk of physical and social harm to refugees, as well as access to protection and the absorption capacity of the host communities.

Categorization is a tool to assist donors and others in making resource allocation decisions, taking into account the multi-faceted nature and impact of various interventions. Resources invested in one category could offset – or increase – financial requirements in other categories. For example, insufficient investment towards “preventing deterioration of vulnerabilities” could necessitate additional requirements for “life-saving” situations. Alternatively, investments in capacity-building and strengthening national capacities could offset costs to maintain parallel system support, for example, in health care. Prioritizing interventions in the respective categories would necessitate substantive dialogue between governments, donors and RRP partners through a mutual accountability framework.

Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-building/Resilience
Lack of (physical, social, medical) intervention leads to a life-threatening situation or serious imminent harm	Lack of (physical, social, medical) intervention leads to serious deterioration in wellbeing and/ or increased vulnerability, serious long-term negative impact	Lack of (physical, social, medical) intervention leads to increased dependency and limited capacity for increased resilience
Essential for preserving the protection space for refugees, including through counteracting a serious deterioration in host community wellbeing	Essential for improving the protection space for refugees, including through preventing a deterioration in host-community well-being	Building national capacity to maintain/improve protection space
Essential for ensuring access to protected status, access to basic rights and preventing imminent harm	Essential for promoting access to rights, safeguarding well-being and building up resilience	Critical for building longer-term and sustainable resilience and capacities; strengthening civil society structures

Through this categorization, the RRP6 puts greater emphasis on a resilience-based approach to cope with uncertainties, recover from external shocks, and support early investments for medium and longer-term stabilization¹. The resilience strategy acknowledges the importance of a continued focus on humanitarian needs, especially unmet ones. Within the Plan, it is designed to support local communities and authorities with activities in areas water and sanitation, social cohesion, health, and employment, delivered by humanitarian and development actors.

Mid-year review / 6 + 6 budgeting

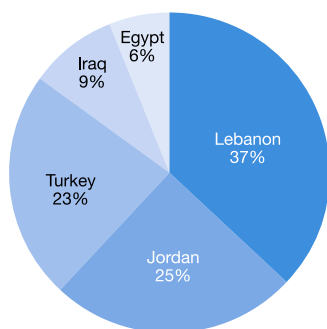
The RRP6 presents funding requirements based on sector objectives for 2014 in alignment with identified priorities and needs for the full twelve months. Response partners have further broken down the full year's requirements into six-monthly portions to allow both appealing agencies and donors to reassess coverage, identify gaps and better target support at the mid-year mark.

The mid-year review of the RRP6 will revisit the planning figures, objectives, strategy and budgetary requirements. This ensures a flexible and more adequate response planning to the volatile situation and population flows, and provides an opportunity for planning revisions in relation to other resource mobilization platforms and national-led strategies. The review will also allow agencies to identify new needs, re-categorize outputs and adapt their activities to the fast-changing operational environment given the difficulty to exactly predict how the regional situation will evolve in the coming months.

¹ The UNDG paper, *A Resilience Based Development Response to the Impact of the Syrian Crisis*, defines resilience as 'the ability of households, communities, markets and societies to withstand shocks, recover and support transformational change for sustainability.'

Humanitarian needs overview

Refugee population hosted by neighbouring countries



The conflict and the related refugee crisis have drawn a strong humanitarian response. To date, the response has successfully ensured that millions of refugees have been sheltered, fed, and supported with essential assistance. Their conditions, while far from ideal, have been stabilized. Yet the crisis continues to generate fresh challenges. As outlined above, violent conflict and insecurity are predicted to result in large-scale displacement during 2014, adding to the existing demands of a complex and evolving refugee situation.

The conflict and its spillover effects are affecting economic, social, and human development, most dramatically inside Syria, but also in the neighbouring countries. The displacement of millions of refugees and the shock of the surge in overall demographic numbers have had a considerable impact on the economies of the countries and communities affected, most notably in Lebanon and Jordan where refugees account for 18 per cent and 10 per cent of the overall population respectively.

“The impetus to act is greater today than ever before. There are millions of Syrian men, women and children who face a daily struggle for survival. As they persevere, we are obliged to do our utmost to support and protect them.”

David Miliband, President and CEO of the International Rescue Committee (IRC)

The increasing stress on local living conditions changed the emphasis within the RRP6 planning due to a mounting realization that adequate refugee protection cannot be maintained without enhancing social cohesion and addressing investment in local infrastructure, economy and social systems. The early and unprecedented engagement of development agencies in the Syria refugee emergency also

reflects an understanding that longer term, more comprehensive assistance is required to achieve stability and build resilience.

The RRP6 maintains refugee protection as its core objective. The key components are outlined below and retain a strong focus on delivering essential assistance. They are designed to address the continuing flow of new arrivals in addition to the evolving needs of the more vulnerable refugees already in exile. They incorporate a number of important lessons learned with respect to coordination arrangements, technical interventions, and effective targeting. With enhanced focus on social cohesion, the RRP6 also anticipates the need for complementary development interventions and for a more comprehensive engagement of all key stakeholders.

“The Syrian war and its ten million victims represents the greatest humanitarian challenge in a generation. I have in my 30 years of international relief work never seen anything like this massive and forced displacement of civilians. We have to confess that we are still not even close to give the protection, assistance and hope that the people in the cross-fire deserve.”

Jan Egeland, Secretary General, Norwegian Refugee Council (NRC)

PROTECTION

A fundamental tenet of protection is that refugees are able to secure entry to safe territory, and the key protection response remains preservation of access for those fleeing conflict, and protection from *refoulement*. Notwithstanding that countries in the region have been exceptionally generous to receive and host millions of refugees, it is noted that that access is increasingly being restricted, in part due to the challenges of absorbing additional refugee arrivals as well as security concerns. Increased border management impedes entry and has a serious impact for Syrians who seek safety in neighbouring countries. Some Syrian refugees, Palestinians and others thus resort to extreme measures to seek safety, including smuggling and dangerous sea journeys. In this context, the need for solidarity to support neighbouring countries to maintain open borders to preserve protection space cannot be overstated.

Providing protection in countries of asylum necessitates equitable assistance to meet the specific needs of women, girls, boys and men, including in health, education, and shelter. Registration is the starting point for access to these services and serves to identify refugees who may have specific protection needs. In 2013, 1.7 million Syrians were registered in the region, an over 340 per cent increase compared to 2012. UNHCR has increased its field presence and is employing mechanisms such as mobile registration missions and providing transport support to facilitate access to registration. UNHCR has also cleared the registration backlog in Egypt, Iraq and Jordan, and Syrian refugees are registered upon approach. Moreover, with an estimated 84 per cent of refugees living outside camps, increased outreach capacity is needed to ensure all persons of concern have access to information and counselling regarding their status and available services.

“The true magnitude of persons facing, as a result of war, disabling circumstances and an increased exposure to vulnerability remains untold. Handicap International is providing a comprehensive range of items and services to address the basic and specific needs of the most vulnerable within the Syrian crisis context. Yet, with every need met, two more arise.”

Handicap International, HI

Children under the age of five years make up 18 per cent of the registered population, and among them nearly 8,000 children have been identified as being separated from their families. Twenty-seven per cent of registered refugee families are led by single females and three per cent of the population are elderly.

Approximately 18 per cent of refugees in Jordan and Lebanon are living with at least one impairment, be it physical, visual, auditory, or intellectual. Approximately two-thirds of refugees over the age of 60 have at least one impairment, and more than 20 per cent of refugees of all ages are presented with at least one difficulty in carrying out key daily living activities. In addition to the hardship faced by all Syrian refugees, people with disabilities, injuries, chronic illnesses, and older

persons are disproportionately affected by their displacement. These refugees have specific needs for humanitarian assistance. Disability and impairment often requires a degree of medical care, and can prevent people from accessing sources of livelihoods, which increases their overall needs, including for cash assistance. Physical accessibility of services, effective outreach mechanisms, further inclusive interventions and prioritization of these vulnerable groups are needed to prevent these groups from “slipping through the net” of the response. Adequate funds must be allocated to ensure that agencies can provide services that are physically accessible and inclusive.

All protection chapters in the RRP6 were reviewed to ensure the inclusion of women, girls, men and boys.

Sexual and gender-based violence (SGBV)

SGBV remains a significant protection risk faced by Syrian refugees including early marriage, domestic violence, survival sex and sexual exploitation among other violations. The risks for refugees are exacerbated by numerous factors including insecurity, limited livelihood opportunities, lack of access to formal and non-formal education opportunities, lack of access to housing and the lenient application of national legal frameworks. Moreover, in the context of displacement many women and children are living without their traditional family and community support structures, which

“I remember the house where I lived with my family and the garden where we grew tomatoes, lemons and olives. Sometimes I wish I could become a bird and fly home. Then suddenly I remember the bombing, the shelling, the war, the people killing kids, killing women with knives. And then I imagine these things and I am back to reality. I know it is better to stay here. I want to stay here and keep my children safe.”

35 year-old Mervat from Dara'a

further exacerbates the risks of SGBV. In addition to the risks of SGBV faced in countries of asylum, significant numbers of refugees experienced grave forms of SGBV before fleeing Syria, including not only women and girls but also men and boys, and are in of response services upon arrival.

In Egypt, 25 per cent of Syrian respondents to a UN joint assessment deemed the country unsafe for Syrian women due to increased instances of sexual harassment, which as a result, led to limited mobility

and freedom of movement among Syrian refugee women there. In Jordan, more than 40 per cent of women and girls surveyed reported spending most of their time inside the home due to security concerns and worry about verbal or physical abuse or sexual harassment. In Iraq, field visits and discussions with key stakeholders confirm that SGBV is a prime protection concern among young Syrian refugees both in camp and in urban settings.

While partners strive to ensure that quality and coordinated response services are available for survivors, and that prevention efforts are ongoing, some challenges still remain. Survivors are generally reluctant to report incidents of SGBV and seek life-saving response services due to fear of dishonouring their families or the risk of retribution for reporting violence and its perpetrators – an obstacle faced by survivors from both the refugee and host community alike that hinders survivors' ability to receive the care they need. Moreover, due to fear for their security, women and girls in particular suffer from progressive restriction of freedom of movement, which in turn limits possibilities

to access information and services. Finally, increasing numbers of refugees have required and will continue to require a continuous scale-up of gender and age appropriate programmes in order to mitigate risks of SGBV and meet the needs of all survivors.

For instance, increased access to psychosocial support services and mental health services are needed in the region, by survivors of SGBV including women, girls, men and boys, as well as by families grieving the loss of dead or long missing family members, and refugee girls and boys traumatized by the violence they have witnessed and experienced in Syria. Additionally, due to deteriorating conditions linked to the increasing strain on resources in countries of asylum, survivors as well as persons with specific needs such as women at risk are in need of safe shelter, safe access to WASH facilities, and targeted livelihoods support to promote resilience and to prevent SGBV.

Protecting children

Of the more than 100,000 people killed in Syria since March 2011, over 7,000 were children. Hundreds of thousands of children have been wounded, including debilitating injuries causing life-long disabilities, in addition to the high incidence of psychosocial distress caused by exposure to a conflict of this nature and the duress of flight.

“We need to remember that in a humanitarian crisis like Syria meeting the needs of women and girls is one of the best ways to ensure the health, security and well-being of families and communities.”

*Dr. Babatunde Osotimehin, UNFPA
Executive Director*

The conflict continues to erode children’s protective environments. Ongoing, long-term exposure to extreme violence, hardship and displacement are known to have a lasting impact on children’s psychosocial wellbeing, as confirmed by various assessments. Displacement has also exacerbated issues of family separation, child labour, risks of trafficking, and SGBV including early marriage, domestic violence, and survival sex.

Nearly 8,000 unaccompanied and separated children have been registered in host countries. In Jordan, one in ten refugee children are estimated to be working, which is some 30,000 Syrian refugee boys and girls engaged in labour activities according to the Ministry of Labour. Data on child marriages among Syrians in Jordan indicates an increasing prevalence of the phenomenon. Children at risk of recruitment by or formerly associated with armed groups, street children and children engaged in the worst forms of child labour present additional needs.

The increase in the number of children exposed to protection violations in host countries is leaving child justice and social services severely overstretched. Children’s lack of legal documents remains a particular challenge. Service providers grapple to respond to a range of complex protection concerns such as child recruitment, separated children and domestic. In parallel, socio-economic pressure and social unrest undermines the protective role of families and communities leaving children exposed to mounting risks such as early marriage and survival sex. Ensuring adequate support to local authorities to register all births and provide every child with a birth certificate will

help children gain access to essential child protection services, facilitate solutions and help prevent statelessness.

Documentation and preventing statelessness

The lack of marriage certification, or the loss or destruction of family registration books in Syria, creates problems for the registration of new-born refugee children. A recent survey on birth registration in Lebanon found that 77 per cent of 781 refugee new-borns did not have an official birth certificate. Continued outreach to raise awareness about the necessity and how to register births, as well as legal assistance and protection counselling for Syrian refugees are therefore essential.

The vulnerability of Palestinians in Syria has increased considerably as the conflict has now over-run most of their camps and communities in Syria. The loss of safe refuge provided to them in Syria for 64 years, has plunged the Palestinians into an existential crisis defined by their protracted refugee status and severely restricted options for flight. Of the 540,000 Palestine refugees registered with UNRWA in Syria, about half have been displaced and an estimated up to 80,000 have fled the country. Fifty-one thousand have reached Lebanon, 11,000 have identified themselves in Jordan despite restrictions on their entry, 6,000 are reportedly in Egypt, and smaller numbers have reached Gaza, Turkey and farther afield. UNRWA and the humanitarian community continue to advocate with neighbouring States the critical principles of *non-refoulement* and equal treatment of refugees to try to ensure that Palestinians fleeing the conflict receive the assistance and support they require.

UNRWA has a dedicated appeal document for 2014 that reflects the specificity of the plight of the Palestine refugees within the context of the regional Syria crisis. It describes UNRWA's ongoing efforts to address their critical needs and support their resilience to cope with the conflict. The document is accessible at: www.unrwa.org.

Durable solutions

Providing solutions in the form of resettlement or relocation to safe third countries is a critical and often life-saving intervention for refugees having urgent protection needs and compelling vulnerabilities. Such solutions form an important component of the protection strategy for Syrian refugees. These interventions, in addition to providing solutions for vulnerable individuals and families are also an expression of solidarity and burden sharing with countries in the region currently hosting more than two million Syrian refugees.

ESSENTIAL NEEDS AND SERVICES

Refugees often arrive in neighbouring countries with little else than their family members, some clothes and limited personal belongings. Refugees in the region struggle to meet their basic needs and gain access to essential services including for health and education. As the situation is prolonged, it is estimated that 780,000 households need additional support, either through food or cash assistance.

“Millions of lives have been shattered by this conflict with families fleeing their homes into neighbouring countries. The least we can do is to spare mothers having to worry about how to feed their children. WFP provides life-saving food assistance mainly through food vouchers, which also help inject money into the local economy, supporting host communities as well as refugees.”

Muhannad Hadi, WFP Regional Emergency Coordinator

In Jordan, recent assessments of refugees in host communities have found that the income versus expenditure gap caused by limited livelihood opportunities, rising rent and service prices induces increased use of negative coping strategies as the crisis continues. These negative coping strategies, particularly eating less diverse quality foods, taking on debt and sending adolescent boys to work, are becoming more and more prevalent as households spend their savings and sell their remaining assets.

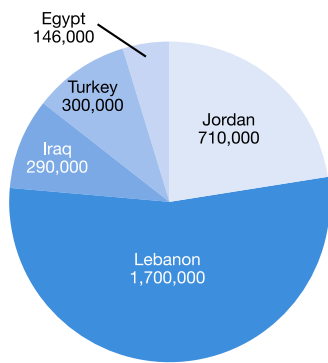
Food security

The majority of Syrian refugees rely on humanitarian food assistance as their primary source of food. Without external support, Syrian refugee vulnerabilities would likely increase, particularly affecting vulnerable groups such as female-headed households, children, the elderly, sick and the disabled.

In Lebanon and Egypt, 70 per cent of refugees are food insecure. The results of the Vulnerability Assessment of Syrian Refugees (VASyR) in Lebanon also show that half of a household's expenditure was spent on food. In Iraq, large numbers of Syrians, in both camp and non-camp settings, cite food as their top priority need. In Jordan, food expenditure by refugee families constitutes more than a third of their budgets. In Turkey, the vast majority of families living in refugee camps rely on humanitarian assistance to meet their daily food needs.

Food insecurity

Total Beneficiaries in need under the RRP6



Refugee households report resorting to spending their savings, taking their children out of school to work, and relying on credit and selling household assets to meet their food needs. The amount and nutritional value for the food accessible to refugees is critical to prevent the occurrence of malnutrition. Incidents of child malnutrition, though not significantly prevalent, have been identified inside Syria and in nearly every refugee-hosting country in the region. The prevalence of malnutrition among refugees has been either within acceptable levels or poor², according to WHO categorization. Nonetheless a number of aggravating

factors that could undermine refugees' nutritional well-being have been recorded; e.g. pockets of food insecurity, limited dietary diversity for the general population and young children (6-23 months) in particular, disease trends and poor sanitation. Lack of access to food, combined with lack of income and progressive depletion of savings might increase risks of survival sex, sexual exploitation and child labour.

Shelter

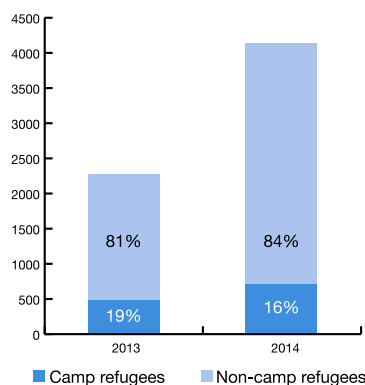
Over 420,000 Syrians are living in tented, non-permanent accommodation and more than 105,000

“KURDS has worked in collaboration with our contractors and Syrian refugee employees in order to build half of Dara Shakran Camp which will eventually host 10,000 Syrian refugees.”

Shakwat Taha, KURDS Executive Director

people are sheltered in sub-standard informal settlements. Shelter solutions ranging from container-like accommodation to plastic tarpaulin spread across makeshift frames provide limited protection from harsh weather conditions. The winter is particularly challenging for people residing in tented accommodation. It is estimated that nearly 540,000 Syrians in tented non-permanent accommodation will require shelter support during 2014 in Iraq, Jordan and Lebanon.

Camp vs. non-camp refugee population



More than eighty per cent of refugees in the region live outside camps, including about 8,000 in collective centres. Shelter conditions in collective centres and unfinished buildings offer limited privacy and may be structurally unsafe. In Turkey, for example, 62 per cent of non-camp refugees live with more than seven family members in over-crowded conditions.

2 Acute malnutrition levels among Syrian refugees in Jordan ranged between 5.1 per cent and 5.8 per cent (which is considered poor) while among Syrian refugees in Lebanon was 4.4 per cent (considered within acceptable levels in late 2012).

“The lives of millions of Syrians depend on prompt and equitable health interventions. People in the countries affected by the conflict are dying from diseases that can be prevented and cured if we turn declarations of solidarity and partnership into targeted and innovative action. Together.”

*Dr Ala Din Abdul Sahib Alwan, WHO
Regional Director*

Though accommodation in homes and apartments may be the preferred shelter solution for most refugees, it comes at a price, usually a monthly rent, which combined with economic hardship may increase the risks of communities having to resort to negative coping mechanisms.

Health and nutrition

Health needs of Syrian refugees and their host communities are of serious concern. Communicable diseases such as measles, tuberculosis, respiratory and gastrointestinal infections are putting thousands of lives at risk. The onset of winter usually triggers increased risk of respiratory infection while inadequate hygiene and sanitation conditions predispose populations to diarrheal diseases. Occurrence of these common illnesses coupled with food insecurity may provoke malnutrition. Though statistics are not complete in the region, it is estimated that less than 70 per cent of Syrian refugee children have been adequately vaccinated against polio and measles.

Current low immunization coverage amongst hundreds of thousands of displaced children under five has created a susceptible environment that allowed wild polio virus to be introduced in the region. It is estimated that for every one confirmed polio paralysis case, up to 200 children may be infected. Despite the fact that polio cases have only been detected in Syria, given the complexity of the current situation in-country and the prolonged period of undetected virus circulation a multi-country response is needed to contain and eliminate the outbreak.

Access to quality primary health care is critical for provision of preventive and life-saving treatment to vulnerable populations. Non-communicable diseases are on the rise. Diabetes, hypertension and other cardiovascular diseases can lead to disabilities that further burden an already overstretched health system, including secondary and tertiary facilities. Though medical services for SGBV survivors exist, they need to be further expanded and quality improved.

Access to reproductive health including maternal health and family planning is constrained and costly for the refugee population, while neonatal health care is limited throughout the region. There are currently about 41,000 pregnant women among the Syrian refugee population who are or will be in need of pre-natal and post-natal care and delivery services and nearly 25 per cent of child-bearing age women are likely to be pregnant. Both mothers and babies are at risk because of the lack of access to medical services, which in many cases may be compounded by trauma, malnutrition, disease, exposure to violence, and being forced to live in difficult environments. In Lebanon, up to five per cent of new-borns require neo-natal intensive care due to prematurity, foetal distress or congenital malformation. Low breastfeeding rates and high use of formula are prevalent throughout the region and leave children under one year of age at increased risk of malnutrition and death, particularly where there is poor hygiene and sanitation. Micronutrient deficiency is also common,

particularly anaemia and deficiencies of iron, vitamin A and D. Recent reports of increased cases of malnutrition pose a new challenge to the health system in the host countries, where detection, prevention and treatment of such cases has not been common in decades.

National health systems, including primary care and hospitals situated in border areas and areas of the highest refugee concentrations, are overwhelmed by a huge increase in demand. In some countries, more than fifty per cent of the refugee population has found it difficult, primarily due to financial limitations, to access essential medicines. Host communities are likewise affected, with long waiting periods and overburdened health workers and services. Out-of-pocket health expenditure is becoming a common burden for both Syrian refugees and host communities in a context of overwhelmed health systems.

One in twenty people in the region is in need of mental health care, including as a result of recent trauma or chronic mental conditions. Mental Health and Psychosocial services, for communities at large, including survivors of SGBV, need to be further expanded. Specialized and longer-term care for disabilities is limited in the region, both for refugees and host communities. Vulnerable populations face high costs related to intermediate care, as well as longer-term treatment.

Education

Nearly 2.3 million children have stopped attending school in Syria and the situation is similar in refugee-hosting countries. Currently, over 60 per cent of the 735,000 school-age refugee children are not enrolled in school. The obstacles to education and the accumulated loss of school years are jeopardizing a whole generation of Syrian children.

While education ministries in refugee-hosting countries have generally welcomed Syrian children into their national public systems, children face major obstacles to access and learning. School-related expenses, placement tests and documentation (in Egypt), the difficulties in grappling with a new curriculum and different languages of instruction (in Lebanon, Iraq and Turkey), the quality and relevance of education and concerns around overcrowding, certification and accreditation are all key factors contributing to low enrolment and attendance rates. Moreover many parents are reluctant to let their children, in particular girls, leave the house for fear of harassment and discrimination in and around schools.

In Egypt, 90 per cent of refugee children are not attending school. The situation is similarly concerning in Turkey, where some 70 per cent of Syrian children outside camps are not accessing any form of education. It is estimated that in Lebanon less than 25 per cent of Syrian children are enrolled in public education, which was already limited in capacity prior to the crisis and catering for only 30 per cent of its student population. As a result of an extensive “Back to School” campaign, the number of Syrian children enrolled in public schools in Jordan has more than doubled since last year reaching 55 per cent of the school-age Syrian population.

Accommodating Syrian children is placing a profound strain on fragile national education systems, causing delays in planned education reforms. Children from host communities, who are often themselves facing economic constraints, are studying in classrooms that are overcrowded and under-resourced. The efficiency of the public education system is at serious risk, with the most marginalized groups bearing a disproportionate burden.

Water, sanitation and hygiene (WASH)

The increased populations in refugee-hosting countries are putting additional pressure on already delicate systems in a region synonymous with water scarcity, extreme climate and insufficient or negligible water and waste treatment services. It is estimated that nearly four million people (refugees and host communities) will require continued support to maintain their access water and sanitation services in the countries affected by the crisis.

The key priority areas in all countries will be wastewater disposal, treatment and management in camps and host communities, as well as solid waste removal. These services are critical to ensuring a healthy environment, particularly in areas with a high refugee concentration in camps, informal settlements and host communities where the spread of diseases is most likely.

The existing waste treatment and disposal systems are fragile, and rely on access to scarce land resources. De-sludging is often a necessity for refugees in private households, as the majority of refugee homes are not on a system grid.

As the level of resilience decreases over time, basic essential items are becoming unaffordable to refugees. In Jordan, nearly 40 per cent of refugees report washing constraints due to the cost of soap and lack of water. In Lebanon, 27 per cent of refugees do not have access to potable water.

Livelihoods

Having access to and participating in the labour market to earn wages is a preoccupation for all refugees in the region. Labour policies vary between countries, and only a few offer Syrians full access to the labour market. In Iraq, registered refugees who have residency permits are able to legally work, though residency permits are difficult to obtain. Though there are some special categories which may lead to employment in refugee-hosting countries, most refugees throughout the region have limited legal access to the labour market. Women and persons with disabilities, both among refugees and the local community, suffer from additional challenges in accessing the labour market.

While legal access to the labour market is a first step, finding employment opportunities, both in the formal and informal sectors, is challenging. Even in countries where refugee employment is legal, most refugees are unable to compete equitably with locals for job opportunities, especially for professional and skilled employment. For those refugees who are able to find work, most

are engaged in unskilled daily labour, often at far lower wages than the national average, in environments without insurance or adequate safety measures. The wages and work conditions tend to be exploitative for many.

Child labour is also prevalent throughout the region, often in dangerous conditions, jeopardizing lives at the expense of educational opportunities. An estimated over 90 per cent of refugees are unemployed in Jordan and 57 per cent in Egypt.

Moreover, competition for jobs affects salaries, reducing wages to unacceptable levels, and creates the potential for conflict between the host and refugee population. National economies in the region are additionally affected by the loss of Syria as a key trading partner and industrial consumer owing to the impact of the crisis on the Syrian economy.

“This prolonged crisis is a catastrophe for Syrian families whose livelihoods, health and children’s future are in absolute jeopardy. The humanitarian community must respond rapidly with life-saving assistance both inside and outside Syria, while fostering the resilience of Syrian refugees and their hosts, particularly young people, to weather this ongoing crisis and have hope for the future.”


Neal Keny-Guyer, Mercy Corps CEO




UNHCR

Response Framework

The target population includes the number of targeted beneficiaries for all countries in the region. The “key response” below includes only a selected example of the response and is not inclusive of all planned response activities. This table provides an overview of the response in the region per sector, highlighting financial requirements; target population; and key responses including expected output or impact in each sector.

 Protection			
Financial requirements	Target population		Key response
559.4 million	Camp	660,000	<ul style="list-style-type: none"> 4,100,000 Syrians will have access to asylum and safety and will be registered to ensure their safety and protection Strengthen the capacities of services providers, authorities and the community to prevent SGBV and ensure holistic and safe response services are accessible to all survivors Strengthen national and community based child protection mechanisms to prevent and respond to abuse, neglect, violence and exploitation and ensure immediate access to appropriate services 817,000 individuals in host communities will benefit from community-support projects and services
	Non-camp	3,440,000	
	Host community and others	865,000	

 Food			
Financial requirements	Target population		Key response
1.15 billion	Camp	660,000	<ul style="list-style-type: none"> 3,100,000 Syrian refugees, Palestine refugees from Syria, Lebanese returnees and host communities will be covered by food security assistance through in-kind, cash or vouchers
	Non-camp	1,909,000	
	Host community and others	708,057	



Education

Financial requirements	Target population		Key response
393.3 million	Camp	266,000	<ul style="list-style-type: none"> 749,000 girls and boys will be supported in attending formal education 246,000 children will benefit from psychosocial support activities in education settings 115,000 educational personnel in host communities benefiting from training and capacity activities
	Non-camp	407,000	
	Host community and others	710,000	



Shelter

Financial requirements	Target population		Key response
367.1 million	Camp	360,000	<ul style="list-style-type: none"> All newly-arrived refugees will receive temporary emergency shelter upon arrival to asylum country 500,000 Syrians in camps will continue to be supported with shelter assistance 228,000 refugees will be covered by a variety of other assistance related to accommodation and shelter
	Non-camp	905,500	
	Host community and others	226,000	




Basic needs


Financial requirements	Target population		Key response
481.6 million	Camp	460,000	<ul style="list-style-type: none"> 1,200,000 refugees will be provided core relief items 465,000 refugee households will receive seasonal support
	Non-camp	1,011,228	
	Host community and others	84,873	



Health

Financial requirements	Target population		Key response
442.3 million	Camp	460,000	<ul style="list-style-type: none"> 1,500,000 Syrians will be assisted with primary health care services 653,000 will be provided with secondary and/or tertiary health care 21,000,000 people will be immunized against polio
	Non-camp	2,050,000	
	Host community and others	955,000	

 WASH			
Financial requirements	Target population		Key response
499.2 million	Camp	360,000	<ul style="list-style-type: none"> 1,072,000 refugees in the camps and outside camps will have access to safe drinking and cooking water 700,000 Syrians will be provided with sanitation assistance 285,000 individuals in host communities will benefit from the promotion of safe hygiene practices
	Non-camp	995,000	
	Host community and others	850,000	

 Livelihoods			
Financial requirements	Target population		Key response
273 million	Camp	36,200	<ul style="list-style-type: none"> 1,045,000 Syrians and individuals in host communities will benefit from projects increasing livelihood, including through income generation or employment programmes
	Non-camp	493,570	
	Host community and others	516,720	

Total		
Financial requirements	Target population	
4.2 billionⁱⁱ	Camp	660,000
	Non-camp	3,440,000
	Host community and others	2,760,000

ii It includes US\$96,447,000 for regional programmes.

Strategic response priorities

As the situation in Syria continues to evolve, response partners have identified strategic objectives to meet throughout the fourth year of the refugee crisis that address the most immediate protection and assistance needs that take into account the deteriorating situation both inside Syria that impact the well-being and self-sufficiency of people forced to flee, as well as the precarious living conditions and resilience of refugees who have already been displaced for longer periods of time. The RRP6 objectives recognize that life-saving interventions need to be complemented by interventions that address the specific needs of a population who are affected by conflict, displacement and hardships. This includes cross-cutting priorities such as prevention and response to victims of SGBV and other persons at risk, child protection as children under 18 years of age make up half of the refugee population, health assistance and psychosocial support. Furthermore, as response partners continue to build up presence, capacity and efficiency, strategic planning will also allow humanitarian partners to address previously under-resourced and longer-term needs such as education and preventative health initiatives including measles and polio vaccination programmes.

Maintaining protection space

As refugees from Syria continue to arrive in neighbouring and other countries, the overriding challenge will be to maintain sufficient support to preserve the protection space in the region. The resources provided will thus serve to support activities and programmes in areas identified as key protection objectives.

Refugee protection within the context of the Syrian refugee response focuses on five priority objectives: access to territory, sexual and gender-based violence prevention and response, child protection, including education, meaningful community participation and durable solutions.

Advocacy efforts with Governments will continue across the region to maintain open borders and uphold the principle of *non-refoulement*. This will be particularly important as reports of growing IDP populations in Syrian border areas are received and the arrival of refugees in neighbouring countries, especially Palestinians arriving from Syria, continues to decrease due to obstacles and increasingly restrictive policies at borders and airports. UNHCR and partners are increasing efforts to monitor borders and airports, obtain access and provide legal support to individuals, including children, detained for unlawful entry. Instances of *refoulement* of refugees, including children, have been confirmed in some countries.

Efforts to improve the integrity, reliability and quality of registration information and data will include the expansion of iris scan technology, already in place in Jordan, to include all countries where UNHCR conducts registration. Moreover, registration verification exercises will better identify vulnerable refugees, and any possible departures from host countries. This improved registration

information will inform planning and refine the identification of assistance needs. Increased mobile registration teams will be necessary to reach isolated refugees or those subject to security concerns.

Durable solutions

UNHCR is seeking to resettle or provide humanitarian admission for up to 30,000 Syrians. To date, resettlement countries have only committed to 10,000 places. Additional protection resources, including human resources to undertake refugee status determination and resettlement processing, as well as humanitarian admission processes are in place or are being enhanced.

Child protection

Partners and agencies across the region are prioritizing activities aimed at strengthening national and community based child protection systems. Efforts will continue to prevent and respond on behalf of girls, boys and families at high risk of abuse, neglect, exploitation and violence, including SGBV, children experiencing psychosocial distress, children engaged in the worst forms of child labour, unaccompanied and separated children, and children at risk of recruitment by armed groups.

The capacity among organizations to conduct best interest determination and assessment for children will be increased to guarantee the early identification of children at risk and onward referral to support services. Education is key to children's well-being, development and protection. Improving access to education means ensuring that children have access to quality education in an environment that generates a sense of safety, and that does not expose them to further risks. This will require strengthening and supporting national school systems; it will also necessitate addressing obstacles to education, such as child labour and early marriage, through outreach, identification, awareness-raising and, possibly, targeted assistance to families at risk.

Protecting children from violence at home and in schools and public areas, including physical and psychological violence, will require prevention and awareness-raising with families, schools, and host communities, including men and boys. Adolescents will moreover be engaged in promoting a protective environment, including through the building of networks of peer outreach workers. Similarly, increased monitoring, research and advocacy is needed for children at risk of recruitment into armed forces or groups and returning to Syria to fight. Advocacy and legal support for children in detention are additional components of child protection strategies in the region.

Sexual and gender-based violence

Prevention and response to SGBV will continue to be addressed through a multi-sectoral, coordinated and community-based approach.

Through the establishment of referral pathways and the capacity building of case management capacities, partners will continue to ensure that response services are safe and confidential for survivors to be able, and feel comfortable, to access them, including medical response such as clinical management of rape and provision of PEP kits, psychosocial care, access to safe spaces and material assistance, and legal services. Prevention interventions will aim at increasing awareness on available services, engaging proactively men and boys, increasing access to protective spaces such as community centres and listening spaces, reinforcing resilience and community based protection through the establishment of peer networks. Prevention will also involve a broader multi-sectoral approach, including targeting women at risk and other groups with specific needs through livelihoods services to prevent negative coping strategies such as survival sex and early or forced marriages.

In close collaboration with partners, SGBV risk mitigation measures will continue to be integrated into all sectors of the humanitarian response (e.g. WASH, Shelter). For instance, support with accessing adequate shelter and assistance with threatened evictions, as well as temporary shelters for women and children, will also be crucial to ensure that risks of survival sex or sexual exploitation are reduced.

Holistic response services will be enhanced both in terms of availability and quality. This will include efforts to scale up psychosocial support, individual psychosocial counselling, training teachers to identify children with psychosocial needs, increase the number of facilities providing appropriate health care including clinical management of rape. Finally, safety options for survivors will be enhanced.

Child protection, SGBV and education are three interlinked key protection areas. Increased access to quality education in a safe learning environment will contribute to increased child protection as hours spent within a classroom are hours not spent exposed to protection risks for children and adolescents such as SGBV, child labour or recruitment into armed groups. Quality education enables refugees to live healthy, productive lives and builds skills for self-reliance and plays an essential role in enabling refugees to claim their rights, improving community-based protection and build resilience of children helping them to recover from a difficult experience as well as families, and communities at large.

Meaningful community participation

Promoting community empowerment and engagement is an essential means to addressing the protection priorities listed above. In particular for non-camp refugees, working with communities to identify vulnerable families and families with special needs, including refugees with disabilities or single female heads of households, who may find they have no choice but to resort to negative coping mechanisms such as child labour or early marriage, is an essential part of the protection response for all agencies engaged in responding to refugees and host communities. Capacity to access and understand the particular needs of refugees and vulnerable host communities, as well as ensuring their access to protection partners, is a critical aspect of the necessary protection work in the region. One of the strategies to achieve this will be through the expanded use of trained refugee outreach volunteers across the region. For instance, child protection interventions will focus in particular on community-based child protection capacity and initiatives to promote the participation of children and adolescents in their own protection.

Promoting gender equality, with a particular focus on women's leadership, is an integral element of community-based protection. Empowering women not only enhances their protection and resilience, and that of their communities in displacement, but also has a broader transformational effect on their societies. A specific focus on the participation of women in determining priority areas for protection and service delivery will promote and strengthen their role in the refugee communities and help maintain harmony between the refugee and host communities. Active Syrian refugee women's groups will also be a powerful voice for conflict resolution and peace-building.

“A Lost Generation?”

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

To respond to this need, and building on the groundwork established by successive iterations of the SHARP and the RRP, “A Lost Generation?” Strategy has been developed to ensure that a generation of Syrian children – whether living inside the country or abroad as refugees – are provided with the protective environment and learning opportunities they need to reclaim their childhood. It notes that the future of this generation depends on strategic assistance to their education and to their physical and psychological protection.

The strategy aims to highlight the gravity of the education and protection situation facing Syrian children, with the aim of reversing current trends. It acknowledges the severe psychological impact that a protracted emergency can have on children and its long-term implications. The strategy outlines a multi-year, comprehensive approach to education and protection for all Syrian children, both inside Syria and in neighbouring countries, as well as for the communities hosting them. It covers immediate humanitarian response interventions as well as longer-term support

“Millions of Syrian children are at risk of becoming a “lost generation” as they miss out on education, vaccinations and a number of critical interventions. There is no better resilience strategy than investing in the skills, knowledge and well-being of children - their future, and the future of Syria, depend on them.”

Maria Calivis, UNICEF Regional Director for the Middle East and North Africa

that will build the resilience of children, communities and the education and protection systems and infrastructure that are so critical to their futures.

The success of the strategy depends on a joint effort by all partners, on renewed public support around the concept of preventing a lost generation, and on sustained regional engagement on behalf of the children of Syria, and those affected by this conflict

in Egypt, Iraq, Jordan, Lebanon, Turkey and beyond. It calls for US\$990 million which is in part included in the SHARP/RRP6 and integrated into resilience planning exercises in neighbouring countries. Anticipated funding is to be channelled through multiple modalities including inter-agency appeals such as the RRP6, multilateral and bilateral financing, direct budget support, and contributions to multi-partner funding mechanisms.

Polio response

A six-month “Emergency Response to the Middle East Polio Outbreak” Strategic Plan has been developed by WHO and UNICEF in collaboration with respective health ministries and other UN partners. The plan calls for multiple rounds of supplementary immunization activities, reinforced surveillance, robust communication and social mobilization activities, and technical assistance to support operations.

The strategic regional response will be to:

- Enhance reporting and investigation of acute flaccid paralysis cases to ensure rapid detection of Wild Polio Virus (WPV) transmission;
- Implement large-scale and repeated Supplementary Immunization Activities;
- Improve routine immunization coverage.

The total cost to implement the strategic plan in the five countries for 21 million people, including Syrians and host communities, with a total cost of US\$31.1 million. This figure includes support the technical surge capacity in regional offices and the WHO Syria Emergency Support Team in Jordan, and prepare for contingencies based on the polio epidemiology.

Essential needs and services

Throughout the region, more than 2.7 million refugees will be provided with food assistance, 1.4 million children will be supported to attend school and 2.9 million supported to receive health care. Cash assistance – either to cover basic needs or shelter assistance – will be provided to more than 780,000 households. Assistance will be provided in a sustainable manner, reducing the risk of aid dependency and bridging a gap until longer-term self-sufficiency can be restored. Essential needs and services will be designed to ensure that the level of assistance for refugees and nationals is at

the same level and perceived as such, and that communities benefit from at least same level of service delivery capacity as prior to the conflict. The cost per refugee and the support to the host community is commensurate with middle income countries and response partners have been able to provide quality assistance in meeting the needs of people of concern that significantly exceeds Sphere standards.

Addressing needs in host communities

The influx of refugees into neighbouring countries has also greatly impacted services and economies in local communities, with verified increase in prices, rent fees and competition in the labour market. In Lebanon, a World Bank-UN assessment indicates that US\$1.4-1.6 billion is needed till the end of 2014 to stabilize and restore access and quality of health, education and social safety net services to pre-conflict level. This is felt more in urban settings where refugees and host communities share services and commodities. With a projected 3.44 million refugees living outside camps by the end of 2014, tensions can further exacerbate if livelihood projects are not implemented both in refugees and host communities. Such tensions impose a major risk to the protection space for refugees and there is an urgent need to release the pressure on local communities. In order to minimize this impact, projects in the 2014 will also address the needs of host communities.

“As a local NGO from the south of Lebanon, SHEILD has witnessed firsthand how the influx of refugees has impacted the local community and the burden it has placed on infrastructure, livelihoods and social cohesion.”

SHEILD

To mitigate tensions between refugees and host communities, self-reliance programmes will be put in place, including job placement, and implementing and/or expanding vocational trainings in Egypt, Iraq, Lebanon and Turkey. Programmes aim to empower refugees and host communities groups, such as

women and vulnerable groups in host communities. In Egypt and Turkey, grants to businesses will be provided in addition to cash-for-work and other cash-related programmes. Assessments will be undertaken in countries such as Egypt and Turkey, where there is a need to better understand the labour market and the impact of such projects in communities and refugees lives. In Lebanon, social cohesion partners will bring local actors together and support them with the tools to mediate conflicts and respond to rising tensions. National change agents like media, teachers, youth and local leaders will also be called upon to combat the misperceptions fuelling hostilities. Activities on social cohesion and livelihood will target over 865,000 persons (471,560 host communities and 393,450 refugees). In Lebanon, some 225 priority locations were already identified for social cohesion and livelihood interventions. It also includes a total of 175,000 benefiting from cash-based interventions targeting vulnerable households in Egypt.

Innovative Response

The humanitarian community is continuously adjusting its response to the Syria crisis based on lessons learned and efforts to achieve greater cost efficiency:

In Jordan, iris scanning has been introduced in urban registration centres, which will significantly enhance the accuracy of registration data and better inform the needs assessments and programming. Biometric and level-three registration will be rolled out throughout the region in 2014.

In Lebanon, the per capita cost of the response has been reduced through: centralized procurement of medication; focus on “lower cost/high-impact” non-formal education opportunities; identification and development of additional shelter options by local authorities; and assistance through cash transfer for food (via e-cards), core relief items, hygiene kits and rent subsidies. A shift towards market-based programming is also foreseen in Jordan, such as the voucher programme in camps and communities.

Cash transfers are increasingly utilized throughout the region to provide conditional and non-conditional support, thereby preserving the dignity and autonomy of people in meeting their needs. Cash transfers often have considerably reduced transactional costs in comparison to traditional in-kind distributions. With millions receiving assistance through vouchers and cash transfers, this humanitarian response is one of the largest in the world to utilize this assistance mechanism to reach people in need.

Following the release of the real-time evaluation of UNHCR's response to the Syria emergency, UNHCR has strengthened its coordination capacity. A refugee crisis coordination tool kit has been developed and will be rolled out through a series of capacity-building workshops in Jordan, Lebanon and Iraq in the final months of 2013.

Linkages with national plans and development frameworks

The Syria refugee crisis has unfolded with a speed and intensity that has been profoundly challenging. Notwithstanding their relatively advanced economic and social indicators, all Syria's neighbours have been comprehensively affected by the spillover from the conflict and the associated refugee influxes.

If the initial response delivered through successive Regional Response Plans has understandably focused on meeting immediate humanitarian needs, the scale and complexity of the challenges for the neighbouring countries have become very apparent. Few if any refugee influxes have ever generated such profound shifts in the demography of their host countries. Moreover, the ensuing economic and social consequences have been extensive and multi-dimensional, with a clear impact on development trajectories.

The emergency humanitarian arrangements established by the affected Governments with international and local partners in 2011 have remained in place. They have been instrumental in meeting the continuing challenge of providing immediate protection and assistance to refugees. As the crisis has evolved, and as its effects have become more apparent, the need to include affected local populations in the response has increased proportionately. The range of interventions required for this approach will involve adjusting existing aid coordination mechanisms.

National development plans in the region had not anticipated an external economic shock of the magnitude felt since 2011. In 2013 the Governments of Lebanon and Jordan requested the World Bank and the UN to undertake more detailed economic and social assessments of the impact of the Syrian conflict and its effects³. This broader analysis has highlighted the estimated macro-economic, human development, and infrastructural costs.

Given the scale of needs and the investments required to address the situation, humanitarian and development responses must work in complementarity, in particular during the initial stabilization period. Many of the agencies involved in the preparation of the RRP6 have already contributed to the longer-term development assessment exercises. They have provided data on the refugees and the local host communities that will help shape long term recovery and resilience planning. This is reflected in the RRP6 which contains an increased focus on early recovery and social cohesion interventions. Humanitarian agencies have already delivered useful support to Government counterparts, local municipalities and communities in critical areas such as water and sanitation, health, education, small scale infrastructure, solid waste management, equipment and budget support.

In 2014, increased convergence between the humanitarian and development interventions is anticipated, as national planning and coordination arrangements will be established by Governments. In Lebanon this will be oriented towards implementing the Stabilization Plan agreed with the Government. In Jordan, the National Resilience Plan is currently being developed under the leadership of the Government and in close collaboration with donors, UN agencies and NGOs, within the dedicated coordination mechanism (“the Host Community Support Platform”) led by the Ministry of Planning and International cooperation. Based on its findings, the Government of Jordan expects the UN and partners to support the development of the National Resilience Plan (NRP).

At this juncture, it is foreseen that the planning, management, and coordination arrangements for the delivery of the different components of the RRP6 established since 2011 will remain in place during 2014. Existing coordination mechanisms such as the Host Community Task Force in Lebanon and the Host Community Support Platform in Jordan will be used to identify opportunities for promoting coordination and integrating the support provided to national and local authorities by humanitarian and development agencies.

The Mid-Year Review process foreseen for the RRP6 will offer an important opportunity to: take stock; adjust programme delivery as necessary; and align and integrate the coordination of the regional response more effectively with national and local stabilization and development initiatives as they unfold.

3 *Economic and Social Impact Assessment of the Syrian Conflict in Lebanon* led by the World Bank and the United Nations (September 2013), *Needs Assessment Review of the Impact of the Syrian crisis on Jordan* (ongoing) led by the Government of Jordan and the United Nations.

Burden-sharing and solidarity

“There is growing evidence that the spillovers of the Syrian crisis in neighboring countries turn out to be highly regressive, affecting socio-economic fabrics, access and quality of basic infrastructures and services in territories and communities. Beyond the demographic challenge, the crisis is confronting neighboring countries with a complex and multi-faceted ‘vulnerability challenge.’ The crisis is affecting the broad spectrum of human development indicators in neighboring countries and communities (poverty, spatial and gender inequalities, employment, education, health, water and sanitation, and not least environmental). The RRP6 is responding to the largest movement since the Second World War, and projecting a response for a refugee population of 4.1 million by the end of 2014. The plan presents the needs for 4.1 million refugees and 2.7 million people from host communities: a strategic investment towards a resilience-based development response.”

Gustavo Gonzalez, UNDP Sub-Regional Development Coordinator

Host Governments and local communities continue to demonstrate extraordinary generosity to Syrian refugees. Open borders have largely been maintained and refugees are in large provided equitable access to public health care and education.

The Government of Turkey has taken the lead role in the refugee response and the implementation of assistance to Syrians since the start of the crisis and it bears the main financial burden of the refugee response. It has, according to its own estimate, so far spent more than US\$2 billion on refugee protection. To date, 21 camps in 10 provinces have been established and the emergency response in the camps has been of a consistently high standard since the outset of the influx. Turkey also established coordination centres in Gaziantep, Sanliurfa and Kilis for the (basic) registration of urban Syrian refugees and provides health care to all registered refugees outside of the camps. In Iraq, the Kurdistan Regional Government in all three governorates, which is hosting 95 per cent of Syrian refugees in the country – have provided over five million square metres land and construction support for the establishment of 11 camp and transit sites. In addition, the KRG have supported fully or partially the provision of infrastructure facilities including water, sanitation and electricity, as well as assisting with food, shelter and core relief items for refugees residing the all camps and transit sites.

The Government of Lebanon continues to support local authorities and host communities to provide free shelter in private accommodation and public government and municipality buildings. The Government of Egypt has provided Syrians access to health and education services.

The Government of Jordan has provided over 5,000,000 m² (500 hectares) of land on a temporary basis for refugee camps, primarily in Zaatari and Azraq. The Office of the Prime Minister, Ministry of Foreign Affairs, Ministry of Interior, and the Ministry of Planning and International Cooperation have key roles in the leadership and coordination of the refugee response. Each line ministry, including Health, Education, Social Development, Public Works and Water, and governorates and municipalities are engaged in the coordination and delivery of assistance – expanding schools, health centres and other services – to meet the rise in demand in their respective areas. By providing access to services, and continuing subsidies on basic household services and goods,

the Government of Jordan is directly assisting hundreds of thousands of Syrians. Moreover new refugees are received by the Jordanian Armed Forces (JAF), who assist and provide transport.

However, the macro-economic impact on host countries and local communities has been significant. The Syria conflict may cut Lebanon's annual real GDP growth by 2.9 per cent each year since 2012. In Jordan, the impact of the refugee influx is felt across sectors, including an increase in housing prices, decreased access to basic social services and extreme pressure on municipal services and infrastructures, among others.

The growing political complexity of the conflict in Syria has broader implications on regional security and stability. Given the protracted violence in Syria and the scale of the refugee crisis, it is evident that more comprehensive and innovative approaches to assistance needs will be required.

“Refugees now face an increasingly uncertain future. As an international community we must do all we can to uphold their rights and to give them hope, while at the same time supporting their remarkably generous hosts.”

Nigel Timmins, Oxfam Deputy Humanitarian Director

The potential long-term effects on host country economies and societies, including potential destabilization, cannot be over-emphasized. All of Syria's neighbours therefore require robust, multi-faceted international solidarity, which not only helps them to address the humanitarian dimension of the Syria crisis but also the persistent needs of impoverished local populations. The necessary

response from the international community must be commensurate with the heavy financial investment made by host countries.

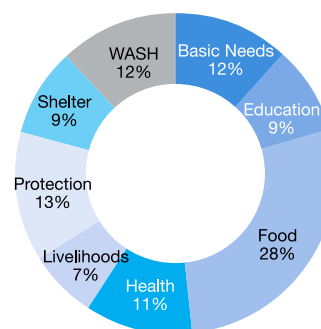
Budgetary requirements

The budgetary requirements for the regional response plan, within the planning parameters and the results framework outlined above, stand at US\$4.2 billion. These requirements have been developed by the sector working groups and country teams in the five countries. In addition, regional requirements have been identified to provide to cover needs for Syrians who have sought refuge outside of the region; people of concern affected by the crisis but are not Syrian citizens; as well as regional coordination, oversight and support functions. Syrian refugees outside of the region include those who may be in countries in North Africa, Europe and other Middle Eastern countries.

Total requirements by country

FINANCIAL REQUIREMENTS JAN-DEC 2014	
Country	Total
Egypt	168,824,040
Iraq	552,538,228
Jordan	1,200,650,591
Lebanon	1,723,878,169
Turkey	522,379,683
Regional	96,447,000
Grand Total	4,264,717,711

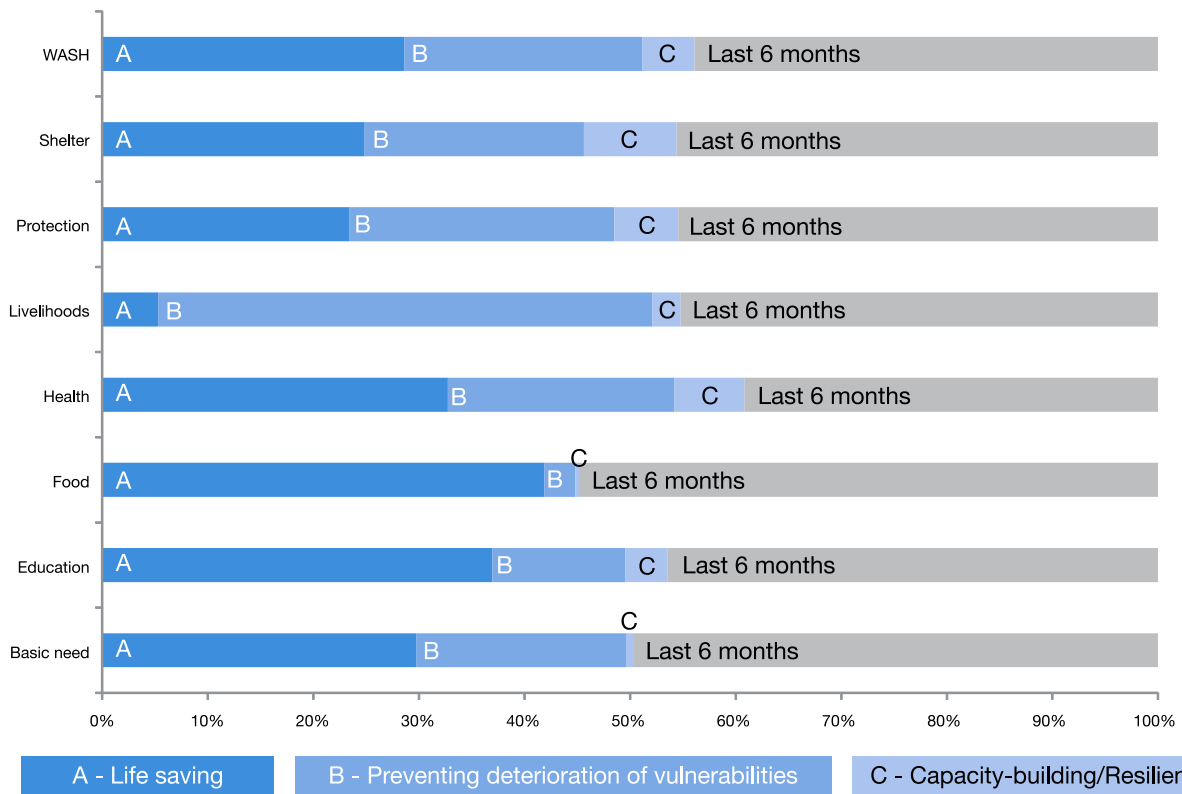
Funding requirements by sector



Total requirements by sector

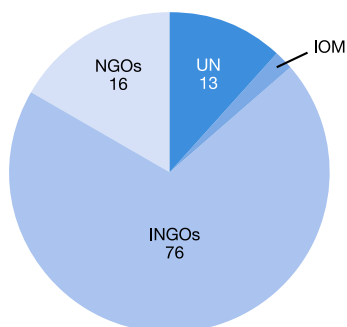
	Egypt	Iraq	Jordan	Lebanon	Turkey	Regional	Total
Basic needs	31,840,920	62,261,757	104,210,306	149,090,198	134,259,380		481,662,561
Education	22,758,985	39,204,302	86,317,109	182,815,702	62,219,416		393,315,514
Food	52,568,244	99,613,626	322,120,343	550,332,352	127,476,760		1,152,111,325
Health	40,974,428	29,722,000	120,981,008	188,110,729	62,535,500		442,323,665
Livelihoods		49,223,446	107,631,773	98,424,687	17,770,000		273,049,906
Protection	20,681,463	66,984,378	169,076,190	184,596,468	118,118,627		559,457,126
Shelter		62,518,202	136,520,250	168,083,696			367,122,148
WASH		143,010,517	153,793,612	202,424,337			499,228,466
Regional support						96,447,000	96,447,000
Total	168,824,040	552,538,228	1,200,650,591	1,723,878,169	522,379,683	96,447,000	4,264,717,711

Requirements by category (first 6 months)



Coordination

Number of appealing agencies



“Recognizing the unique protection and access challenges of this crisis, the Syria INGO Regional Forum (SIRF), a coalition of over 30 operational agencies, was formed to advocate for the rights of persons affected by the Syria crisis – no matter where they live.”

Syria INGO Regional Forum, SIRF

Under the overall coordination of the Regional Refugee Coordinator (RRC), more than 100 entities collaborated to assess needs, identify gaps and design response strategies throughout the region. The RRC regularly engages with Governments and donors and consults with regional partners including UN agencies, inter-governmental bodies, international finance institutions and non-governmental partners. The RRC further collaborates with the Regional Humanitarian Coordinator to ensure a common strategic vision and a coordinated response to the humanitarian situation inside Syria and in refugee-hosting countries.

At the regional level, UN agencies and representatives from the Syria INGO Regional Forum (SIRF) have collaborated on an initiative to support country offices to review secondary data and assessments. This consultative body provides strategic guidance and identifies gaps and weaknesses to promote a harmonized approach for the region.

At the country level, response efforts are led by UNHCR Country Representatives, working in close collaboration with the host Government and humanitarian partners. National-level inter-agency task forces provide further technical oversight and guidance to sector working groups on cross-cutting issues and quality control. Inter-sector working groups established in five countries coordinate the work of 35 sector working groups.

Operational agencies, and in particular national and international NGOs, have important grass-root level networks and an understanding of the needs and relationships with local communities and refugees. SIRF represents 36 international NGOs in the five refugee-hosting countries in the region.

In addition to the regular coordination meetings at various levels throughout the year to discuss operational strategy, a series of strategic and technical meetings were convened with partners at the regional and country levels between September and November 2013 to review progress and agree on planning parameters for the RRP6.

Following the real-time evaluation of UNHCR’s response to the Syrian refugee emergency released in July 2013⁴, coordination capacities have been reinforced.

4 *“From slow boil to breaking point: A real-time evaluation of UNHCR’s response to the Syrian refugee emergency”* available on < <http://www.unhcr.org/51f7d9919.html> >

Reporting

In 2014, UNHCR and RRP6 partners will continue to provide information on funding to be integrated in the [Financial Tracking Service](#) to allow for easy tracking of funding levels and gaps. Partners will continue to report on needs and achievements by country, sector and regionally on a monthly basis through the dashboards published on the [Syria Refugee Response Inter-Agency Information-Sharing Portal](#). The RRP6 focuses on results and presents objectives, outputs and verifiable indicators in the sectoral plans of each country. Regular reporting will assess qualitatively how the objectives are being achieved, highlight measures taken to improve these further and ensure accountability.

In view of the volatile nature of the crisis, a mid-year review is planned to flexibly adjust to the changing situation. The implementation of the RRP6 will be reviewed comprehensively and an RRP6 review will take place in August 2014. An annual report will be released in March 2015.

Monitoring and evaluation

Throughout the region, and in close coordination with host governments, RRP partners will work to harmonize vulnerability assessments, assistance packages and undertake regular joint monitoring to review validity and reliability of criteria, adequacy of assistance provided and develop strategies that mitigate the risk of long-term dependency. Feedback mechanisms and evaluations will be designed to ensure that refugees are included in the decision-making process.

An overall evaluation of the RRP process as well as protection and assistance policies will be undertaken in 2014. Evaluation findings will be used to deepen and rationalize the strategic framework in the coming planning period. A particularly welcome initiative in July 2013 was a real-time evaluation of UNHCR's response to the Syria refugee crisis, the recommendations from which continue to inform UNHCR's emergency response.

The mid-year review of the RRP will allow partners to jointly assess best practices and revise and adjust strategies to meet objectives. This review will draw upon new primary and secondary data sources, and if available the findings of the RRP evaluation.

Moreover, regular programmatic monitoring of implementation will be conducted of strategies where necessary.

Annexes

Annex 1: 2014 RRP Requirements per Agency

Agency	Egypt	Iraq	Jordan	Lebanon	Turkey	Total
ACF Action contre la faim		12,568,635	6,358,250	3,076,400		22,003,285
ACTED Agency for Technical Cooperation and Development		11,066,443	21,674,500	14,616,300		47,357,243
ActionAid			1,425,000			1,425,000
ADRA Adventist Development and Relief Agency			827,500			827,500
Al Majmoua Lebanese Association for Development				50,000		50,000
AMEL Association - Lebanese Popular Association for Popular Action				1,396,804		1,396,804
AMERA Africa and Middle East Refugee Assistance	325,000					325,000
AVSI The Association of Volunteers in International Service			1,579,798	1,206,400		2,786,198
BBC Media Action				1,000,000		1,000,000
British Council				975,700		975,700
CARE International	743,985		21,250,000	7,681,118		29,675,103
Caritas			16,056,837			16,056,837
CISP Comitato Internazionale per lo Sviluppo dei Popoli				641,000		641,000
CLMC Caritas Lebanon Migrant Center				14,528,596		14,528,596
CONCERN				121,000		121,000
CRS Catholic Relief Services	800,000					800,000
CVT Center for Victims of Torture			2,500,000	200,000		2,700,000
DRC Danish Refugee Council		22,087,104	13,890,810	32,715,000		68,692,914
FAO Food & Agricultural Organization		3,739,435	6,500,000	11,767,500	6,500,000	28,506,935
FCA Finn Church Aid			3,000,000			3,000,000
FPSC Fundacion Promocion Social de la Cultura			1,536,680	2,867,000		4,403,680
FRC - Finnish Red Cross			3,000,000			3,000,000
FRC/IRCS		5,379,310				5,379,310

Agency	Egypt	Iraq	Jordan	Lebanon	Turkey	Total
Global Communities			10,790,100	1,551,990		12,342,090
GVC Gruppo di Volontariato Civile				4,822,783		4,822,783
HAI Heartland Alliance International		400,000				400,000
HI Handicap International		1,680,000	10,000,000	9,432,220		21,112,220
Humedica				500,000		500,000
HWA Hilfswerk Austria International				1,545,750		1,545,750
ICMC International Catholic Migration Commission			2,055,000			2,055,000
ILO International Labour Office			2,880,000	2,825,000		5,705,000
IMC International Medical Corps		656,900	11,458,369	5,563,950		17,679,219
International Alert				555,000		555,000
Internews			630,000			630,000
INTERSOS		2,305,000	1,899,500	4,243,600		8,448,100
IOCC International Orthodox Christian Charities			30,000	10,654,350		10,684,350
IOM International Organization for Migration	2,975,297	25,468,000	12,204,596	26,996,233	12,830,000	80,474,126
IRAP Iraqi Refugee Assistance Project				167,000		167,000
IRC International Rescue Committee		22,170,255	17,560,000	7,186,750		46,917,005
IRD International Relief and Development			1,974,900	1,275,444		3,250,344
IRW Islamic Relief Worldwide		3,335,835	5,377,856			8,713,691
JEN			6,500,000			6,500,000
JHAS Jordan Health Aid Society			17,061,400			17,061,400
JHCO Jordan Hashemite Charity Organization			4,012,500			4,012,500
JRS Jesuit Refugee Service			667,000			667,000
KnK Children without Borders			300,000			300,000
KURDS		1,940,000				1,940,000
LOST				84,520		84,520
LWF Lutheran World Federation			4,839,093			4,839,093

Agency	Egypt	Iraq	Jordan	Lebanon	Turkey	Total
MA Muslim Aid			620,000			620,000
Madrasati Initiative			2,525,900			2,525,900
MAG Mines Advisory Group		1,500,000				1,500,000
Makassed				768,380		768,380
Makhzoumi Foundation, Armadilla S.c.s. Onlus				812,000		812,000
MAP Medical Aid for Palestinians				266,000		266,000
MdM Médecins du Monde			4,150,000			4,150,000
Medair			8,404,200	18,801,855		27,206,055
Mercy Corps		5,552,115	18,733,899	8,302,747		32,588,761
Mercy USA				3,865,510		3,865,510
MPDL Movement for Peace			193,000			193,000
NICCOD Nippon International Cooperation for Community Development			1,354,500			1,354,500
NRC Norwegian Refugee Council		19,878,366	33,735,000	18,370,062		71,983,428
OPM Operation Mercy			400,000			400,000
Oxfam			2,580,655	17,917,700		20,498,355
PCPM Polish Center for International Aid				6,411,000		6,411,000
PEOPLE IN NEED		404,000				404,000
PLAN Plan International	762,500					762,500
PU-AMI Première Urgence-Aide Médicale Internationale		3,247,586	3,560,000	2,425,666		9,233,252
QANDIL		2,075,863				2,075,863
Questscope			267,500			267,500
RESCATE				941,500		941,500
RET Refugee Education Trust				2,770,000		2,770,000
RHAS Royal Health Awareness Society			720,000			720,000
RI Relief International		8,278,706	16,445,000	2,168,568		26,892,274
Safadi Foundation				1,150,000		1,150,000

Agency	Egypt	Iraq	Jordan	Lebanon	Turkey	Total
SCI KR-I Save the Children Kurdistan Region of Iraq		150,000				150,000
SCI Save the Children International	2,680,000	9,855,523	18,989,000	48,638,770		80,163,293
SCJ Save the Children Jordan			3,915,000			3,915,000
SeraphimGLOBAL				2,835,000		2,835,000
SHEILD				1,214,000		1,214,000
SI Solidarités International				4,156,000		4,156,000
SIDC Soins infirmiers et développement communautaire				107,400		107,400
SIF Secours Islamique France				3,338,800		3,338,800
Solidar Suisse				1,255,400		1,255,400
STEP		250,000				250,000
Taghyeer			220,000			220,000
TDH Terre des Hommes			1,282,160			1,282,160
TDHI Terre des Hommes Italia			1,442,000	1,535,700		2,977,700
TGH TRIANGLE GH		2,440,800				4,985,800
UN Women			1,130,000			1,130,000
UNDP United Nations Development Programme		10,381,810	19,700,000	34,773,600	9,000,000	77,925,410*
UNESCO United Nations Educational, Scientific and Cultural Organization		14,624,998	3,201,571	7,954,000		25,780,569
UNFPA United Nations Population Fund	561,000	5,800,000	18,595,231	12,332,500	9,800,000	48,088,731*
UN-Habitat	1,200,000	11,103,448	5,585,000	9,789,400		27,677,848
UNHCR United Nations High Commissioner for Refugees	79,033,964	133,353,993	316,211,320	467,816,052	284,859,688	1,345,405,017*
UNICEF United Nations Children's Fund	16,075,400	105,446,803	170,517,372	250,020,581	64,958,235	613,018,391*
UNOPS			4,700,000			4,700,000
UNRWA United Nations Relief and Works Agency				90,431,767		107,431,767*
UPP Un Ponte Per		1,660,946	376,892			2,037,838
War Child UK		499,000	756,788			1,255,788
WARVIN		259,000				259,000

Agency	Egypt	Iraq	Jordan	Lebanon	Turkey	Total
WCH War Child Holland				2,801,803		2,801,803
WFP World Food Programme	52,568,244	94,132,785	305,050,000	501,756,377	126,976,760	1,080,484,166
WHO World Health Organization	11,098,650	8,845,569	13,569,000	15,117,673	7,455,000	60,332,892*
WRF World Rehabilitation Fund				3,365,000		3,365,000
WVI World Vision International			9,334,914	9,419,950		18,754,864
Grand Total	168,824,040	552,538,228	1,200,650,591	1,723,878,169	522,379,683	4,264,717,711*

*Including regional requirements. Regional requirements of UNDP, UNFPA, UNHCR, UNICEF, UNRWA and WHO amount to US\$96,447,000.

Annex 2: Country Response Plans – online contents

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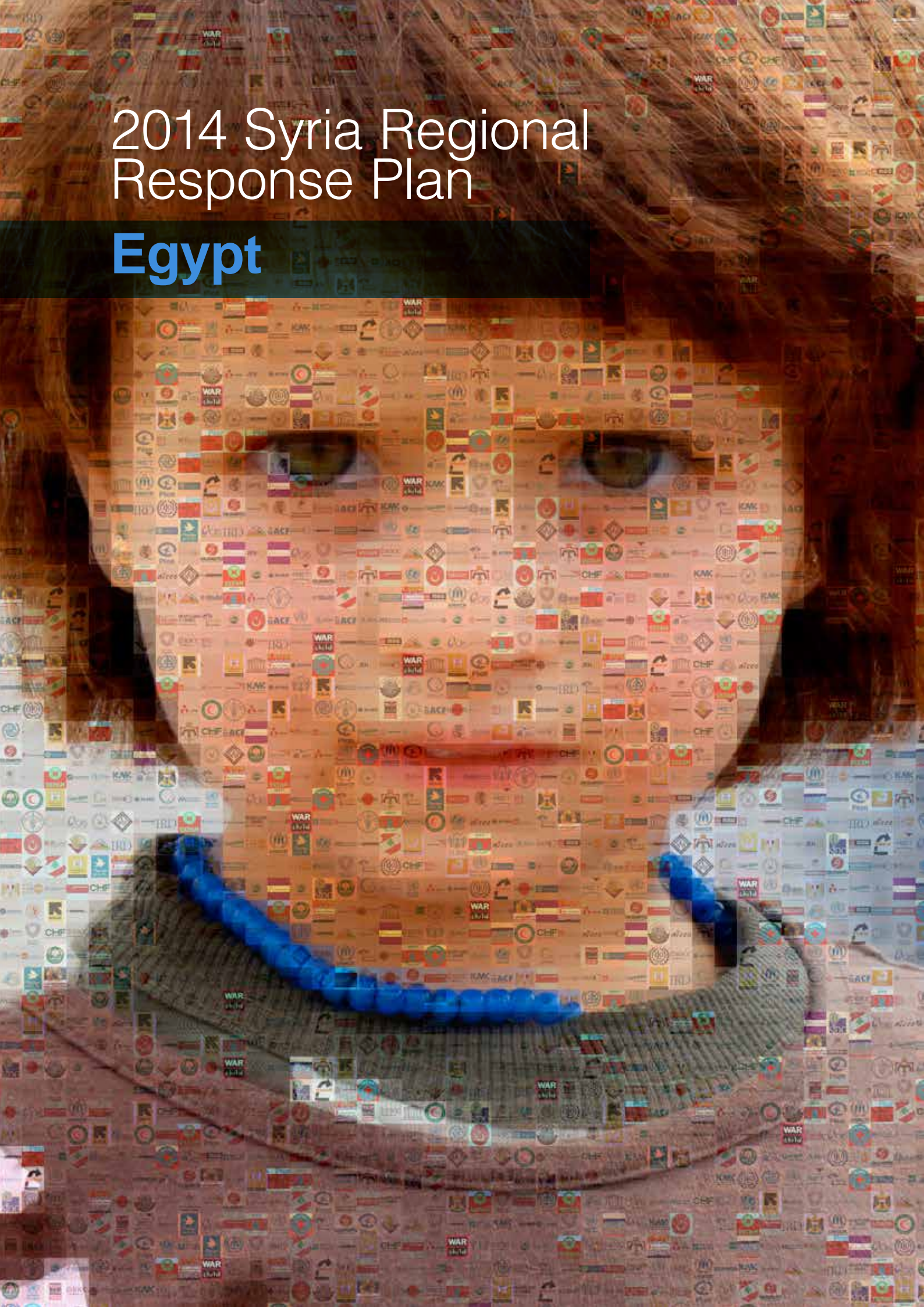
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2014 Syria Regional Response Plan

Egypt





2014 Syria Regional Response Plan

Egypt

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Egypt Response Plan

OVERVIEW

A. Executive Summary

Egypt has been going through a period of intense political transition. On top of the Arab Spring, Egyptians went through a second regime change in the summer of 2013. High unemployment, a drop in investment and tourism, political instability and polarization, continued demonstrations and an increased focus on national security issues have all contributed to a shrinking protection environment and increasing humanitarian needs for Syrian refugees in Egypt.

Syrian refugees are currently living in three main urban areas in Egypt: Greater Cairo, Alexandria and Damietta, as well as other smaller urban areas spread throughout the country. UNHCR estimates that by 1 January 2014 there will be approximately 145,000 registered Syrian refugees, which will increase to 250,000 by the end of the year. The Government of Egypt estimates the Syrian population in Egypt to be between 250,000 to 300,000 (figures provided in June 2013). In this context, humanitarian actors in Egypt remain committed to providing protection assistance and material support in the areas of food, health, education, livelihood and basic needs to address the needs of refugees and, where appropriate, host communities.

UNHCR is the agency in Egypt coordinating the response to the Syrian refugee crisis, including the protection, domestic needs and livelihood sectors. WFP continues to lead the food security sector, whereas WHO and UNICEF co-lead the health and education sectors with UNHCR. National and international NGOs, IOM and UN agencies, as well as community-based organizations work in partnership to respond to the protection as well as basic assistance and service needs of the Syrian refugees.

B. Context

There have been significant challenges to the protection environment in Egypt for Syrians during 2013. Originally welcomed to Egypt without visa restrictions, this changed during the mass protests in the summer of 2013 when some Syrians participated in public rallies and started to be perceived as pro-Muslim Brotherhood. In this context, and with the ousting of President Morsi, visa restrictions and security clearance were imposed on all Syrians entering Egypt from 8 July 2013, resulting in a virtual freeze on the numbers of Syrians entering the country. Refugees are particularly concerned for their immediate relatives left behind in Syria, and the inability of those family members to obtain an Egyptian visa to join them in Egypt.

UNHCR still expects those Syrians who are already in Egypt to continue to approach UNHCR for registration to benefit from assistance and protection services. A number of Syrians already in Egypt have started to be detained and deported for residency violations. Public opinion against Syrians has also changed resulting in a less welcoming environment for Syrian refugees in the country.

Tensions between host and refugee communities are increasing. This, in turn, could have a negative impact on the possibilities for Syrian refugees to access basic services. Lately, UNHCR has noted a decrease in Syrian's interest in registering with UNHCR and an increase in the number of refugees closing their files, as well as increasing reports of departures by sea to Europe. Furthermore, the loss of livelihood opportunities is leading to increased levels of vulnerability among Syrians.

UNHCR continues to advocate with the Government and judiciary on the arrest, detention and deportation of Syrians, including those arrested and deported for attempting to leave Egypt illegally to go either to Libya or Europe. UNHCR also continues to seek clarification from the Egyptian authorities on visa and residency requirements and particularly how Syrians can renew their expired residency permits without fear of deportation.

Many Syrians who do not have valid residency permits in their passports were unable to register with UNHCR due to their fear of being arrested and deported while travelling to Cairo for registration. UNHCR increased its outreach, registering a record number of over 23,000 refugees in September, including main hosting cities and surrounding governorates.

Civil society and charitable organizations have responded generously to the needs of Syrian refugees; however, the protracted nature of the situation and the ebbing level of sympathy towards the Syrian community are making it increasingly difficult for these organizations to reach all vulnerable families and sustain the level of assistance. Housing, food and job insecurity are also on the rise among Syrians in Egypt as the financial reserves they brought with them have depleted over time.

Area-based Quick Impact Projects

(QIPs) targeted towards Syrian refugees and the Egyptian communities hosting them will remain key in decreasing tensions in hosting communities and reducing protection risks in terms of access to basic services and physical security, including SGBV and the isolation and harassment of children and adolescents, who have been especially vulnerable to the increasingly hostile environment.

The government of Egypt continues to allow Syrian children the same access to public basic and secondary education as Egyptian children for the start of the September 2013 school year. Issues affecting the educational situation of Syrians are related to access to pre-primary education, placement exams, school distance, long registration processes, high private school fees, high classroom density in public schools, harassment, accent barriers, an unfamiliar curriculum,

accreditation and certification.

UNHCR will continue to provide material assistance to Syrian refugees in Egypt. This will be in the form of universal education grants for all children enrolled and attending pre-school, primary and secondary education. In addition, regular cash assistance to the most vulnerable will continue to be distributed by UNHCR partners in Greater Cairo, Alexandria, Damietta and other governorates hosting Syrian refugees. Complementing equal access for Syrians to the Egyptian health system, UNHCR will continue to support partner care facilities to provide secondary and tertiary care to registered refugees. Those refugees with specific needs will continue to be prioritized and benefit from additional material assistance for basic needs, health and education services.

Egypt also hosts over 50,000 non-Syrian refugees who face many of the same challenges faced by Syrians. In view of the need to ensure equity, UNHCR maintains the assistance programmes for Syrians at similar levels as those for non-Syrian refugees. In addition, community-based programmes for Syrians which are not available in the regular programme may be extended to cover non-Syrians up to 10 per cent. All individual assistance to non-Syrians will be covered from UNHCR annual programme funds.

C. Needs, vulnerabilities and capacities

In September 2013, an inter-agency joint needs assessment was conducted across Egypt. The assessment included 19 focus group discussions with Syrian women, men, boys and girls in five governorates, a random survey with 600 respondents generated from UNHCR's database of Syrian refugees, and one-on-one interviews. The purpose of the survey was to assess the demographic profile, protection, education, security, health and food security situation of Syrians in Egypt. In addition, protection risks were identified, additional responses proposed and the appropriateness of ongoing interventions was also reviewed.

UNHCR coordinated the joint needs assessments in locations across Egypt with a high density of Syrian refugees. UNICEF, WFP, UNFPA, IOM, Save the Children, Islamic Relief Worldwide, Resala, ACSFT, AMERA, Cairo University and CRS participated in focus group discussions in Alexandria, Damietta, Asiout, Giza, and Greater Cairo and collaborated in conducting the survey.

In 2014, partners are being encouraged to operate outside of the cities targeted in RRP5, (greater Cairo, Alexandria and Damietta), and decentralization beyond these cities has been part of the RRP6 planning process in most sectors.

The following are the main findings of the joint needs assessment:

1. Protection:

Syrians arriving in Egypt during 2013 had been welcomed and received assistance from the general public and charitable organizations. Following perceived associations of Syrians with the party of the ex-President, there has been a decline in the high levels of assistance from host communities. In general, sporadic demonstrations continue in Egypt, sometimes leading to violent confrontations and the disruption of services. Moreover, the rise in criminality and the significant increase in the cost of living have affected the overall security situation in the country.

The assessment found that 49 per cent of Syrian households are considering leaving Egypt. Out of those considering leaving Egypt, 48 per cent cited economic reasons and 27 per cent cited the deteriorating security situation as the main reasons behind their intentions.

Eighteen per cent of respondents to the survey stated that they don't feel safe in Egypt either because they or their family members have been denied renewal of their visa or because they were physically assaulted, robbed, or have experienced threats or verbal harassment. A quarter of households felt that Egypt is not safe for Syrian women and children, mainly because of harassment, particularly in their own neighbourhoods, by their Egyptian neighbours.

Child protection concerns have also increased, including increased numbers of separated and unaccompanied children and hostility against children. Child marriage of girls is also becoming an increasing concern. A worrying trend has been the growing number of Syrians leaving Egypt by irregular boat including unaccompanied minors and the prolonged detention of minors caught attempting to cross the Mediterranean to Europe. Extremely low income, social isolation, family breakdown and domestic violence are also more and more affecting refugees' well-being. The risk of gender-based violence is heightened due to the ongoing shrinking of protection space and deteriorating economic situation for Syrian refugees.

2. Basic needs, livelihoods and shelter:

The survey found that only 48 per cent of households currently earn a salary or have a business income. Over a third of respondents stated that they were reliant on either UNHCR or charity support, borrowing or selling assets. More than a quarter of households reported that they were unable to afford rent. The provision of financial assistance, shelter support and livelihood programmes will therefore remain a key feature of the humanitarian programme in 2014.

3. Food security:

Three-quarters of respondents do not have sufficient food availability in their households with 46 per cent considering it barely sufficient and 27 per cent insufficient. One in five households is resorting to negative coping strategies to fulfil basic food needs including spending savings, purchasing food on credit and selling household assets.

4. Education:

Various joint assessments highlighted concerns for Syrian refugee girls in public schools. This was expressed by parents who said that they fear for the security of their adolescent girl children and prefer to keep them at home rather than sending them to school. Awareness-raising sessions on personal safety are planned with local volunteers from both the refugee community and the host community. According to the recent joint assessment, roughly a quarter of households who reported in the survey that their children were not attending school said it was due to their inability to afford school expenses. Other barriers to education reported were the inability to enrol because of their nationality and administrative requirements, or lack of space in school.

5. Health:

The survey found that 54 per cent of respondents face challenges accessing health services due to inability to cover the fees, while 33 per cent cited the distance to health facilities as the main challenge. Forty-two per cent of refugees rely on public services for their health needs. Three-quarters of households reported having one or more persons with health needs in their family.

In deciding which sectors and individual assistance to prioritize, UN agencies and NGO partners use a pre-determined set of vulnerability criteria, as well as determining if an intervention will be life-saving, preventing the deterioration of vulnerabilities, or contributing to capacity building.

D. Response strategy and priorities

Planning assumptions in 2014 include an expectation of continued violence and instability in Syria, leading to more Syrians leaving the country and seeking refuge in neighbouring countries. For Egypt, current projections indicate that the maximum number of new arrivals will be no more than 100 refugees a day, even if the Government of Egypt starts issuing visas to certain categories of Syrians. Due to a shrinking of asylum space and increased xenophobia, Syrians who arrived in Egypt before tighter visa restrictions were in place but did not see the need to register with UNHCR before, will continue to approach UNHCR for registration in 2014 to avail themselves to protection and assistance services. Projections for Syrians registered in Egypt as of January 2014 is 145,000, and is expected to increase to 200,000 by the middle of the year and 250,000 by the end 2014.

Strategic Objectives:

- Refugees fleeing Syria are able to access the territory, seek asylum and have their basic rights respected and durable solutions for Syrian refugees with specific protection needs and vulnerabilities are facilitated.
- Population has sufficient basic and domestic items, including access to housing.
- Ensure food assistance is provided to the most vulnerable and food insecure.
- Population has unimpeded access to education opportunities.
- Population has improved access, quality and coverage to comprehensive primary health care for Syrian refugees in Egypt in 2014.

UNHCR's and partners' assistance to the Syrian refugee community will continue in 2014 with a more robust partner presence in major refugee-hosting cities outside of Cairo, including the planned opening of a UNHCR office in Alexandria and increased community empowerment and outreach. This will enable more refugees to have direct access to UNHCR and its partners providing assistance.

UNHCR's advocacy interventions will continue and intensify in particular with regard to the new visa and residency regime, which has resulted in minimal new arrivals and an uncertain status for those already in Syria. The use of administrative detention and deportation to third countries, including of children and in some cases resulting in split families, remains a serious concern and UNHCR will explore additional avenues for advocacy, bilaterally, with partners and civil society.

Expanding community outreach, the creation of protective spaces and access to legal counselling and aid, especially outside of Greater Cairo and with particular regard to safeguarding the rights of women and children, remains an additional priority.

UNHCR will continue to be active in local and international media and to give trainings to government officials, the judiciary, police and the military to ensure that factual information is available for the general public and the Syrian refugee community.

In view of the deteriorating protection environment for Syrian refugees in Egypt, UNHCR and its partners are looking at developing Quick Impact Projects (QIPs) in collaboration with Egyptian municipalities, local/international NGOs and refugee and host communities. The QIPs will be aimed at addressing the existing gaps in services in deprived communities with a high concentration of refugees and are intended to improve the absorptive capacity of hosting areas. They are also intended to reduce the tensions between refugees and Egyptians, with the goal of improving the overall protection environment for Syrian refugees. They will be rapid, low-cost interventions and will involve community participation in order to achieve these goals while also generating new development opportunities, often with the involvement of local authorities, for the beneficiaries.

UNHCR will continue to target the neediest refugees in Egypt to provide more sustainable support with limited resources. The response during 2014 will aim at increasing the vulnerability assessment capacity, enhancing the targeting of aid programmes, diversifying assistance products and improving the self-reliance culture.

As a significant number of food-insecure Syrian refugees in Egypt are concentrated in urban centres with market availability, the main strategy for food assistance is to continue providing monthly food vouchers¹. The food voucher system serves to support the local economy through partner supermarkets in key voucher distribution locations of greater Cairo, Alexandria and Damietta and provides autonomy to the refugees in food selection. The food assistance proposed in RRP6 will assist the most vulnerable Syrian refugee households registered with UNHCR and Palestinian refugees from Syria identified by UNRWA. WFP, together with UNHCR, are working to transition to a OneCard assistance platform in early 2014 which will support voucher and cash assistance offering greater flexibility, independence and dignity for beneficiaries.

The most critical barriers hindering refugees' access to health services are the costs of secondary and tertiary treatment and medicines and long distances to health service providers. UNHCR, WHO, UNICEF and its partners will work closely with the Ministry of Health to facilitate better access to health services, namely through umbrella arrangements with the Arab Medical Union for areas outside Cairo, Alexandria and Damietta.

Due to the ongoing conflict in Syria, there is a need to vigorously support Syrian children who are now in danger of being part of a "lost generation". According to the joint needs assessment in 2013, access to education is one of the top priorities for communities, agencies and host governments. While the government of Egypt guarantees access to education, it is not always accessible due to space issues and overcrowding. Strategies to ensure every Syrian child has a place in school includes continued collaboration with the Ministry of Education, UNICEF and UNHCR to ensure and facilitate access to schools and map barriers to access, the continued provision of education grants, support to public schools identified in cooperation with the Government as well as to Syrian community schools and the continued expansion of access to pre-school education.

1 The option of cash assistance will also be considered in 2014.

Providing solutions in the form of resettlement or relocation to safe third countries is a critical and often life-saving intervention for refugees having urgent protection needs and compelling vulnerabilities. Such solutions form an important component of the protection strategy for Syrian refugees in Egypt. These interventions, in addition to providing solutions for vulnerable individuals and families are also an expression of solidarity and burden sharing with countries in the region currently hosting more than two million Syrian refugees.

E. Partnerships and coordination

The Ministry of Foreign Affairs remains UNHCR's main interlocutor, while direct interaction with line ministries continues. The Government continues to ensure equal access to health and education for all Syrian refugees in Egypt. The Government of Egypt has been invited to participate in the RRP6 process and UNHCR, UNICEF and WHO have been in regular contact with the Ministry of Foreign Affairs and line ministries to identify its needs.

As the lead agency for refugees in Egypt, UNHCR is currently coordinating the Syria emergency response. Coordination meetings with implementing and operational partners, including donor countries, are held on a bi-weekly basis. Many partners work in more than one city and therefore the inter-agency meeting is an important information-sharing and coordination mechanism. Sector working groups meet regularly in order to ensure a coordinated response and to share findings between partners. Weekly updates are also shared amongst donors and partners giving up to date statistics on demographic data and current events.

There are five sectoral working groups, which meet on a regular basis to coordinate and review the overall strategic directions within the sector. UNHCR leads the protection working group and sub-groups on child protection where UNICEF plays an important role, SGBV and psycho-social support are very active. A Food Security Working Group was established by WFP with partners including UNHCR, Resala, Islamic Relief and Save the Children to facilitate information sharing and coordination of food assistance. UNHCR and UNICEF co-chair the education working group, and WHO co-chairs the health working group with UNHCR. UNHCR chairs the basic needs and livelihood working group.

WFP and UNHCR are discussing partnering on a common assistance delivery platform (OneCard system) to meet beneficiary needs through a single electronic card.

Currently there are challenges in providing assistance to Palestinian refugees from Syria as the Government of Egypt has requested that their needs be covered by UNRWA and not UNHCR. This has meant that Syrian refugees of Palestinian origin cannot be registered by UNHCR and therefore cannot avail themselves to material assistance or services provided by UNHCR or its partners. In this context, UNRWA, the Egyptian Red Crescent and WFP are all working together to find solutions to provide much-needed services to this group, estimated at 6,000 individuals, with WFP currently providing food vouchers to these refugees.

F. Protection response

Lead Agencies	UNHCR		
Participating Agencies	Terre des Hommes (TDH), Psycho Social Training and Services Institute of Cairo (PSTIC), International Organization for Migration (IOM), Save the Children, Plan International, CARE International, UNICEF and AMERA.		
Objectives	<ol style="list-style-type: none"> 1. Access to territory, asylum and basic rights respected. 2. SGBV prevention and response expanded and strengthened. 3. Protection of children expanded and strengthened. 4. Durable solutions increased and protection space maintained. 5. Community participation, empowerment expanded and strengthened. 		
Requirements from January to June 2014¹	US\$13,442,951		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$8,937,222	US\$3,355,814	US\$1,149,915
Total 2014 indicative financial requirements	US\$20,681,463		
Contact Information	Madalena Hogg, hogg@UNHCR.org		

1. ACHIEVEMENTS AND CHALLENGES

The rate of new arrivals of Syrian refugees in Egypt saw changes with the introduction of a new visa regime for Syrians and Palestinians from Syria which has resulted in minimal new arrivals. There was also an increase in the arrests of Syrians, reportedly for violation of residency regulations and significant numbers have been arrested while trying to depart Egypt illegally by sea. Most remain in administrative detention and deportations to third countries at the border and from detention centres have taken place regularly since July 2013.

Despite security constraints affecting mobile registration outside Greater Cairo, both registration and mobile registration outside of Cairo took place. This increased the number of Syrians registered and thus able to access services and protection from 13,000 in January 2013 to 125,000 individuals in October 2013.

Border and detention monitoring has taken place regularly, including outside of Cairo. Advocacy efforts aimed at maintaining the protection space by UNHCR and operational partners, including with UNICEF on the matter of detained children, have increased with the Government. The provision of legal aid has continued in Cairo and been established in Alexandria. Community protection networks were expanded and trained in order to quickly identify protection risks including refugees in arbitrary detention both in and outside Greater Cairo.

Children have benefited from child-friendly spaces in Greater Cairo and Alexandria, as well as micro-grants aimed at increasing community capacity around child protection. Community centres

were established in Greater Cairo and have provided protective spaces, including to women and girls at risk of SGBV. Psycho-social services were provided in major urban centres with new psycho-social workers being trained among the refugee community. Housing for refugees in acute need and as a protection response, including for unaccompanied and separated children and survivors of sexual violence, has been provided in Cairo.

Awareness campaigns on the dangers of illegal migration conducted by IOM are underway, as is the recruitment of additional staff, including staff specialized in child protection and SGBV. UNHCR identified an additional partner to address continued needs in SGBV prevention and response, including through the provision of a temporary shelter and specialized legal aid for women at heightened risk of SGBV. Training to partner and UNHCR staff on SGBV training in emergencies has been provided.

Protection, SGBV and child protection working groups meet regularly and strategies exist or are being finalised for all working groups. Additionally, draft Standard Operating Procedures which include a referral pathway exist for the SGBV working group.

The first round of Quick Impact Projects in Greater Cairo and Alexandria has been identified and will be implemented and expanded in 2014. These include projects enabling better access to services in economically deprived areas through transport provision and safe outside recreational spaces for families where children, youth and parents of both refugee and host communities can congregate.

The training of partners, community-based organisations and new staff on UNHCR's mandate, available services and the rights and obligations of refugees is provided on a regular basis. Telephone information lines and an emergency hotline have been established in order to provide information to refugees and to respond quickly to urgent protection incidents.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Non-camp	250,000	180,000

UNHCR plans to strengthen its presence at the borders and at detention centres, expand its collaboration with legal aid partners within and outside of Greater Cairo, and explore further avenues for effective advocacy including with partners. Legal counselling, assistance and representation on documentation, detention and in cases of potential *refoulement* will be strengthened, including through the training of new legal aid partners, and made accessible to refugees in more governorates throughout Egypt where Syrian refugees reside and continue to be registered.

In view of the current protection environment, UNHCR needs to maintain its registration capacity and conduct a verification exercise, which will include the introduction of biometrics, in 2014. In addition, a profiling exercise will be conducted with partners to better understand access to basic rights and identify existing gaps following the deterioration of the protection environment for Syrian refugees and will build on the joint assessment already conducted. The verification exercise will also assist in the identification of cases in need of resettlement.

Simultaneously, UNHCR and partners will need to increase measures to maintain adequate protection space and counter negative perceptions among the host community and within the media.

Psycho-social counselling needs to be expanded and strengthened within Greater Cairo and other urban centres, in particular with regard to child protection and SGBV. Domestic violence, often discovered through refugee worker visits to families, is on the rise due to factors such as: frustrations of male family members as they remain unemployed, economic difficulties, mental stress, large families living in cramped housing and boredom amongst the youth. Livelihood activities will need to pay special attention to vulnerable families, as well as women and youth at risk of abuse or exploitation and ensure that women-headed households in particular are included in appropriate income generating activities.

In order to mitigate the risks of SGBV and improve response to SGBV survivors, there is a need to establish additional protective spaces and strengthen community based protection networks, in particular outside of Greater Cairo, and to increase access to psychosocial services. While a draft strategy and SOP exist for the SGBV working group, a referral mechanism and action plan needs to be completed and the SOP revised, in particular with the increased engagement of new partners. Quality case management for SGBV survivors remains a key area in need of improvement and where further training of involved actors would be beneficial. There needs to be an increased focus on the engagement of men and boys in SGBV prevention, as well as ensuring that men and boys who are survivors of SGBV are identified and able to access response services. Access to specialized medical care and legal aid needs to be expanded in particular to areas outside of Cairo. Increased earmarked funding for SGBV is needed to allow UNHCR and its partners to expand their SGBV programming

Syrian children in Egypt have increasingly been experiencing verbal harassment and at times physical violence at school and within their host communities resulting in a restricted access to safe areas in which to live, learn and play. Many children, as well as adolescents, are psychologically stressed and this is exacerbated by an increasing sense of isolation. Co-existence measures for Syrian and Egyptian children and adolescents will be vital to the psychosocial wellbeing of Syrian children in Egypt. Programming for adolescents and youth needs to be increased in a number of areas in order to provide them with a sense of purpose, belonging and to increase psycho-social wellbeing, in particular for those that are Not in Employment Education or Training (NEET).

Awareness-raising activities on both SGBV and child protection will need to be implemented to mitigate risks against women and children, both among the community, new partner staff as well as relevant government authorities who may not be specialized in these areas of refugee protection. Capacity building and training of new staff and government counterparts will need to be implemented and expanded to areas where partners are expanding their presence. In light of the number of refugees attempting to leave Egypt illegally and recent incidents of drowning, regular awareness-raising campaigns on the risks of such irregular movement also remains a priority.

It will be necessary to expand the durable solutions available to refugees, particularly resettlement as a protection tool for especially vulnerable refugees. Adequate staffing for both refugee status determination and resettlement at UNHCR will be necessary in order to ensure that cases identified are adequately processed for submissions to resettlement countries.

The majority of refugees do not have access to sufficient protective spaces. Community-based protection networks currently have limited capacity to help identify those with protection concerns, including children at risk and those at risk of SGBV. UNHCR and partners will need to increase their presence in areas outside of Greater Cairo as well in smaller towns, in order to ensure better access to services and support. This includes a need for more and better trained community based organisations, including child and youth clubs and peer support systems, psycho-social support, including specifically for vulnerable families, as well as access to legal counselling and assistance.

3. RESPONSE STRATEGY

UNHCR and partners will strengthen their presence and assistance inside Greater Cairo and UNHCR will have a permanent field presence in Alexandria by 2014, where the second largest concentration of Syrian refugees outside of Greater Cairo resides. In addition, UNICEF and UNFPA will be building on their existing presence in other governorates to provide services and support to refugees in areas outside of Cairo, Alexandria and Damietta.

The registration of Syrian refugees eases access to services and assists in advocacy efforts with the Government. UNHCR will therefore maintain its registration capacity in and outside of Cairo. A verification process will take place in early 2014 so that data on the highly dispersed population remains current. Data gathered at registration and during the verification exercise will provide valuable baseline data for further profiling in order to better determine existing protection gaps. UNHCR and its partners will identify a suitable survey methodology in order to collect and data, including data current access to rights and services of particular groups such as women and children. The resulting report and gap analysis will be used for more precise advocacy with the Government, as well as for programming purposes and can be shared with partners and donors.

UNHCR will continue with and strengthen its presence at the borders and in detention centres, as well as in field locations outside the capital and will advocate for a more lenient application of the new visa regime, in particular with regard to the access of women and children. Interventions will continue to be made for access to asylum procedures at the borders and from detention centres.

UNHCR, AMERA and IOM will continue to monitor persons of concern in detention, identifying especially vulnerable refugees and those at risk of imminent *refoulement* requiring urgent intervention. A variety of agencies will provide coordinated humanitarian assistance to those in detention, many of whom are likely to continue to include women and children, including infants, so that basic needs, including immediate medical needs, can be met. AMERA will additionally assist refugees in detention with legal counselling and assistance. UNICEF and UNHCR will continue to pursue joint advocacy efforts with regards to children in detention and to secure alternative care arrangements for those unaccompanied and separated children in detention that are released.

UNHCR and partners will continue to identify persons in need of protection counselling, legal assistance and representation and ensure that this is provided through legal aid partners, including through specialized lawyers in SGBV and child protection. Legal assistance will be provided to those in need of documentation concerning their residency, birth and marriage certificates, as well as those who face evictions or have suffered various forms of assault or criminal acts.

UNFPA, IOM, AMERA, UNHCR and partners will co-ordinate closely with regard to SGBV prevention and response. SOPs and referral mechanisms will be updated and an Action Plan established for 2014 in close collaboration with all involved partners. Assessments of current risks and protection gaps will be undertaken by a UNHCR partner and UNFPA, which will provide needed information for the design of more effective prevention activities and response mechanisms and overall programming. In recognition of the fact that SGBV is generally under-reported, UNFPA and UNHCR partners will ensure that the number of protective spaces for women is increased and strengthened and that community leaders are trained to combat SGBV. In addition, UNFPA will be training religious community leaders in order to mitigate SGBV in areas where Syrian refugees are concentrated. UNFPA and UNHCR partners will train service providers on SGBV in emergencies.

Case management, psycho-social support and the provision of specialized legal aid to SGBV survivors will be strengthened by UNHCR and partners. The availability of specialized and emergency medical aid will also be expanded, including through the distribution of post-rape kits by UNFPA, as well as the availability of psycho-social support, the latter being provided by UNHCR partners and AMERA.

With regard to the protection of children, community Based Protection Networks (CBPNs) will be expanded in smaller towns outside of the main cities. The CBPNs are vital to the pro-active protection of the Syrian community training will be provided so that child protection gains a greater focus. Partners will work together to build the capacity of and integrate CBPNs into their existing child protection structures providing a strong network of child protection actors. Additional child friendly spaces and youth centres are planned in more remote areas, and new child protection committees will be established and trained.

Youth clubs will be established and child leaders and community facilitators will be identified and trained. UNICEF and other partners will increase their focus on youth by providing life skills training and psychosocial support. Psycho-social support will be made accessible to children by UNICEF, AMERA and UNHCR partners including outside of Greater Cairo. UNICEF will provide

psycho-social counselling to parents and support parent groups in addition to assisting particularly vulnerable families with cash grants, so as to encourage school attendance and mitigate risks of child neglect, abuse and exploitation.

Capacity building will be provided to social workers and community facilitators in Community Development Associations (CDAs), NGOs and community schools and training on child safeguarding systems will also be provided.

UNHCR and partners will also expand their capacity to conduct best interest assessments of children country-wide in order to guarantee an early identification of children at risk and immediate referrals to support services.

Entry points for co-existence programmes benefiting children will be identified through CDAs and Child Protection Committees. Through these local networks it will be possible to create a more holistic child protection system that has an existing inbuilt response and referral mechanism whilst at the same time helping to promote co-existence with the host community.

Awareness-raising activities on child protection will include information on the importance of birth registration in order to access, among other services and assistance, health services including essential vaccinations. Legal counselling and assistance will be accessible to those encountering difficulties in obtaining birth certificates due to missing documents or births outside of marriage or legally recognized marriages.

Advocacy interventions with the Government will continue in order to maintain an adequate protection space based on existing obligations under international and national law, including with regard to xenophobic broadcasts in the media. Posters, information leaflets, the internet and social media pages are being used by UNHCR and partners to disseminate information quickly and accurately to Syrian households. Information is also spread through community associations and word of mouth, with information hotlines and a complaints box available in order to better assist Syrian refugees.

Following an appeal from UNHCR, several countries agreed to increase their resettlement quotas in response to the Syria crisis. Therefore, the availability of durable solutions for refugees will include resettlement as a protection tool for especially vulnerable Syrian refugees with urgent protection needs. Relevant UNHCR staff will be trained in the resettlement criteria and methods for identifying refugees at a heightened risk within the community. Staff will also be trained on case management and confidentiality and SOPs will be established to ensure smooth referrals of persons at risk to available services and the refugee status determination (RSD) unit, in particular with regard to those which require urgent attention. In order to ensure quality RSD and resettlement submissions, the additional staff needed for the Syrian resettlement programme will be working under the supervision of the existing RSD and RST units for the regular programme.

UNFPA will organize community initiatives for the awareness-raising of SGBV among both men and women and young men and women will be trained in peer education. A number of community initiatives will additionally aim for better co-existence between Syrian refugees and host communities, in order to mitigate risks of SGBV emanating from the host community in particular against girls, single women or women-headed households in the Syrian refugee community.

Community participation and empowerment is acknowledged as key in identifying and responding to protection risks. UNFPA, UNICEF, IOM and its partners will continue to train psychosocial workers, community outreach volunteers and youth to provide support within their communities, including emergency psychosocial and peer support. Additional protective spaces will be established throughout the country, in particular for women and children. Here, awareness-raising activities will be provided on services available as well as on SGBV and child protection, in order to mitigate the risk of violence against women and children. Awareness-raising on the risks of irregular migration will continue to take place at community centres, which also provide space for the training of CBO and safe recreational and learning spaces for women, adolescents, youth and children (e.g. life skills for youth).

Quick Impact Projects (QIPs) are small-scale, low cost projects designed to assist refugee and host communities and to counter negative perceptions against Syrians with the goal of improving the overall protection environment for Syrian refugees. The QIPs will be based on community participation and where needs for support are greatest, both within and outside of Greater Cairo. The projects planned in 2014 will be aimed at addressing the most urgent needs of the community, including a lack of services in deprived areas, and are intended to improve the living conditions and quality of life for both Egyptians and Syrians.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Refugees fleeing Syria are able to access the territory, seek asylum and have their basic rights respected.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 1.1 Systematic monitoring of borders and detention centres improved and expanded		2.500		Cairo, Alexandria, Damietta	662.550	505.250	78.000	79.300	UNHCR, AMERA, IOM, UNICEF
Output 1.2 Advocacy conducted		250.000		Cairo, Alexandria, Damietta	1.018.727	952.146	34.081	32.500	UNHCR, IOM, AMERA
Output 1.3 Registration maintained, verification conducted and profiling of persons of concern planned and undertaken in order to determine extent of basic rights respected		180, 000 verified and 70, 000 newly registered		Cairo, Alexandria, Damietta	1.426.724	787.293	325.000	314.431	UNHCR
Objective 1					3.108.001	2.244.689	437.081	426.231	

Objective 2. The risks and consequences of SGBV experienced by women, girls, boys and men are reduced and/or mitigated.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 2.1 Refugees and local women and girls have increased access to safe spaces		3.100	1.340	Cairo, Alexandria, Menya	554.095	264.048	181.828	108.219	UNHCR, UNFPA, IOM, Terre des Hommes (Tadamon + PSTIC), CARE International
Output 2.2 Survivors of SGBV can access immediate, safe and multi-sectoral services (psycho-social, health, justice and security through ethical referrals and quality case management)		28.044	8.211	Cairo, Alexandria, Menya	748.907	406.953	214.500	127.453	UNHCR, UNFPA, IOM, Save the Children, Terre des Hommes (Tadamon + PSTIC), CARE International, AMERA
Output 2.3 Positive coping mechanisms and risk prevention regarding SGBV are encouraged through community based initiatives and increased capacity of frontline workers		2.510	550	Cairo, Alexandria, Menya	597.537		361.401	236.137	UNHCR, UNFPA, IOM, CARE International
Objective 2					1.900.539	671.001	757.729	471.809	

Objective 3. Child protection interventions for boys and girls are strengthened with a particular focus on children at risk.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 3.1 Community based child protection and psychosocial support structures established and functioning		39.150	11.410	Cairo, Alexandria, Damietta	2.723.500	1.205.263	1.445.113	73.125	UNHCR, Plan International, Save the Children, Terre des Hommes (Tadamon + PSTIC), UNICEF
Output 3.2 Structures for Identification of children at risk established and response services provided		10.300	3.950	Cairo, Alexandria, Damietta	822.250	724.750	97.500		UNHCR, Plan International, Save the Children, Terre des Hommes (Tadamon + PSTIC), UNICEF / AMERA
Output 3.3 Best interest determination process established and operational		700	0	Cairo, Alexandria	32.500	26.000	6.500		UNHCR, AMERA
Output 3.4 Capacity development supported		5.590	5.030	Cairo, Alexandria	126.750	13.000		113.750	UNHCR, Save the Children, Plan International, UNICEF
Output 3.5 Strengthening highly vulnerable families with children		2.500		Cairo, Alexandria, Damietta	1.300.000	1.300.000			UNICEF, UNHCR
Objective 3					5.005.000	3.269.013	1.549.113	186.875	

Objective 4. Durable solutions are made available to Syrian refugees.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 4.1 Capacity development supported to improve public attitude towards persons of concern		6.300	5.300	Cairo, Alexandria	258.307	110.500	147.807		UNHCR, CARE International, Save the Children
Output 4.2 Cases eligible for possible resettlement are identified		12.010	0	Cairo, Alexandria	1.342.019	1.342.019	0		UNHCR / AMERA
Objective 4					1.600.327	1.452.519	147.807		

Objective 5. Community participation and empowerment strengthened and expanded									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 5.1 Community self-management supported including through psychosocial support and peaceful co-existence projects implemented		50.610	25.000	Cairo, Alexandria, Damietta	1.710.545	1.300.000	410.545		UNHCR, CARE, Terre des Hommes (Tadamon + PSTIC), UNICEF, IOM, Plan International
Output 5.2 Participatory approach implemented		250.000		Cairo, Alexandria, Damietta	29.250		29.250		UNHCR
Output 5.3 Community leadership and decision-making supported		180		Cairo, Alexandria, Menay	89.290		24.290	65.000	UNHCR, CARE International
Objective 5					1.829.084	1.300.000	464.084	65.000	

Sector indicators	Target
# of detainees monitored and recorded by age, gender, specific needs and legal representation, social support material assistance provided;	1.500
# of persons of concern individually registered with level 3 data	180.000
# of safe and/or protective spaces established	20
% of survivors reporting SGBV: access case management and specialised services	90
% of UA/SC for whom best interest processes initiated completed	90
# of Quick Impact Projects (QiPs) implemented	40
# cases identified and submitted for resettlement	1.200
# advocacy interventions with the Government	10

Protection - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	13.442.951	8.937.222	3.355.814	1.149.915	7.238.512

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Protection in Egypt (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
AMERA	325,000	195,000	130,000
IOM	975,000	600,000	375,000
PLAN	277,500	180,375	97,125
SCI	585,000	380,250	204,750
UNFPA	295,000	191,750	103,250
UNHCR	14,968,963	10,542,576	4,426,387
UNICEF	3,255,000	1,353,000	1,902,000
Total	20,681,463	13,442,951	7,238,512

G. Basic Needs Livelihoods and Shelter response

Lead Agency	UNHCR		
Participating Agencies	UN-HABITAT, Islamic Relief Worldwide (IRW), Caritas Alexandria, Resala, Catholic Relief Services (CRS), Terre des Hommes (TDH), Tadamon, Psycho Social Training and Services Institute of Cairo (PSTIC), International Organization for Migration (IOM), the Central Association for Kindergarten Supervisors League (CAKL), Save the Children, Plan International.		
Objectives	<ol style="list-style-type: none"> 1. Population has sufficient basic and domestic items. 2. Self-reliance and livelihoods improved. 3. Shelter and infrastructure established, improved and maintained. 		
Requirements from January to June 2014	US\$20,696,598		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$11,867,050	US\$6,854,250	US\$1,975,298
Total 2014 indicative financial requirements	US\$31,840,920		
Contact Information	Ziad Ayoubi, ayoubi@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

By October 2013, Islamic Relief Worldwide (IRW), Resala, and Caritas had assessed the vulnerability of over 80,000 individuals. Beneficiaries of cash assistance have been selected based on 14 pre-set eligibility criteria. This set of criteria includes disabled persons, unaccompanied children, persons with serious medical conditions, older refugees, victims of violence and torture and female-headed households. Home visits have been conducted to complete the selection of beneficiaries and provide counselling for them.

Cash-based interventions have been diversified in order to respond to different needs of vulnerable families. In addition to monthly payments that have been distributed regularly to 54,000 most vulnerable individuals, a winterization programme is planned targeting vulnerable individuals and one-off/emergency payments have been distributed to 6,000 individuals during the first half of the year. The political and security situation in the country delayed the implementation of cash based interventions in some areas, including Damietta, where a partner faced difficulties in getting the needed permit to work with UNHCR from national authorities, resulting in the delay of assistance to refugees in this area.

The rate of monthly assistance is harmonized with the regular programme for non-Syrians to ensure equity among refugees in Egypt. The scattering of Syrian refugees in Egypt and their presence in some remote governorates is considered one of the major challenges. Currently, UNHCR implementing partners have a presence in four different governorates: Damietta, Alexandria, Giza

and Cairo. However, with refugees living outside of these main areas, additional assistance given in a wider geographic area is planned for 2014.

As of August 2013, the capacity of field teams has been significantly increased in order to respond to the emerging needs of Syrian refugees. IRW established a new branch for cash assistance in order to clear the backlog of assessments and reduce waiting periods. Resala and Caritas also distribute unconditional cash assistance.

The deterioration of protection environment for Syrian refugees and the increase in rents have limited the capacity of Syrian households in finding accommodation. In 2013, several evictions have been reported and emergency support was provided.

Following UNHCR's livelihood strategy established in 2012, the self-reliance programme targeting Syrian refugees in Egypt began in mid 2013 with encouraging results. Livelihood opportunities for Syrian refugees will help to decrease dangerous coping mechanisms as well as exposure to trafficking, early marriage, survival sex and exploitation. The project enables Syrian refugees in Egypt to be self-reliant and the number of refugees dependent on financial assistance to be reduced. Priority is given to women at risk and survivors of sexual and gender-based violence. Community-based protection mechanisms are created to accompany wage and self-employment risks.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Non-camp	250,000	250,000

The majority of Syrian refugees in Egypt have been facing challenges in responding to their households' basic needs. Savings have been considered the main source of income for Syrians arriving to Egypt in 2012. These savings have significantly depleted and many Syrians arriving in Egypt in the second half of 2013 were destitute and devoid of basic financial assets. In this framework, 79 per cent of interviewees during the joint needs assessment of September 2013 have indicated that they face difficulties in paying their housing rent. Participants in the focus group discussion held in 6th of October city mentioned that charity organizations that used to provide Syrians with subsidized rent, cash or household items were shut down after June 30 following the regime change, leading to a significant deterioration in material assistance.

According to the joint needs assessment conducted in September 2013, cash assistance, housing support and income generation have been identified as top priorities by Syrian refugees. Syrian refugees equipped with professional and vocational skills have been searching for jobs in Egypt and a good number of them are employed. In this framework, 43 per cent of interviewees during the joint needs assessment of September 2013 have noted that salary is their main source of income.

This indicates clearly that Syrians are getting jobs in Egypt, including women respondents who indicated they were working in areas such as cooking and sewing. However, participants in focus group discussions mentioned that, *“Syrians are suffering from difficult working conditions namely long working hours combined with very low salaries.”*

3. RESPONSE STRATEGY

The overall number of organizations involved in this sector will increase and a revised division of labour will help in reaching all Syrian refugees registered with UNHCR. In addition, UNHCR and its partners in Egypt will implement the Refugee Assistance and Implementation System (RAIS), which helps to keep refugee information up to date, provide targeted assistance and reduce fraud. The operation will also pilot a OneCard system so that UN agencies and partners will be able to provide assistance through a single platform. Agencies participating in the basic needs and livelihoods sector will work together to achieve three objectives: 1) the refugee population has sufficient basic and domestic items; 2) their self-reliance and livelihoods are improved, and that 3) shelter and infrastructure are established, improved and maintained.

In order to protect Syrian vulnerable households from negative coping mechanisms, unconditional cash-based interventions will continue to be implemented. Those interventions will target only vulnerable households with either one-off payments (winterization or emergency) or monthly payments that last between three months and one year according to 14 pre-set vulnerability groups. In order to complete the prioritization of households, social assessment interviews will be conducted with registered Syrian households to identify beneficiaries. Due to the increased vulnerabilities, protection risks, and destitution, it is estimated that 70 per cent of the population (175,000 individuals) will benefit from cash based interventions in 2014. Assisting vulnerable households will continue to be one of the priority interventions for UNHCR and its partners in Egypt.

The self-reliance programme will be expanded to target around 10 per cent of Syrian refugees registered with UNHCR and members of host communities to achieve either self-employment or wage-employment. This support will limit reliance on humanitarian aid, promote positive coping mechanisms, and be more sustainable over the long term. Beneficiaries may receive training, business advice, job placement, and seed grants to start up micro businesses. Greater Cairo, Damietta and Alexandria will be targeted with self-reliance activities in 2014. An online social network for employment will be established in 2014 to enhance job matching programmes. In interviews with refugee women, they called for the development of wage-earning opportunities for themselves, their spouses and the younger adults living with them. Technical training for youth and women (refugees and host communities) will be provided in targeted areas with focus on furniture and food processing sectors in Damietta and Alexandria. Job matching and training components will be implemented in collaboration with outreach programmes in order to capitalize on community centres established by UNHCR and partners to serve Syrian households.

In collaboration with UN-HABITAT, emergency accommodation will be provided for vulnerable families in transitional and temporary apartments. This activity was implemented in 2013 but needs to be expanded to cover Damietta and Alexandria in addition to Greater Cairo. The estimated number of persons who will benefit from this emergency service during 2014 is 15,000 individuals. Vulnerable Syrian households will also be supported to find decent accommodation especially through facilitation of negotiation with landlords and promotion of protective environment for newly settled families. This activity will be essential to protect households, in particular women and children, from either exploitation or eviction. In this framework, conditional cash assistance will be provided to up to 700 households. A shelter strategy is currently being developed by UNHCR in collaboration with UN-Habitat for Syrian refugees in Egypt, which aims to make the most of the Egyptian surplus in housing infrastructure, building on the social support systems and structures that refugees have already established to manage their housing issues. The shelter-related activities of this plan will look closely at the different coping strategies by the refugee community and will consider alleviating negative ones. It will also set up channels to facilitate legal and real estate consultations to refugees and to provide better access to information on availability of housing and access to it and to basic urban services. These actions will be made possible through effective partnership with urban administration in order to develop area-based shelter solutions. Parallel to that is the continuous work of promoting co-existence and inclusion with the host community.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Population has sufficient basic and domestic items.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 1.1 Cash grants or vouchers (multi-purpose) provided		250.000		National	15.726.750	10.237.500	5.489.250		UNHCR, Islamic Relief Worldwide, Caritas Alexandria, Resala, Save the Children and Plan International
Objective 1					15.726.750	10.237.500	5.489.250		

Objective 2. Self-reliance and livelihoods improved.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 2.1 Access to self employment/ business facilitated		5000	500	Greater Cairo Alexandria Damietta	1.237.899	282.750	260.000	695.149	Catholic Relief Services (Livelihood Services Initiative), Caritas Alexandria, International Organization for Migration (IOM), Terre des Hommes, Tadamon, Save the Children, Plan International
Output 2.2 Access to wage employment facilitated		5000	500	Greater Cairo Alexandria Damietta	930.800	199.550	260.000	471.250	Catholic Relief Services (Livelihood Services initiative), Resala, Caritas Alexandria, International Organization for Migration (IOM), Terre des Hommes, Tadamon, Save the Children, Plan International
Output 2.3 Vocational training/technical skills provided		5000	1.000	Greater Cairo Alexandria Damietta	1.728.649	659.750	520.000	548.899	Catholic Relief Services (Livelihood Services Initiative), Caritas Alexandria, The Central Association for Kindergarten Supervisors League, International Organization for Migration (IOM), Terre des Hommes, Tadamon, Save the Children, Plan International
Objective 2					3.897.348	1.142.050	1.040.000	1.715.298	

Objective 3. Shelter and infrastructure established, improved and maintained.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 3.1 Emergency shelter provided		15.000		Greater Cairo Alexandria Damietta	227.500	227.500			UNHCR, UN-HABITAT, Terre des Hommes, Psycho Social Training and Services Institute of Cairo (PSTIC), Plan International
Output 3.2 Sectoral cash grants or vouchers provided		5000		Greater Cairo Alexandria Damietta	845.000	260.000	325.000	260.000	UNHCR, UN-HABITAT, Plan International
Objective 3		15.000			1.072.500	487.500	325.000	260.000	

Sector indicators	Target
# of men and women assessed for vulnerability	250.000
# of men and women receiving cash grants	175.000
# of men and women receiving vouchers (winterization)	250.000
# of men and women provided with guidance on business and labour market opportunities	17.400
# of men and women receiving cash/vouchers for business start up	3.100
# of men and women registered in job placement services	6.200
# of men and women gaining employment through the self-reliance programme	5.000
# of men and women provided with technical skills training	9.500
# of men and women receiving training certification	5.300
# of emergency shelters provided	5.000
# of men and women receiving emergency shelters	15.000
# of shelters repaired	500
# of households receiving cash grants for rental accomodation (conditional)	700

Basic Needs, Livelihoods and Shelter - Summary Requirements										
					Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014	
					Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)	
SECTOR GRAND TOTAL					20.696.598	11.867.050	6.854.250	1.975.298	11.144.322	

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Basic Needs Livelihoods and Shelter in Egypt (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
CRS	800,000	500,000	300,000
IOM	700,297	500,000	200,297
PLAN	205,000	133,250	71,750
SCI	545,000	354,250	190,750
UN-Habitat	1,200,000	600,000	600,000
UNHCR	28,390,623	18,609,098	9,781,525
Total	31,840,920	20,696,598	11,144,322

H. Education response

Lead Agencies	UNHCR		
Participating Agencies	UNICEF, Save the Children, Catholic Relief Service (CRS), Tadamon, AMERA, St. Andrew's Education Service, KG Supervisors League, International Organization for Migration (IOM) and Plan International		
Objectives	<ol style="list-style-type: none"> 1. Access to education opportunities (formal and non-formal). 2. Quality education in protective learning environment. 		
Requirements from January to June 2014	US\$13,655,391		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$9,311,044	US\$2,746,347	US\$1,598,000
Total 2014 indicative financial requirements	US\$22,758,985		
Contact Information	Mohammed Shawky, shawkym@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

The quality of the school environment in Egyptian public schools is a significant barrier to the enrolment and retention of Syrian children, as are the difficulties they face in adjusting to the Egyptian dialect and curriculum. Syrian children find the instructional accent in the classroom difficult to understand and follow. Overcrowded classrooms, elements of discrimination, harassment, including sexual harassment, distance to available schools and problems with transportation represent major challenges for Syrian families, especially daughters who are particularly targeted for harassment in school and on their way to school. Many parents have expressed fear for the security of their adolescent girls and prefer to keep them at home rather than sending them to school. UNHCR will, in partnership with the community and Ministry of Education, be setting up more remedial classes in areas most affected by this problem.

In September 2013, a joint UNHCR, UNICEF and Ministry of Education Schools Needs Assessment was conducted in Cairo, Giza, Alexandria, Qalyoubeyyah and Damietta looking into enhancing the capacity of public schools and measures to enable them to absorb more Syrian children. The assessment found that public schools require considerable support in terms of additional educational supplies, teachers, teacher training, as well as support in creating a welcoming, safe and inclusive environment for Syrian girls and boys. Additional measures to address the needs of girls will be included.

CRS is UNHCR's partner registering all Syrian school children and in 2013 over 20,000 education grants have been distributed to approximately equal number of boys and girls. The grants assist families in paying for costs related to enrolment, such as school fees, safe transportation for children (especially girls), school supplies and uniforms, and remedial classes when necessary. Additional funds are available to families of children with specific needs. It is of paramount importance to

keep the education grant universal. Families advised that the grant, despite being modest, made it far easier to send their children to school as they are able to afford the cost of transport and without it they would have struggled to send all their children to school. Special grants also assist the most vulnerable children, and those with specific needs to specialized schools.

An education working group was established and regularly attended by all partners, as well as a representative from the office of the Egyptian Ministry of Education, to deal with challenges which were highlighted during the joint needs assessment missions.

There are a limited number of scholarships for higher education provided by foreign institutes but the Egyptian Ministry of Higher Education currently requests secondary certificates for admission to colleges and universities, which is often not possible for Syrian children who fled the war. In this regard, UNHCR, UNICEF and its partners will continue its advocacy efforts in this area in 2014. Recruiting more female teachers within the Syrian refugee community for schools is still a challenge.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Non-camp	250,000	100,000

All registered Syrian refugees in Egypt are living in non-camp areas and scattered in urban areas; 91 per cent of them reside in Greater Cairo, Damietta and Alexandria. Syrian refugees in Egypt have reported they are facing challenges in enrolling their children in public schools following the 30th June ousting of former president Morsi. This problem was exacerbated by a negative media-led campaign targeting Syrians residing in Egypt, which impacted on the attitudes of some officials registering Syrian children in their local schools. Advocacy efforts with the Ministry of Education highlighting the plight of Syrian refugees are paying dividends. UNHCR and partners will increase activities promoting community cohesion both in and out of schools.

UNHCR, UNICEF and the Ministry of Education, conducted a Schools Needs Assessment in areas with a high density of Syrian refugees. In 2014, even more children will be facing homelessness, food insecurity, pressure to drop out of school to find work, and security threats.

Based on this assessment, UNHCR and UNICEF will provide support to improve and rehabilitate schools in areas heavily populated by Syrian refugees. Mapping of government schools most frequented by Syrian children was concluded, and a report by the Egyptian General Educational Buildings Authority is now being discussed to finalize the implementation process and timeline. This report will inform the dialogue with the Ministry and around 85,000 children aged 6 to 17 from host communities will also benefit from the planned school rehabilitation programme. Once implemented in 2014, it will also include a component to address the gender-sensitive learning environment in 50 basic and secondary schools.

3. RESPONSE STRATEGY

UNHCR, through its partner CRS, provides additional funds to Syrian children to assist the most vulnerable families to pay government school fees, provide safe transportation for children (especially girls) living in isolated areas which lack nearby schools, buy school supplies and uniforms, and where necessary attend remedial classes.

In 2013 some 35 disabled Syrian children are supported in specialized private schools as no public schools are available for physically and mentally disabled children. These children receive special education grants to cover fees and special transportation needs. The number of children supported through this project will be increased in 2014 through increased community outreach. In addition, adult literacy and numeracy classes are provided to Syrian families to assist them in lifelong learning and to help them support their children's education. Many pre-school children have suffered trauma and loss and they require teachers who have received specialized training. Training and awareness sessions will therefore be provided to 100 teachers as well as psychosocial support for these children based on a needs assessment.

UNHCR and CRS have also initiated support to a Syrian community school in 6th October city where some 2,000 Syrian children are attending classes. The children are enrolled in local government schools and will sit national exams with the Egyptian students. However, Syrian teachers teach them the Egyptian curriculum and some Syrian subjects in the community school. This innovative approach allows the Syrian students to learn in a safe and culturally familiar environment with Syrian teachers, but they will receive Egyptian accreditation if they pass the national exams. UNHCR and partners put a proposal to the Minister of Education recommending the establishment of an umbrella network regulating all non-formal learning activities provided to Syrians in the community. This body would be established by the MoE to make sure that all learning activities provided meet the set standards by the ministry, to get it certified, to address the dialect and to the barriers to enrolment mentioned in the joint needs assessment. Interventions to increase quality of community-based schools will continue in 2014 and be linked to capacity-building efforts for school management. Strong monitoring systems will be put in place for both learning achievements and teacher professional development in order to adapt the programme to address evolving needs.

An ambitious plan to improve schools for thousands of host-community and refugee children is developed and will be implemented in 2014. This has been planned through discussions with the communities as well as in response to a joint needs assessment conducted by UNHCR, Ministry of Education and UNICEF in September 2013. This assessment revealed pressing need to construct, adapt and refurbish a large number of classrooms in order to enable the schools to absorb the increasing number of Syrian refugee students. Pre-school children will be supported in enrolment in nurseries and kindergartens run by the Ministry of Social Affairs and the Ministry of Education, and in addition community-based kindergartens will be established in those areas where gaps in coverage are identified. UNICEF will continue to build on its existing programme of cooperation with the Ministry of Education to strengthen existing public schools in Alexandria, Damietta and Greater Cairo as well as expanding access to pre-school education.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Access to education opportunities (formal and non-formal).									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 1.1 Early childhood education provided or supported		6.000	1.425	Cairo, Alexandria, Damietta, upper Egypt, Giza, 6 October, Kalubia, Assuit	1.368.000	1.000.000	168.000	200.000	UNHCR, UNICEF, CRS, STC, TAD, Save the Children, Plan International, AMERA
Output 1.2 Primary education provided or supported		40.000	33.000	Cairo, Alexandria, Damietta, upper Egypt, Giza, 6 October, Kalubia, Assuit	5.784.424	5.764.424	20.000		UNHCR, UNICEF, CRS, STC, TAD, Save the Children, Plan International, AMERA
Output 1.3 Secondary education provided or supported		50.000	2.000	Cairo, Alexandria, Damietta, upper Egypt, Giza, 6 October, Kalubia, Assuit	1.983.000	1.713.000		270.000	UNHCR, UNICEF, CRS, STC, TAD, Save the Children, Plan International, AMERA
Output 1.4 Access to tertiary education provided or supported		5	-	Cairo, Alexandria, Damietta, upper Egypt, Giza, 6 October, Kalubia, Assuit	732.000		712.000	20.000	UNHCR, CRS, AMERA
Output 1.5 Lifelong learning opportunities provided or supported		5	-		111.000		103.000	8.000	Plan International, AMERA, UNHCR
Objective 1					9.978.424	8.477.424	1.003.000	498.000	

Objective 2. Quality education in protective learning environments.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	SYR in camps	SYR in urban	Other affected pop						
Output 2.1 Measures to promote girls' education		6.000		Cairo, Giza, Six of October, Kalubia, Alexandria, Damietta	359.624	196.624	29.000	134.000	UNHCR, UNICEF, CRS, Plan International, AMERA, CARE International
Output 2.2 Advocacy conducted		100.000		Egypt	43.100		17.100	26.000	UNHCR, CARE International, Plan International, AMERA
Output 2.3 Capacity development supported		27.000	85.000	Egypt	1.157.247		637.247	520.000	UNHCR, UNICEF, IOM, Save the Children, CARE International
Output 2.4 Educational infrastructure constructed, improved or maintained		6.000	4.000	Egypt	2.001.935	581.935	1.000.000	420.000	UNHCR, Save the Children, CARE International
Output 2.5 Safe learning environment promoted		3.600	2.400	Greater Cairo	115.061	55.061	60.000		UNHCR, Save the Children, CARE International
Objective 2		100.000	85.000		3.676.967	833.620	1.743.347	1.100.000	

Sector indicators	Target
# of children aged 3-5 enrolled in early childhood education	6.000
# of children enrolled in primary & Secondary education	50.000
# of measures in place to facilitate women and girls access to education	500
# of educational facilities receiving material support, constructed, improved or maintained.	20
# of children with specific needs enrolled in school	80

Education - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	13.655.391	9.311.044	2.746.347	1.598.000	9.103.594

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Education in Egypt (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
CARE	743,985	446,391	297,594
IOM	500,000	350,000	150,000
PLAN	120,000	72,000	48,000
SCI	850,000	510,000	340,000
UNHCR	16,545,000	9,777,000	6,768,000
UNICEF	4,000,000	2,500,000	1,500,000
Total	22,758,985	13,655,391	9,103,594

I. Food Security response

Lead Agency	UN World Food Programme (WFP)		
Participating Agencies	Coptic Evangelical Organization for Social Services (CEOSS), Organization for the Development of Women and Children (ODWC), UNHCR, UNRWA		
Objectives	<ol style="list-style-type: none"> 1. Save lives and ensure food security of targeted vulnerable Syrian refugees and Palestinian refugees from Syria. 2. Assist vulnerable populations in host communities by relieving tensions resulting from increased refugee presence and competition for resources. 		
Requirements from January to June 2014	US\$23,048,442		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$22,865,472		US\$182,970
Total 2014 indicative financial requirements	US\$52,568,244		
Contact Information	Abraham Sewonet Abatneh, abraham.abatneh@wfp.org Terri O'Quinn, terri.oquinn@wfp.org		

1. ACHIEVEMENTS AND CHALLENGES

Since the start of its food voucher assistance to Syrian refugees in February 2013, WFP Egypt was able to scale-up assistance from 7,000 Syrian refugees to 53,000, including nearly 15,000 women and 24,000 children, and provided 259,000 food vouchers as of the end of October. Despite ongoing political instability and security restrictions, the actual versus planned distribution rates have increased from 70 per cent to over 90 per cent. The recipients of vouchers were prioritized in geographically poorer parts of Cairo as well as in Alexandria and Damietta, following joint assessments and monitoring in coordination with UNHCR.

The voucher assistance enabled WFP to inject US\$7.4 million into the local economy through partner supermarkets as of the end of October. In addition to the Syrian population, WFP extended the food voucher assistance to Palestinian refugees from Syria (PRS) at the request of the Government, assisting an initial 700 beneficiaries in September, including 200 women and 300 children, with a plan to reach 6,000 Palestinian refugees from Syria a month by December in partnership with UNWRA.

WFP adopted a regionally harmonised monitoring system to monitor food insecurity and negative coping strategies as well as providing a feedback mechanism for beneficiaries and partner supermarkets. This included price market monitoring, ensuring that the voucher continues to provide access to nutritious and sufficient food for a minimum caloric intake of 2,100 kcal per refugee per day amid inflation and rising food prices².

In addition, WFP empowered refugee committee leaders, of which 33 per cent were women,

² The option of cash assistance will also be considered in 2014

through their support of the voucher programme in identifying distribution sites, contacting refugees and assisting with site management. As part of a gender-sensitive assistance programme, WFP is supporting participation of women in all aspects of the assistance and accommodating cultural preferences at distribution sites including segregated waiting areas and lines for voucher collection. Priority is given at voucher distributions to the elderly, disabled, pregnant and women with young children.

However, there have been challenges predominantly related to the security situation and increasing anti-Syrian sentiment in the host community including security incidents and associated travel restrictions during the state of emergency affecting staff movement and distribution plans. Anti-Syrian sentiment within host communities poses safety risks for refugees and staff gathering in large groups for voucher distributions. In addition to having security personnel being present at distributions, WFP is working to transition to e-vouchers, which will reduce the need for face-to-face distributions and reduce operating costs. WFP is also coordinating with UNHCR to support small-scale projects in the host communities to offset tensions. WFP initially directly implemented the food voucher distributions without the assistance of an official cooperating partner. One NGO was finally granted government security clearance in July and is assisting with distributions in greater Cairo and Damietta.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Urban – Syrian refugees	200,000 (June 2014) 250,000 (Dec 2014)	110,000 (June 2014) 140,000 (Dec 2014)
Urban – Palestinian refugees from Syria	6,000	6,000

In 2013 under RRP5, WFP planned to assist 60,000 or 60 per cent of the planned number of registered refugees, targeting the most vulnerable and food-insecure registered refugees with food vouchers. This assistance was increased to 70,000 refugees when the 100,000 projected to be registered as refugees by December 2013 was surpassed in September. As the political, economic and security situation in Egypt continues to deteriorate and Syrian refugees are less able to access or continue livelihood activities, a larger portion is becoming food-insecure and requires assistance. The resentment towards Syrians in Egypt since the change in government due to perceived political affiliation has contributed to their loss of jobs and income. Syrians in Egypt are facing increasing arrests, deportations, harassment and an overall decline in hospitality from civil society. Whilst some Syrians are leaving Egypt, those with very limited resources do not have this option. To meet rising needs, WFP is planning to double its assistance in RRP6 to reach 140,000 Syrian refugees a month by December 2014, shifting from geographical to vulnerability targeting. WFP is also planning to reach up to 6,000 Palestinian refugees from Syria a month, assisting 100 per cent of the potential total population.

The joint needs assessment for Syrian refugees conducted in September 2013 found that 73 per cent of the 372 respondents did not have sufficient food availability in their household over the last seven days with 46 percent considering it barely sufficient and 27 percent insufficient. Men and women in the focus group discussions noted high food prices in Egypt that made it difficult to access diversified foods and resorted to negative coping strategies such as selling assets, reducing the number of meals eaten and not purchasing more expensive foods (e.g. meat, chicken and fish). The reduction in meals was consistent with the needs assessment household questionnaires that found 67 percent are eating two meals a day with some households only eating one (4 percent). In the focus group discussions, men emphasised the lack of livelihood opportunities and high rental costs as the main contributors to insufficient or barely sufficient food availability while the women added concerns about poor nutrition. Girls and boys expressed that the food they are eating is lower quality and quantity than in Syria (and rarely include meat or fruit) due to lower household incomes. Unless food assistance is properly targeted and sustained, the potential for increased vulnerability, malnutrition and exploitation will be high in the refugee population, especially among women, children, elderly and sick.

The food voucher has already been increased from US\$26 dollars to US\$30 in April 2013 due to significant inflation and rising food prices. “The Status of Poverty and Food Security in Egypt: Analysis and Policy Recommendations – Preliminary Summary Report” released by WFP and the Government of Egypt identified 13.7 million Egyptians or a three per cent increase from 2009 to 2011 as food insecure –reinforcing the importance of ongoing beneficiary targeting as well as the need to support host communities to not exacerbate existing tensions between the two groups.

3. RESPONSE STRATEGY

While the assistance is currently through paper voucher or magnetic cards that are single use only at the partner supermarkets and have a limited validity, WFP Egypt is in the process of transitioning to e-vouchers. WFP and UNHCR are discussing the possibility of moving to a common assistance delivery platform (OneCard system), which will provide beneficiaries through a single magnetic card with the means to cover their food, cash and other NFI needs.

The e-voucher modality is expected to:

- Lower visibility of the assistance delivered to the Syrian refugees and thereby mitigate tensions with the host community;
- Facilitate timely remote uploading of vouchers/cash and reduce the need for gathering large crowd of refugees for distributions that pose safety risks and incur expenses for refugees;
- Increase programme efficiency by reducing administration requirements; and
- Provide increased dignity and psychological support to the beneficiaries with a sense of a more normal lifestyle and ability to cope for their families.

UNHCR and WFP are reassessing options for targeting food assistance and ensuring the most vulnerable are supported in a sustained manner. Household vulnerability assessments are now becoming available on a sufficient scale from UNHCR partners to facilitate transitioning from geographic targeting to household vulnerability targeting. This will need to include a reassessment mechanism to reflect potential changes in refugee circumstances and vulnerability criteria as well as be able to keep pace with the rate of registration.

The other proposed assistance is community-driven quick impact projects (QIPs) in the poorest host communities experiencing a high concentration of Syrian refugees. The QIPs would be small-scale, low-cost and rapidly implemented projects intended to assist in relieving the rising tensions between the host community and the Syrian refugees by addressing jointly expressed needs in the community. QIPs in key locations would be identified in partnership with UNHCR, host communities, NGO partners and refugee communities, and implemented through INGOs targeting a combination of social improvements, livelihood options and co-existence support. The QIPs would be made equally accessible by women, men - and boys and girls of an appropriate age in relation to the particular project - with training provided equitably. Linkages with existing government or partner programmes, projects or safety nets systems will be the preferred option. The projects, unlike the current voucher distributions, would be intended as high visibility work to promote associated benefits of hosting Syrian refugees in the community.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Save lives and maintain food security.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Targeted food-insecure refugees receive monthly food assistance through vouchers		140.000		Greater Cairo, Alexandria, Damietta	\$21.571.200	\$21.571.200			Coptic Evangelical Organization for Social Services (CEOSS), Organisation for the Development of Women and Children, UNHCR
		6.000		Greater Cairo, Alexandria, Damietta	\$1.294.272	\$1.294.272			UNRWA
Objective 1					22.865.472	22.865.472			

Objective 2. Assist vulnerable populations in host communities by relieving tensions resulting from increased refugee presence and competition for resources.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Quick Impact Projects are completed in the host community		146.000		Greater Cairo, Alexandria, Damietta	182.970			182.970	UNHCR
Objective 2					182.970			182.970	

Sector Indicators	Target
# of Syrian refugees (women, girls, boys and men) assisted with food vouchers per month	140.000
# of Palestinian refugees from Syria (women, girls, boys and men) assisted with food vouchers per month	6.000
# of Quick Impact Projects completed	6

Food Security - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	23.048.442	22.865.472	-	182.970	29.519.802

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Food Security in Egypt (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
WFP	52,568,244	23,048,442	29,519,802
Total	52,568,244	23,048,442	29,519,802

J. Health response

Lead Agencies	UNHCR		
Participating Agencies	WHO, UNICEF, UNFPA, Caritas, Refugee Egypt, Arab Medical Union (AMU), Mahmoud Mosque Society, Resala, Plan International, IOM, Save the Children, PSTIC, AMERA.		
Objectives	<ol style="list-style-type: none"> 1. Improve access, quality and coverage to comprehensive primary health care for Syrian refugees in Egypt in 2014. 2. Improve access, quality and coverage to essential secondary and tertiary health care for Syrian refugees in Egypt in 2014. 3. Support the capacity of the national health care service to provide health care in the most affected governorates in 2014. 		
Requirements for January to June 2014	US\$30,543,077 (US\$14,896,050 included for polio vaccination)		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-building or resilience
	US\$7,960,827	US\$ 18,570,650	US\$4,011,600
Total 2014 indicative financial requirements	US\$40,974,428		
Contact Information	Mamoun Abuarqub, abuarqub@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

UNHCR and its partners have sustained and improved access and coverage to the health services available to Syrian refugees though the number of registered refugees has increased rapidly since March-April 2013. The health program has allowed access to public and NGOs-based health services. Syrians visiting UNHCR implementing partners' facilities from January to September 2013 benefited from around 20,000 visits to primary health care (PHC) with 16 per cent of the visits being for children under five, around 6,500 visits to secondary and tertiary health care, including emergencies and more than 1,100 antenatal care visits. The disaggregated data of PHC services utilization by gender reflects the breakdown of population by gender of 49 per cent for girls and women and 51 per cent for boys and men.

As part of the RRP5 implementation, UNICEF and WHO have carried out a needs assessment and capacity-building activities including the training of 231 MOH staff. Medicine, equipment and consumables for Ministry of Health primary health facilities have also been supplied: 32 clinics by WHO and 24 by UNICEF in Cairo, and Giza, Alexandria, Damietta and Fayoum. The scope of activities supports the provision of health services and mitigates the public health risks of the targeted population of Syrian refugees and host communities. Furthermore, while UNICEF and UNFPA have focused on PHC services including reproductive health, WHO has made arrangements with four Ministry of Health specialized hospitals which receive Syrian patients, and contributes to covering the cost of secondary and tertiary services provided to them.

A joint needs assessment led by UNHCR in September 2013 has revealed a sustained burden related to costly chronic illnesses in particular cardio-vascular diseases and diabetes. The study also revealed that the main obstacles to accessing health services are cost and distance from health facilities.

UNHCR and its partners face a key challenge in covering Syrians residing in remote areas in various Governorates and districts. In addition, the capacity and expertise of local NGOs in the coordination and delivery of health services is limited, which affects plans to expand access to health services in those areas where MOH services are not available.

Furthermore, UNHCR and its partners also face challenges during the current political transition to engage in dialogue with Ministry of Health authorities. UNHCR, its partners, and in particular WHO need to further intensify support and coordinate the access to public health services and support government-run facilities in refugee- dense areas. In addition, UNHCR coordinates with UNICEF, UNFPA and in particular WHO to support MOH in adopting the relevant policies and guidelines to ensure the access of target population to the essential health service packages, addressing the needs of refugees and host communities, and advocate with the Egyptian authorities on the health related rights and needs of the Syrian refugees.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Non-camp	250,000	200,000

The number of registered Syrian refugees has increased significantly during 2013. Therefore, it is expected that the demand for health services will increase in the different governorates of Egypt. However, the scope of services required will likely be similar to what has already been provided to refugees in previous years, but with more emphasis on the issues highlighted in the joint needs assessment.

The needs assessment highlighted that 78 per cent of the families have at least one person suffering with health needs with a high prevalence of chronic illnesses in particular cardio-vascular diseases. Furthermore, the main barriers hindering access to health services are the costs and the distance to health services. Therefore, it is worth highlighting that in Egypt, 72.8 per cent of expenditure on health is out of pocket as per a MOH survey conducted in 2010.

Therefore, UNHCR, WHO, UNICEF and UNFPA will put more emphasis on assisting the Ministry of Health facilities to be able to provide PHC services to Syrians, in particular women and children. This will include continued capacity-building activities based on health facility assessments in refugee residing areas, provision of medical equipment infrastructure, training, medicines and medical supply procurement.

Furthermore, enhancing health awareness and demand for primary preventative health care services among Syrians remains a key priority. Community health outreach will contribute to increasing access, utilization and coverage of public and NGO-based primary and referral care services.

Therefore, while focusing on supporting government facilities to improve access to primary health care services, sustaining and improving access to existing services provided by UNHCR health partners is also important. The focus will be on improving the quality of health services as well as monitoring utilization and access through strengthening data collection. A standardized health information system (HIS) will be prioritized to better inform on morbidity, mortalities, diseases trend, malnutrition problems and reproductive health data. This will help to improve ongoing planning, impact and prioritization of delivered primary and referral care services.

While the refugees' context-specific needs and priorities have been relatively consistent, the polio issue has taken a priority at the national level. Currently between 250,000 -300,000 Syrians are living in Egypt, 40 per cent of whom are children. This is in addition to refugees from a number of other countries where wild polio virus still circulates. The MOH has planned to conduct two rounds of Polio Immunization campaigns by the end of 2013: a National Immunization Day (NID) in November; and a Subnational Immunization Day (SNID) December 2013. In 2014, the MOH is planning to conduct one round of NID in March and another round of (SNID) in April.

3. RESPONSE STRATEGY

The Egyptian Government has allowed Syrian refugees to access public health facilities, hospitals and receive the same treatment as Egyptian nationals in terms of access and charges for health services, including emergency care. While the availability and capacity of the national public health system is limited, the increase in the number of Syrians registering with UNHCR will inevitably increase the demand for accessing health services. Therefore, the health sector response strategy will be based on achieving the following three objectives: **1)** Improve access, quality and coverage to comprehensive primary health care for Syrian refugees in Egypt in 2014. **2)** Improve access, quality and coverage to essential secondary and tertiary health care for Syrian refugees in Egypt in 2014. **3)** Support the capacity of the national health care service to provide health care in the most affected governorates in 2014.

The strategy will focus on the following priority areas:

1. Expand the capacity and geographical coverage of primary health care as an entry point to receive cost effective health services for Syrian refugees in Egypt.
2. Support the Ministry of Health public health system, especially primary health care facilities, through needs assessments and the procurement of equipment and supplies. Furthermore, key health staff will be trained to improve the quality and coordination of the services provided to the Syrian refugees.

3. Strengthen the capacity of UNHCR's current network of partners providing health services to Syrian refugees; this includes training and technical assistance to improve the quality and standards of the service provided through a robust monitoring and data collection system.
4. In order to meet the increasing demand for health services and the geographical spread of refugees, particularly in remote areas, and to overcome the limited capacity of implementing partners in remote areas, a coordination mechanism will be established in some governorates to facilitate access to MOH primary health care facilities, monitor referrals to secondary and tertiary health care to ensure that patients receive a cost-effective secondary and tertiary health care in their area of residence.
5. Furthermore, the UNICEF and WHO polio emergency response plan will support the polio immunisation campaigns: to upgrade the two planned SIND rounds to full polio NID, and also to support the MOH in the polio NID rounds for March 2014 to ensure immunization of all 12.8 million under 5 children in Egypt, including refugees.

Raising awareness about the availability of health services is crucial for the increasing demand, access, and coverage of health services. Therefore, refugees will be mobilized by trained, culturally-sensitive community health volunteers from Syrian communities to increase their understanding of available health services and to raise awareness and health knowledge amongst refugees.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Improve access, quality and coverage to comprehensive primary health care for Syrian refugees in Egypt in 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Management of Communicable & Non communicable Diseases including EPI services		150.000		National	3.289.947	697.947	2.331.000	261.000	UNHCR, Caritas Alexandria, Refuge Egypt, Arab Medical Union (AMU), Mahmoud Mosque Society, Resala, Plan International, IOM, Save the Children, UNICEF, WHO
Output 1.2 National Polio campaigns implemented		30.000	12.770.000	National	14.896.050	0	14.896.050	0	UNICEF and WHO
Output 1.3 Comprehensive reproductive health provided to refugees		30.000	23.000	National	701.200	92.200	609.000	0	UNHCR, Caritas Alexandria, Refuge Egypt, Arab Medical Union (AMU), Mahmoud Mosque Society, Resala, Plan International, UNFPA, IOM, Save the Children, UNICEF, AMERA
Output 1.4 Appropriate infant & young child feeding practices promoted		25.000	9.000	National	670.600	0	670.600	0	UNHCR, Caritas Alexandria, Arab Medical Union (AMU), Mahmoud Mosque Society, Resala, Plan International, Save the Children, UNICEF, AMERA
Objective 1					19.557.797	790.147	18.506.650	261.000	

Objective 2.Improve access, quality and coverage to essential secondary and tertiary health care for Syrian refugees in Egypt in 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Referral network for secondary & tertiary care established and strengthened		12.000	120	National	5.336.000	5.300.000	36.000		UNHCR, Caritas Alexandria, Refuge Egypt, Arab Medical Union (AMU), Mahmoud Mosque Society, AMERA, Save the Children, IOM, WHO
Output 2.2 Secondary mental health services provided		4.000	900	National	380.680	352.680	28.000		UNHCR, PSTIC
Output 2.3 Access to emergency obstetric care provided		10.000		National	600.000	600.000			UNHCR, Caritas Alexandria, Refuge Egypt, Mahmoud Mosque Society, AMERA
Objective 2					6.316.680	6.252.680	64.000	0	

Objective 3. Support the capacity of the national health care services to provide health care in the most affected governorates in 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Access to primary and essential secondary health care supported		200.000	250.000	National	2.922.600	222.000		2.700.600	UNHCR, AMU, UNFPA, Save the Children, WHO, UNICEF
Output 3.2 Capacity of staff developed				National	810.000			810.000	UNHCR, AMU, Refuge Egypt, UNFPA, IOM, Save the Children, UNICEF, WHO, FHI
Output 3.3 Essential drugs available		200.000		National	696.000	696.000			UNHCR, Save the Children
Output 3.4 Health Information System established				National	240.000			240.000	UNHCR and partners, WHO
Objective 3					4.668.600	918.000		3.750.600	

Sector indicators	Target
# of acute and chronic primary health care consultations (above 5 & Under 5)	127, 500 visits (above 5 years) 45, 000 visits (under 5)
# of antenatal care visits for women and girls	22.000
# of referrals for women, girls, boys and men to secondary and tertiary level	30.000
# of health facilities provided with medical supplies	10
# of children vaccinated in the Polio Vaccination campaign	12.800.000

Health - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	30.543.077	7.960.827	18.570.650	4.011.600	10.431.351

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Health in Egypt (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
IOM	800,000	480,000	320,000
PLAN	160,000	96,000	64,000
SCI	700,000	420,000	280,000
UNFPA	266,000	159,600	106,400
UNHCR	19,129,378	11,477,627	7,651,751
UNICEF	8,820,400	8,599,200	221,200
WHO	11,098,650	9,310,650	1,788,000
Total	40,974,428	30,543,077	10,431,351

K. Egypt Financial Requirements Summary

Table 1: Country Financial Requirements per Agency

Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
AMERA	325.000	195.000	130.000
CARE	743.985	446.391	297.594
CRS	800.000	500.000	300.000
IOM	2.975.297	1.930.000	1.045.297
PLAN	762.500	481.625	280.875
SCI	2.680.000	1.664.500	1.015.500
UNFPA	561.000	351.350	209.650
UN-Habitat	1.200.000	600.000	600.000
UNHCR	79.033.964	50.406.301	28.627.663
UNICEF	16.075.400	12.452.200	3.623.200
WFP	52.568.244	23.048.442	29.519.802
WHO	11.098.650	9.310.650	1.788.000
Total	168.824.040	101.386.459	67.437.581

Government requirements	Total 2014	Jan-Jun 2014	Jul-Dec 2014
GoE	4.300.083	2.150.041	2.150.042
Total GoE	4.300.083	2.150.041	2.150.042

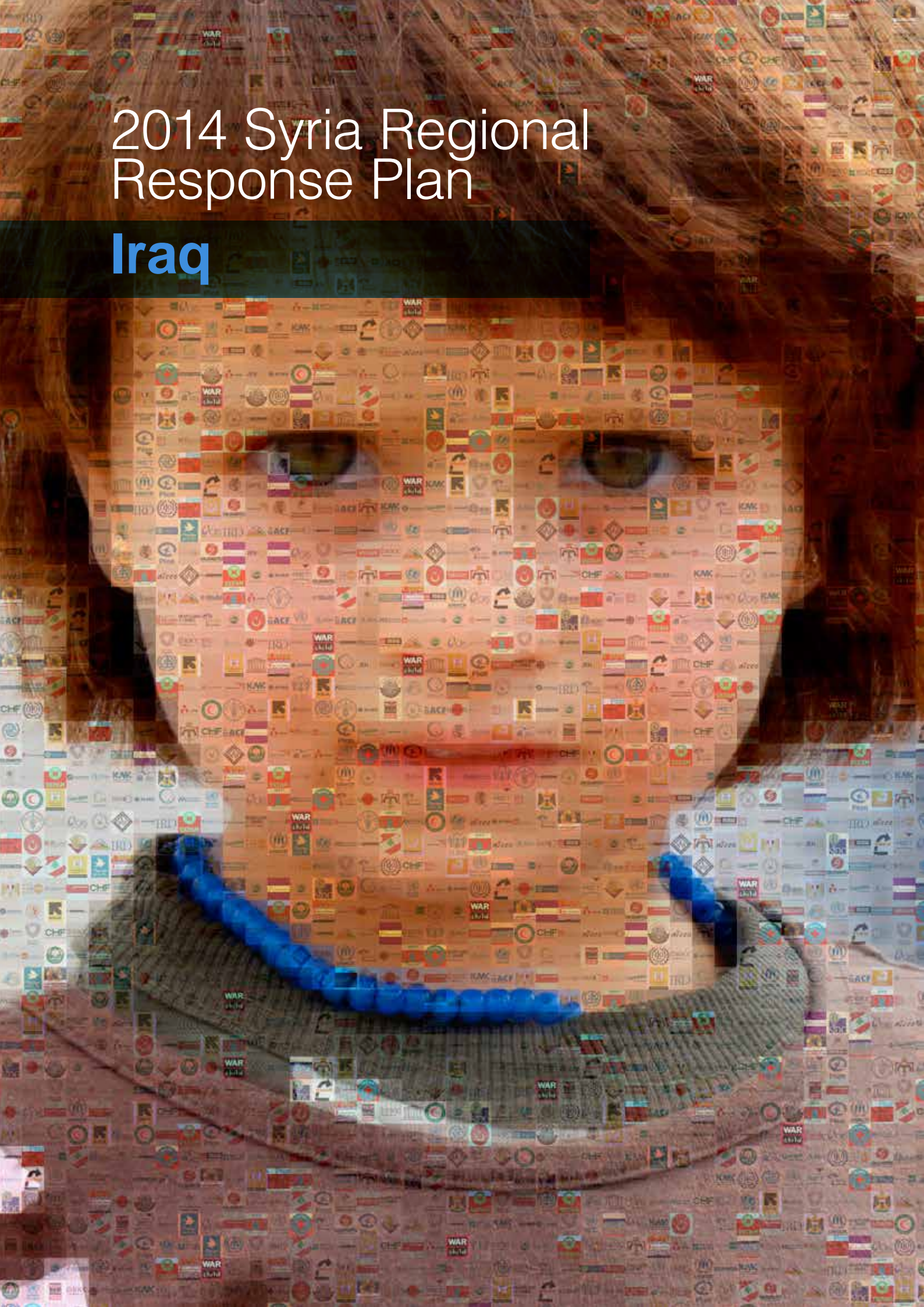
Table 2: Country Financial Requirements per Sector

Sector	Total 2014	Jan-Jun 2014	Jul-Dec 2014
Education	22.758.985	13.655.391	9.103.594
Food	52.568.244	23.048.442	29.519.802
Health	40.974.428	30.543.077	10.431.351
Protection	20.681.463	13.442.951	7.238.512
Basic Needs Livelihoods and Shelter	31.840.920	20.696.598	11.144.322
Total	168.824.040	101.386.459	67.437.581

Government requirements per sector	Total 2014	Jan-Jun 2014	Jul-Dec 2014
Education	4.300.083	2.150.041	2.150.042
Total	4.300.083	2.150.041	2.150.042

2014 Syria Regional Response Plan

Iraq





2014 Syria Regional Response Plan

Iraq

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Iraq Response Plan

OVERVIEW

A. Executive Summary

The two and a half year old armed conflict and violence continues to push Syrians into neighbouring countries with over 205,000 persons having registered with UNHCR in Iraq November 25th, 2013. Of these, 63 per cent are women and children with specific protection needs and over 15 per cent are young males who are out of school and without work. UNHCR has been closely supporting the Government of Iraq (GoI) and the Kurdistan Regional Government (KRG) to coordinate the humanitarian response to the refugees' protection and assistance needs. This includes the provision of registration and documentation, child protection, sexual and gender based violence (SGBV) protection interventions, the provision of shelter, life sustaining items and access to basic services including legal and psycho-social support as well as the development of self-reliance activities.

Eight sector working groups are responding to the projected 400,000 Syrian refugees expected in Iraq by end of 2014. The Iraq Response Plan is appealing for a sum of US\$ 552,538,228 million for protection, livelihoods, education, health, shelter, core relief items, food and WASH interventions.

Despite a restrictive entry policy in Anbar Governorate and ad hoc closures of borders in the Kurdistan Region of Iraq (KR), it is anticipated that refugees will continue to cross into Iraq at an average of 550 per day. This may be through influxes with brief border openings or more regulated arrivals in the event the border crossings in the KR are opened in a consistent manner. Access at the border, non-refoulement, and clearing of reception centres/camps of UXOs/mines remain the highest priority.

While some 40 per cent of the refugees are hosted in camps, over 60 per cent are residing in local communities in the three KR governorates of Erbil, Dohuk and Sulaymaniyah and in Anbar governorate. Many of these are highly vulnerable, living in sub-standard unfinished houses/apartments. Therefore, they will be targeted with protection and other important interventions, including community-based projects also benefiting host communities. To that end, UNHCR is further enhancing the capacity of network of Protection, Reintegration and Assistance Centres (PARCS) in the affected governorates.

The UNHCR-led humanitarian response to the Syrian refugee emergency is coordinated with relevant ministries and other Governmental structures in Central Iraq and in the KR, UN agencies and international and national NGOs. The Ministry of Migration and Displacement is the key Government partner in central Iraq and the Ministry of Interior is the main point of contact for the Syrian refugee response in the KR. Partnerships between responding authorities and agencies result in complementary implementation of activities.

B. Context

Syrian refugees have entered Iraq at the border points of Al Qa'im and Rabi'aa in Anbar governorate, and Sehela and Peshkapor in the KR. Currently all border points are either closed or limited to exceptional medical cases. It is recalled that, in October 2012, the GoI invoked national security considerations to close the border points of Al Qa'im and Al Rab'iaa, Anbar and Ninewa governorates respectively, while Syrian refugees continued to cross into the Kurdistan Region, through Peshkapor/Sehela in Dohuk Governorate. However, between 19 May and 15 August, 2013, the KRG closed the border.

Upon opening of the Sehela border point on 15 August, thousands of Syrian refugees entered the KR, with nearly 40,000 new arrivals having registered within less than a month. Since 14 September access to Iraq has been tightened; the Peshkapor/Sehela border authorities have allowed a minimal number of family reunification and medical cases to cross into Iraq on a daily basis.

While the main camp in the KR, Domiz, has remained open, allowing refugees to leave the camp and seek work, lack of freedom of movement in Al Qa'im has, in part, led to the return of over 5,000 Syrians. A trend of spontaneous return to Syria has also been observed from the KR during the last few months, with some 20,000 having opted to return. The return is believed to be prompted by a combination of push and pull factors, including perceived relative security in the areas of return, notably in Abu Kamal, reunion with family members left behind, and difficult conditions of asylum, primarily the lack of freedom of movement outside the camp in Al Qa'im. Owing to the ever-deteriorating security situation in Syria, UNHCR's involvement with these returns is limited to counselling and monitoring to ensure that the return decision is voluntary and well-informed.

In the context of Iraq, incidents of SGBV and child protection concerns remain paramount. Continued monitoring through refugee registration, protection centres, mobile teams and child protection systems are required to ensure appropriate responses to the needs of children arriving in Iraq from Syria, as boys and girls of all ages have been victims of armed violence, sexual violence and torture, while many have been injured, separated or emotionally distressed in other ways in their home country.

Furthermore, assessments show that only five to ten per cent of Syrian refugee children living outside of camps are enrolled in school in Iraq, with barriers to enrolment including the physical capacity of schools, economic issues (including cost of transport, uniforms, books etc), language obstacles, and psychological obstacles.

Mounting security concerns and the straining of local public services are key concerns for the Kurdistan Regional Government (KRG) as a result of the increasing number of refugees accessing the KR. Furthermore, the presence of the refugees has impacted the social, economic and financial perspective of the KR for its own population.

To mitigate the risk of increased tension between the refugees and their host communities, the refugees' needs should be, in part, addressed comprehensively through a development lens, taking into account needs of the host population. During a high level meeting in Geneva in September

2013, the GoI, donor community, and development actors agreed to embark in a “resilience development based approach” to mitigate these negative impacts and to avoid undermining the security, stability and development of the host country.

Discussions have begun with authorities and humanitarian agencies on the transition from assistance to development. Under the leadership of the Resident Coordinator and the KRG, a task force is being formed to prompt assessments and the overall platform for long term support to Syrians in Iraq.

Reaching the widely scattered non-camp refugees has been a challenge. However, mapping exercises and assessments have provided valuable information on needs and vulnerabilities used to guide the design of non-camp interventions.

Owing to lack of space and delays in the allocation of land for new camps, Domiz camp is hosting some 45,000 refugees, thus being dramatically overcrowded, with many families sharing tents. In recent months two new sections were constructed, which has decongested some areas of the camp.

However, with the re-opening of the Sehela border, the authorities in the Kurdistan Region have allocated land and are actively participating in the establishment of new camps through site levelling as well as connection to electrical systems and water networking.

The increasingly visible fatigue among the local population may prompt the Government to adopt more restrictive policies towards refugees living in urban areas. To that effect, starting from early April 2013, issuance of residency permits has been suspended in Erbil and Sulaymaniyah, pending refugees’ relocation to newly established camps. Residency cards, however, continue to be issued in Dohuk Governorate. The cards are essential for ensuring freedom of movement and promoting self-reliance for refugees.

While continuing to address the humanitarian needs in the camps, UNHCR and partners are embarking on the development and implementation of an Iraq-wide strategy to assist non-camp refugees, which will complement individual assistance that has been applied thus far. Engagement of development actors and implementation of Quick Impact projects benefiting the refugees and their host communities are the main features of the strategy. However, strong reservations by the KRG exists regarding non-camp individual assistance. Any individual families out of camp that need cash or food are expected to move into the camps. As such, QIPs are designed for community assistance, for example, repairing of health centres, expansion of schools, improvement of water sanitation systems in the community and the like, and will be the basis for non-camp assistance through the RRP.

C. Needs, vulnerabilities and capacities

As of 25 November, there were 205,000 registered Syrian refugees in Iraq, 97 per cent of whom are hosted in the Kurdistan Region. Forty-one per cent of the refugees are female, and 59 per cent male. Forty-one per cent of the population is below the age of 18 and two per cent are aged 60 and above.

Individual refugee needs are identified during the refugee registration process by UNHCR and partners. Among those newly arrived refugees who have registered in the KR since 15 August, some 13.5 per cent have a specific need, with the main categories of special needs being serious medical conditions, single parents, people with legal protection problems, women at risk, and pregnant women. Anecdotal evidence suggests that the post 15 August refugees arrived in more difficult circumstances (i.e. after longer internal displacement in Syria) than those who came before that date. Level 2 registration is ongoing for the new arrivals (level 1 was completed within days of their arrival), and a clearer picture of vulnerabilities will be mapped during this process.

Needs have also been identified as a result of several assessments, namely the July 2013 IOM assessment/survey on the impact of the Syrian crisis across Iraq; the REACH/ACTED Findings of the Household Assessments of Syrian Refugees in Host Communities (July 2013) and WASH baseline report (October 2013); the UNHCR/UNICEF Arabic-Medium Basic Schools in Non-Camp areas (August 2013); the Inter-Agency SGBV Mapping (July 2013); and the Syria Child Protection Assessment (September 2013). The following draws on some of the findings of the abovementioned assessments, and lays out the key needs of the community – livelihoods, shelter, health, education and WASH – and how they interact and impact on the major protection issues including SGBV and child protection.

An ability to secure sufficient income is one of the key needs, with assessments showing that Syrian refugees in Iraq are not financially self-reliant and struggle to find sustainable livelihood opportunities. Up to 86 per cent of Syrian refugees say they have insufficient household income. Government policy allows registered refugees to work, however the difficulties finding work show that improving access to labour markets and vocational training programmes will be a priority. Assessments also show that there is a perceived increase in child labour within Syria and this is being monitored closely in Iraq, particularly given the barriers to accessing schools for refugee children.

Assessments have also shown that conditions and events inside Syria will be impacting on children leaving that country, including with respect to psychosocial wellbeing, recruitment into armed groups, sexual violence, early marriage and child separation. This highlights that child protection remains a key need for Syrian refugees in Iraq.

Field visits and discussions with stakeholders confirm that SGBV is a main protection concern among Syrian refugees. Specifically highlighted are the risk of domestic violence, sexual violence, forced/child marriage, honor killing, prostitution and survival sex, and trafficking. Survivors often do not report violence because of the stigma attached to SGBV and the fear of retaliation, while women and girls suffer from limited access to social networks and social mobility. Both these factors may restrict their ability to gain access to assistance and response services.

Up to 15 per cent of Syrian refugee households in urban areas across the KRG governorates report lacking food security, and up to 27 per cent say that they are not able to access sufficient food for their families through the local market. Large numbers of Syrians across Iraq in both camp and non-camp settings cite food as their top priority need (24% in KRG and 19% in central and southern Iraq).

For refugees living outside of camps (more than 60 per cent of the population), financial difficulties are exacerbated by competition for rental housing potentially driving up costs and leading to overcrowding and occupancy of substandard accommodation. Crowded living conditions also increase the potential for SGBV, abuse and make it harder to ensure a child-friendly environment. Up to 90 per cent of Syrian refugees living in the community in KRG cite shelter assistance as a priority need. For refugees living in camps, shelter is a basic need that continues to be met through UNHCR and its partners' provision of family tents and shelter to some 80,000 refugees since the start of 2013.

Service provision in camp-settings has been complicated since the influx of 15 August by the opening 12 camps or transit sites across the KR. These are being consolidated into a smaller number of permanent sites, thus camp management and planning will remain a priority. The provision of services such as water and sanitation will continue to be a challenge, with WASH named as the first non-cash priority need across these temporary sites in an assessment conducted in October.

The KRG has issued instructions to all schools to register Syrian refugee children; however up to 77 per cent of school aged refugee children across the region are not enrolled. Assessments show that the capacity of the available primary and secondary schools is limited, and they would need significant additional classrooms, teachers and other resources if they were to meet the needs of Syrian refugee children living in the community. An additional impediment for Syrian children's access to school is the lack of Arabic speaking teachers in the KR.

With local clinics and hospitals generously making arrangements to receive patients from several camps/sites around KR that do not yet have onsite facilities, the capacities of these health care structures are overstretched. Notwithstanding that refugees living in the community have free access to health services, some still report that they are unable to access services.

Mass vaccination against polio is an emerging public health matter of international concern following the recent confirmation of polio cases in Syrian, a country which was declared polio free since 1999. To reduce the high risk of re-introduction of polio in countries hosting Syrian refugees, there is a need to conduct countrywide mass vaccination of all target groups in these countries. In the case of Iraq, an average of 5,700,000 children under five years old will be targeted as well as children attending primary school (ages 6-12), and the National Immunization Days (NIDs) will be increased to six rounds per year instead of four.

Along with helping to physically enhance basic service provision noted above, national and regional institutions continue to require capacity building through information sharing, training and other investments in human and institutional capacity. This will be sought by establishing a base for a

more comprehensive approach to complement ongoing humanitarian efforts that will be longer term and will tackle the social, economic and financial impact of the refugees on the community through a “resilience development based approach”.

These findings provide the basis for UNHCR and partner priorities. With the encroaching winter, provisions are required in both camp and non-camp settings to strengthen refugee’s resilience during the winter months. Initiatives specifically for non-camp refugees and their host communities, including the development of quick impact projects, are explained further below.

D. Response strategy and priorities

Objectives and outputs outlined in this document are categorized to ensure Syrian girls, boys, women and men continue have access to basic and life sustaining services and are protected from harm and violence. As such, approximately 30 per cent of the total budget is listed as lifesaving, and the remaining under prevention of deterioration and capacity building/resilience. This breakdown is proportionate to the needs of Syrian refugees and is indicative of the context in Iraq; harsh winters in northern Iraq bring high levels of precipitation attesting to the WASH interventions. Similarly, language barriers for Syrians in Iraq mean a greater emphasis on education is needed.

As part of its protection policy, UNHCR pursues a community development approach. This is designed to empower refugees and other persons of concern to UNHCR by working alongside them to identify and introduce measures that will make a positive difference to their lives, as well as those of the host community. As a means of ensuring that all persons enjoy their rights on an equal footing and are able to participate fully in the decisions that affect their lives, UNHCR has used participatory assessments to identify protection needs and to reflect the views and opinions of asylum seekers in the protection strategy and programme development. In Iraq work has been initiated to collaborate with women and girls in order to strengthen the role that they are able to play at home and within their communities.

Thus far, initiatives are designed to target women and girls by providing vocational and language training, general literacy training and programmes to increase awareness in relation to key health issues such as family planning, SGBV and reproductive health. Identification and referral to immediate medical, psycho-social, legal support, reduced stigma and positively transformed mindsets towards SGBV, increased resilience and security of high risk groups are some of the initiatives that cross cut sector response strategies.

To address community outreach, a mass information team in the KR is establishing mechanisms to ensure long term provision of information for refugee communities in KR. A fast deployment of over 150 Syrian refugee volunteers in four camps in Erbil (Kawergosk, Baharka, Qushtapa and Basirma) informs the refugee communities by disseminating information on a tent-to-tent and road-to-road basis. The UNHCR MI team is a core component of community services in camps for the collection of EVI statistics and information and the identification of cases in need of urgent psychosocial, health, education, and crucial protection support including SGBV and child protection.

At all stages of planning, including needs assessments, monitoring and intervention development, local authorities, refugee communities, and other stakeholders are consulted and their capacity needs will be jointly reviewed and supported.

While the overall goal is to provide protection pending durable solutions, strategic objectives for the response to Syrian refugees in Iraq include:

- Advocacy for the re-opening of the border allowing access for Syrian girls, boys, men and women fleeing violence by providing reception, registration and appropriate documentation in a timely manner as well as prevention of non refoulement while assuring that child protection and SGBV are prioritised;
- Improving services, including access to shelter, life sustaining items, water and sanitation, health and education to ensure refugees reside in a protective and safe environment, especially in camps where freedom of movement is enjoyed;
- Defining assistance to refugees in non-camp settings and addressing the needs of the community with the Kurdish Regional authorities by developing community based (quick impact) projects, while taking into account the context and issues of concern including security;
- Strengthening local communities as a legitimate protective space for Syrian refugees by enhancing the capacity of the Governmental social welfare systems and institutions to respond to the Syrian crisis; and,
- Capacity building of Government institutions and support for the transition from humanitarian assistance to development through the creation of a task force and a platform for long term support to Syrians in Iraq.

All protection and other sector interventions will be based on UNHCR verified registration, profiling and other agreed needs assessments. Verified registration and profiling of non-confidential information will be widely shared with all stakeholders, to support all sectors' planning in an agreed inter-agency approach, and to ensure standardization of assistance and prioritization of needs for all Syrian refugees in Iraq.

The livelihoods prioritized interventions will provide individual support through employment generation initiatives, public service provision, small and medium enterprise promotion, vocational education and skills training. An assessment of the labour market needs will be conducted, thereby informing the design of skills training programmes to increase refugees' access to employment.

For education, the provision of safe and protective learning spaces in camps and refurbishing/ rehabilitation of existing elementary/intermediate schools to support refugees in host communities and urban locations, including accessibility for children with disabilities will be made in coordination with the Ministry of Education combined with targeted activities to improve quality and setting up a monitoring system. Addressing concerns related to out of school children, and strengthening of national systems will be done to ensure children are protected from harm and violence in school.

Without education, protection, and support, these children are at risk of losing hope, of accepting violence as normal and replicating it, undermining their own futures, the future of their nation, and the stability of the region. In short, the future of an entire generation lies in the balance. That is why the global community must be more strategic in its planning and direction, and take steps now to prevent a lost generation, and thus the future of the region. For Iraq in particular, the “A Lost Generation?” builds on three pillars; ensuring access to and continuity in education a paramount priority in camps and communities; developing community based protection mechanisms and the provision of psychosocial care; and, youth will be provided with alternative education, vocational training and to speak for their own rights and the rights of people in their communities.

At the camp level, the health services strategy will be implemented by ensuring that there is at least one primary health centre (PHC) for 10,000 refugees. The Ministry of Health will be the overall manager of camp based activities with NGOs running the primary health care services. Refugees living in non-camp settings have free access to public health services. The host population's access to those services should not be hindered by the influx of refugees. To achieve this objective, various components of the health system will be strengthened, including through the provision of medicines, supplies and equipment, capacity building for health practitioners and health education to the population in the community.

Adequate and targeted shelter support will be provided to reduce refugees' vulnerability within the camp and non-camp settings. Families with Persons with Specific Needs (PWSN) will be targeted first with construction support, the needed essential materials will be provided and artisans paid to rehabilitate or fix existing shelter problems in agreement with property owners.

The strategy for the distribution modality of Core Relief Items implies blanket coverage of the camp population, particularly with regard to seasonal variations (e.g. winterization items), and a focus on the vulnerable refugees in non-camp settings. In addition, the broader non-camp population will be supported via the distribution of CRIs or vouchers allowing the purchase of these items.

Meeting the immediate food needs (basic and complementary food) of refugees will be made through WFP regular distribution of food assistance to refugees living in camps and the provision of cash assistance to extremely vulnerable individuals (EVIs) by the GoI/KRG, WFP and UNHCR, targeting refugee families residing in non-camp settings. WFP will lead the sector to encourage regular school attendance through school feeding programmes and adequate learning capacity of school children in the camps through the provision of a daily, micronutrient-fortified nutritious snack.

For WASH, strengthening of coordination mechanisms at the national and sub-national levels is a key component of the response strategy. Provision of an adequate water supply and sanitation for all refugees in camps, ensuring water quality is monitored and maintained and improvements in wastewater collection and disposal systems will be made. Likewise, provision of adequate water supply and sanitation services for vulnerable refugees and host communities will also be addressed in coordination with local service providers.

In November 2013, a high level meeting was held with the KRG and UNCT members to open the dialogue on the transition to development and review ToRs for a task force that will lead the shift from a purely humanitarian operation to a one coupled with a resilience development based approach. It is expected that by the end of 2014, a greater number of development actors will be engaged in mitigating the socio-economic impact on the progress of the national development plan implemented by the Kurdistan Region authorities. This will ensure support to national structures, systems, and institutions.

In 2014, the GoI, KRG, UN Agencies, NGOs and partners will continue conducting interventions for non-camp based refugees in the key areas of legal and physical protection, SGBV, child protection, financial assistance and Quick Impact Projects to sustain livelihoods, improve shelters, health and school space at an early stage efforts are being made to promote engagement of development actors to ensure adequate planning to address immediate, medium and the longer term needs. Finally, Individual RSD and resettlement activities will be stepped up to address the resettlement needs of Syrian refugees to ensure suitable durable solutions.

E. Partnerships and coordination

UNHCR is the lead coordinating agency for the humanitarian response to the Syrian crisis in Iraq under the overall direction of the GoI. The Office has developed an inclusive approach to ensure that NGOs, other UN agencies and the GoI respond to the needs identified and in line with roles and responsibilities of all stakeholders. This partnership is solidified through a coordination mechanism and through the Regional Response Plan (RRP) led by UNHCR. Concretely on the ground, a permanent staff presence is maintained in all field locations in Kurdistan and Al Qa'im, Anbar. This includes border monitoring at all entry points. Protection related interventions include registration, provision of documentation, advocacy for *non-refoulement* and opening of the border, identification of gaps through age and gender participatory assessments, prevention and response to SGBV, special attention to extremely vulnerable refugees, i.e. unaccompanied minors, women heads of households, children, and disabled refugees.

Coordination is led through four Inter-sectoral Coordination working groups in each of the responding governorates (Anbar, Erbil, Dohuk and Sulaymaniyah), under which fall working groups and sub working groups. Both include local authorities, humanitarian agencies, local and international partners and representatives from the communities. All sector and coordination meetings are documented on the web portal, and are announced in advance. In Erbil the Refugee Council Committee has been established under the leadership of the Governor of Erbil. There are over 30 responding agencies.

A restructuring of Government agencies in early 2013 saw responsibility for refugee issues (including camp coordination) within the KRG pass from the Ministry of Displacement and Migration/DDM to the Development and Monitoring Centre (DMC). DMC is now therefore UNHCR's implementing partner for camp management and coordination in KRG.

F. Protection Response

Lead Agencies	UNHCR		
Participating Agencies	UNICEF, UNFPA, UNAMI Human Rights, IOM, ACF, ACTED, ACTED-REACH, CDO, DRC, Handicap International, Harikar, Heartland Alliance, InterSos, IRC, Kurdistan Save the Children, KURDS, MAG, Mercy Corps, Mine Advisory Group, NRC, PAO, Save the Children International, STEP, Triangle, UPP, War Child UK, Ministry of Labour and Social Affairs		
Objectives	<ol style="list-style-type: none"> 1. Access to territory and safety ensured 2. Capacity and Quality of registration and profiling improved and maintained 3. Risk of SGBV reduced and quality of response improved 4. Protection of children strengthened 5. Community self-management and participation improved 6. Durable solutions for Syrian refugees facilitated 		
Requirements from January to June 2014	US\$37,927,094		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$18,707,253	US\$15,298,434	US\$3,921,407
Total 2014 indicative financial requirements	US\$66,984,378		
Contact Information	Leila Jane Nassif, nassif@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

Ninety seven per cent of the Syrians are hosted in the Kurdistan Region, of whom 63 per cent are women and children with specific protection needs. Since December 2011, UNHCR has coordinated the humanitarian response to the refugees' protection and assistance needs, through registration and documentation, child protection, sexual and gender based violence (SGBV) protection interventions, including legal and psycho-social support.

With over 60 per cent of Syrian refugees residing in host communities, the Protection Assistance Reintegration Centres (PARCs) are being strengthened to ensure adequate response to their protection needs. A monthly average of 2,000 refugees is being assisted through the PARCs with registration, legal assistance and social services. The KR and Anbar authorities are providing and preparing land (levelling and road construction) and, in the KR, contribute to the provision of basic services for newly established camps. UNHCR has concluded partnership agreements with concerned Governmental structures to ensure sustainable services in all camps and transit locations.

Protection monitoring of individual cases of concern is a core protection activity. Mass information campaigns to promote the registration of newborns, school enrolment and other relevant topics

are being established and coordinated through the Protection Working Group (PWG), with UN and NGO partners, in a coordinated inter-agency approach in all camp and refugee-hosting locations. Child protection activities have been coordinated, and emerging issues have been discussed, through PWG in the central region, and through Child Protection Sub-Working Groups established in three governorates in the Kurdistan region.

Challenges

- The continued closure of Al Qa'im border crossing and on-going temporary closure of the KR border remains a serious concern. With increased security concerns throughout Iraq, Syrian refugees' access to safety may be further restricted;
- With the non-camp refugees being increasingly scattered and more difficult to access, it will be more difficult to assess and design projects to target their needs;
- Maintaining the protection space in urban locations will require enhanced coordination with and support for host communities and local authorities;
- The increasing number of refugees is placing excessive strain on the protection and assistance response capacity, especially in terms of camp management, minimum standards of public and other services in the camps and communities, and psychosocial support (particularly for children and their care givers);
- The disenfranchisement from educational and employment opportunities of the significant and increasing population of young males;
- The time and financial costs of identifying, recruiting and training new staff to replace staff resigning to avail themselves of alternative employment opportunities in the private sector;
- Landmines/ERW contamination along the Syria-Iraq border areas poses a threat to displaced populations who have settled in border areas and those who are attempting to seek asylum;
- The identification of SGBV survivors and provision of appropriate medical and psycho-social support due to the prevailing cultural attitudes and perceptions in Iraq that SGBV does not exist, which prevents women and girls, in particular, but also male children (as survivors, vicarious SGBV survivors, and perpetrators), from disclosing their experiences and seeking assistance;
- The absence of a comprehensive and unambiguous medium-term strategy to engage with the KRG to address the management of non-camp refugees; and,
- Security and access to refugees.

2. NEEDS AND PRIORITIES

Access to territory and safety: Access at the border, non-refoulement, travel to reception centres/ camps cleared of UXOs/mines, remain the highest priority, including monitoring and advocacy, given the restrictive entry policy in Anbar Governorate and ad hoc closures of borders in the KR. During periods when the borders are open, over 205,000 refugees safely accessed Iraq and registered with UNHCR. This registration has provided a profile of Syrian refugees that is being used to design protection interventions.

Between May and August 2013 the KRG closed its border points to Syrians at Peshkapor and Sehela, and only allowed the admission of a small number of family reunification and urgent medical cases considered on a case-by-case basis. Upon opening of the Sehela border point, on 15 August 2013, thousands of Syrian refugees entered Iraq's Kurdistan Region, with nearly 40,000 Syrians (primarily of Kurdish ethnicity, and small numbers of Arabs) registered in the following month. The Peshkapor and Sehela border points closed to Syrians on 14 September 2013, and once again only allowed admission of certain family reunification and medical cases. The Al Qa'im border crossing has been closed since 22 October 2012 and after 29 March, 2013 no longer admitted medical cases. UNHCR continues to monitor the borders in KR and Al Qa'im, and advocates with the local authorities to provide Syrian nationals with access to Iraqi territory.

The growing number of refugees in the KR has heightened security concerns and strained local public services, economic and financial systems. To mitigate the tension between the refugees and their host communities, UNHCR programmes for refugees are addressed through a development lens by engaging development actors, taking into account the needs of the host population. UNHCR is concerned that increasing fatigue among the local population to respond to refugee needs may prompt the Government to adopt more restrictive policies towards in non-camp areas. Already, starting April 2013, issuance of residency permits was suspended in Erbil and Sulaymaniyah, pending refugees' relocation to newly established camps. Residency cards, however, continue to be issued in Dohuk Governorate. The cards are essential for ensuring freedom of movement and promoting self-reliance for refugees. The Governor of Erbil has clarified that he does not agree with individual assistance outside camps; refugees in need of assistance need to move into a camp; only community based projects (i.e. health, education) or repairing houses will be approved. Residency cards are provided to refugees in Al Qa'im based on a limited sponsorship program, severely limiting their access to the labour market.

Quality of registration and profiling improved and maintained: Identification and documentation enable freedom of movement and help to ensure equitable assistance and referrals to expert partners. Initial registration information indicates that some 30 per cent of the refugee population is vulnerable, hence requiring additional support. Capacity building activities and verification of registered refugees is ongoing with more than 205,000 refugees registered so far. UNHCR established in the KR five active registration centres to respond to the 15 August influx with gradual establishment of registration centres in all locations where refugees are hosted, UNHCR will ensure more permanent and regular presence covering wider area of the country in 2014.

Furthermore, UNHCR Iraq seeks to implement a biometric identity management system using iris scanning that will enable quick and accurate enrolment and verification of people of concern (Syrian refugees, non-Syrian asylum seekers and refugees, others of concern). The UNHCR biometric project has three stated aims:

- To facilitate access to UNHCR services;
- To prevent identity theft and identity substitution amongst the PoC population; and
- To reduce the risk of multiple registrations of the same PoC under different identities.

Biometrics will enable to fast, intuitive, secure, durable and easy to use registration that allows for secure, accurate, real time verification of data that can be shared securely across all field operations, and at the national and regional levels as required.

Risk of SGBV reduced and quality of response improved: Reports and assessments conducted by SGBV actors present in Kurdistan Region of Iraq as well as by Government Institutions indicate that SGBV is taking place both amongst the refugee population and host community. As well, field visits and discussions with key stakeholders (including the Government, UN agencies and national and international NGOs) confirm that SGBV is a prime protection concern amongst Syrian refugees both in camp and urban settings.

The breakdown of normal family and community structures, lack of economic opportunities, boredom, restriction of movement often aggravate incidents of SGBV, domestic violence being most commonly reported. It is also known that honor killing is widespread in all of Iraq and among Kurdish populations, alongside female genital mutilation (FGM); some reports claim that FGM is suffered by 70 per cent of the women in KRG, although it is in gradual decline. Trafficking/forced prostitution/sexual exploitation is often disguised as temporary marriages; however the extent of it is unknown. Risks of forced prostitution and survival sex have been reported as an increasing trend in some camps.

Despite provisions for gender equality and respect for human rights in applicable national, regional, and international law, protection gaps still remain for women and girls in Iraq and with regard to the prevention and response of SGBV since neither the law nor strategy are being fully implemented. Moreover, the current support system for survivors seems largely to privilege family unity over the rights, choices and wishes of the survivor. Potential breaches of the survivor-centered approach therefore remain an issue of serious concern.

UNHCR Iraq works along with its partners in a coordinated manner to ensure a multi-sectoral prevention and response strategy to SGBV in camp and non-camp settings. SGBV sub-working groups are formed and meet regularly to ensure a well-coordinated approach. Outreach activities are conducted through committees and outreach volunteers. In addition, women's committees are formed in certain camps to strengthen prevention and response. Partners had developed listening centres as well as community spaces to provide an opportunity to women and girls but also men

and boys to socialise, learn skills, indulge in art classes, entertain themselves through various means such as films, indoor games but also get an opportunity to speak to social workers with regards to gender issues.

Protection of children: Child protection activities have been coordinated and emerging issues have been discussed through Child Protection sub-working groups, which have been established in three governorates in the Kurdistan region and Anbar Governorate.

Over 3,000 children have access to psychosocial support in seven Child and Youth Friendly Spaces. Partners in the child protection sub-working group have established an identification system at the border that has facilitated the documentation identification of 777 unaccompanied and separated children as well as 262 cases of possible grave child rights violations in accordance to SC Resolution 1612 at the border. A referral system is being developed for those children that will require care to access child protection and basic services in both refugee camps and those in host communities. In addition, 904 unaccompanied and separated children were identified at border crossing points however over 90 per cent of unaccompanied cases are in kinship care with access to appropriate assistance.

In partnership with the Ministry of Labour and Social Affairs and its directorates, two technical committees were established to oversee the child labour assessment and child protection rapid assessment in both refugee camps and non-camps settings. Finalization of the assessments is underway. Both reports of these two assessments will be made available by mid-November. In addition, over 3,000 children had access to psychosocial support through child friendly spaces in three governorates.

Community development, self-management and participation: The scale of the influx calls for strengthened community self-management, determination and reliance in order to reach those in need. In cooperation with Partners, UNHCR will substantially enhance community-based support mechanisms, such as community centres, providing physical spaces for identification of specific needs, trauma healing and harm prevention through group-based recreational and psycho-social support services. Community centres will also facilitate information-sharing and targeted trainings to strengthen refugee outreach. This will be combined with a strong emphasis on community management and community-based services, benefiting specific needs cases in the community at large.

Another priority will be to set up community committees to better structure dialogue on concerns and solutions with different refugee and local groups. Attention is also focused on mass communication and dissemination of information to refugees and local communities to increase access to services and prevent abuse and exploitation.

Solutions for Syrian refugees with specific protection needs and vulnerabilities facilitated: Vulnerable refugees facing serious protection risks Iraq will be considered for resettlement on an exceptional basis. Thus far, only a very small number of refugees warranting expedited resettlement have been identified and UNHCR Iraq anticipates that no more than 1,000 vulnerable persons may be in need of resettlement in 2014.

Although the majority of refugees are located in KR, due to the difficult protection environment in the South and Central Regions of Iraq, and in particular in Al Qa'im camp (lack of freedom of movement and livelihood opportunities), there may be higher resettlement needs for refugees from those regions than those living in northern Iraq.

UNHCR anticipates that in 2014 up to 1,000 vulnerable refugees may require resettlement from Iraq. Although the assumption was an average family size of five, the average family size is closer to 3.5 persons in Iraq due to the large number of singles. Although single males would not necessarily be a target of resettlement due to possible exclusion triggers, there are also a number of other singles who are potential resettlement cases (LGBTI cases, single women at risk...), leading to some 300 cases to be submitted from Iraq.

To prepare cases for resettlement, UNHCR Iraq will have a dedicated team to identify cases through partners, staff in field offices / camps and through registration information. It is expected that about 70 per cent of the cases referred for RSD would be recognized and referred to resettlement as cases with a good potential for resettlement, i.e. about 1,000 cases would enter the RSD processing and about 700 would be referred for resettlement. Considering that the caseload is largely homogenous, it is possible that RSD procedures would be simplified / accelerated during the course of 2014.

A BID supervisor is planned for 2014 as the number of unaccompanied and separated children is growing, in particular in the most recent influx. Prior to the Syrian crisis, no BID procedure was in place. At present, a BID SOP has been drafted, staff is being trained and identification and casework procedures are being discussed with partners and it is foreseen that BID interviews and reports will be performed by UNHCR staff (existing community services national positions). While complex cases would not necessarily be prioritized, it is expected that there would be higher resettlement needs among cases with children in need of BID or BIAs.

On the other hand, a trend of spontaneous return to Syria has also been observed during the last few months, with some 20,000 having opted to return to Syria thus far. The return is believed to be prompted by a combination of factors, including perceived relative security in the areas of return in Syria, return to help family members left behind, and difficult conditions of asylum, primarily lack of freedom of movement outside the camp in Al Qa'im. While UNHCR does not promote return to Syria it foresees a limited program in 2014 extending up to 5,000 persons who make the difficult decision to return home by facilitating exit permits and other costs.

Population group	Population in need	Targeted population
Camp	100%	40%
Non-camp	30%	60%*
Host Community	10%	Refugee hosting areas

*Vocational training, education and literacy projects are foreseen to reach further than the population in need and will assist refugee and host communities beyond EVIs.

3. RESPONSE STRATEGY

The protection response is developed by the Protection Sector Working Group (PWG), chaired by UNHCR. The work of the PWG is based on agreed Inter-Agency Standing Committee working principles. At all stages of planning, including needs assessments, monitoring and intervention development, the local authorities and other community stakeholders will be consulted and their capacity needs will be jointly reviewed and supported through trainings. All protection and other sector interventions will be based on UNHCR verified registration and profiling and other agreed needs assessments. Verified registration and profiling of non-confidential information will be widely shared with all stakeholders to support all sectors' planning in an agreed inter-agency approach for both camp and non-camp refugee populations and to ensure standardization of assistance and prioritization of needs for all Syrian refugees in Iraq.

Sub-working groups for Child Protection, SGBV, and Mass Information have been established within the PWG, focusing on protection areas requiring specific expertise and resources. Particular focus will be on the large non-camp refugee population. The Protection Working Group will support the Sub-Working Group on Non-Camp Refugees to ensure consistency in the implementation of the protection activities in non-camp settings. Awareness of activities that impact on hosting communities will be part of inter-sector planning to ensure equitable distribution of resources to enable a protective environment.

Participation and planning with other Sector Working Groups is essential to highlight protection gaps for certain camps and communities and avoid overlap of activities. The PWG assessments and activities will join with other projects to provide a holistic approach in ensuring access to basic services and specific health, nutrition, education, shelter needs, livelihood support and prioritization when identifying individuals for cash assistance projects and communities for Quick Impact Projects (QIPs) upon the approval of the authorities. The PWG will also promote the integration of agreed priority cross-cutting issues (e.g. age, environment, gender, HIV/AIDS and human rights) in sector/inter-agency planning and responses. The Protection Response will require adequate reporting and information sharing, both within the PWG and with other sectors. This will involve collecting information (Who/What/When/Where) from partners and shared with the inter-agency coordination body, so that it can be processed and redistributed to other stakeholders, including refugees through mass information activities. Starting with the identification of refugees with urgent protection needs and compelling vulnerabilities, individual RSD and resettlement activities will be stepped up to address the resettlement needs of Syrian refugees in Syria to ensure suitable durable solutions.

20 4. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Objective 1. Access to territory and safety ensured.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Advocacy for access to territory, freedom of movement and non-refoulement in KRG	40% of total refugee population: 160, 000	60% of refugee population: 240, 000		All KR Governorates, central governorates	650.000	650.000			UNHCR, IRC, MoMD
Output 1.2 Monitoring, at border of access and provision of information, transport, awareness on refugees' rights and obligation	40% of new arrivals in 2014 for 6 mths 30, 000			All KR Governorates, central governorates	1.651.925	1.500.000	132.000	19.925	Harikar/Qandil/CDO/ PARC , ACTED, UPP, IOM, and other NGOs monitoring in and outside of camps, IRC
Output 1.3 Capacity building for security authorities (e.g. Border Guards, security forces, police etc)			Government officials: 200	All KR Governorates, central governorates	299.472	96.369		203.103	CDO/PARC, Residence Department, Ministry of Justice, Prison authorities, DDM, ICRC, DRC, NRC, MoMD
Output 1.4 Clearance of Mines / UXO and provision of awareness information	40% of total refugee population: 160, 000	60% of refugee population: 240, 000	Host Communities near identified locations: 50, 000	All KRI Governorates	680.000	680.000			MAG, MOD KRI
Objective 1					3.281.397	2.926.369	132.000	223.028	

Objective 2. Capacity and Quality of registration and profiling improved and maintained.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Registration of ALL individual refugees and PoCs using biometrics system, updated data, and issuance of appropriate documentation	160.000	240.000	not applicable	Countrywide	1.000.000	500.000	500.000		UNHCR, Qandil, IRC, Harikar,
Output 2.2 Identification of vulnerable cases, including UAM/SC and persons with special needs referred to appropriate Prt/CS support	160.000	240.000	not applicable	Countrywide	320.000	320.000			UNHCR, Harikar,CDO,IRC UNICEF, UNFPA, government agencies
Output 2.3 Continuous capacity building of registration staff to improve quality	150	150	200	Countrywide	150.000		150.000		UNHCR, UNICEF, UNFPA, UNWOMEN, WHO/DoH, UNAMI HR
Objective 2					1.470.000	820.000	650.000		

Objective 3. Risk of SGBV reduced and quality of response improved.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Identification and referral to immediate medical, psycho-social, legal support	5.000	7.000	1.200	Countrywide	2.133.175	924.734	790.000	418.441	UNFPA, UNICEF, UNDP, UNESCO, NRC, IRC, TRIANGLE-GH, UPP, DRC
Output 3.2 Reduced stigma and positively transformed mindsets towards SGBV	7.500	11.500	2.000	Countrywide	1.816.015	310.000	756.015	750.000	IRC, UNHCR, UNFPA,
Output 3.3 Increased resilience and security of high risk groups	550	800	150	Countrywide	1.748.964	322.500	762.714	663.750	IRC, UPP, QANDIL
Output 3.4 Strengthened institutional capacities to effectively address SGBV	10.250	15.000	2.550	Countrywide	1.143.120	112.500	450.000	580.620	UNFPA, UNICEF, UNWOMEN, UNDP, UNESCO, NRC, IRC, TRIANGLE-GH, UPP, QANDIL, MESALA, WARVIN
Objective 3					1.470.000	820.000	650.000		

Objective 4: Protection of children strengthened.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Identification and referral to immediate medical, psycho-social, legal support	5.000	7.000	1.200	Countrywide	2.133.175	924.734	790.000	418.441	UNFPA, UNICEF, UNDP, UNESCO, NRC, IRC, TRIANGLE-GH, UPP, DRC
Output 3.2 Reduced stigma and positively transformed mindsets towards SGBV	7.500	11.500	2.000	Countrywide	1.816.015	310.000	756.015	750.000	IRC, UNHCR, UNFPA,
Output 3.3 Increased resilience and security of high risk groups	550	800	150	Countrywide	1.748.964	322.500	762.714	663.750	IRC, UPP, QANDIL
Output 3.4 Strengthened institutional capacities to effectively address SGBV	10.250	15.000	2.550	Countrywide	1.143.120	112.500	450.000	580.620	UNFPA, UNICEF, UNWOMEN, UNDP, UNESCO, NRC, IRC, TRIANGLE-GH, UPP, QANDIL, MESALA, WARVIN
Objective 4					12.946.000	5.138.000	7.808.000		

Objective 5: Community self-management and participation improved.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 5.1 Participatory assessments of protection concerns and priority basic needs of women, men, boys and girls using age, gender and diversity approach are conducted;	3.500	2.800		Countrywide	1.092.150	135.000	951.750	5.400	UNHCR, UNDP, IRC, InterSOS, ACF
Output 5.2 Camp, non-camp and host community leadership committees and outreach networks maintained and strengthened, to ensure community-based participation in the planning and delivery of services and interventions	128.000	192.000	50.000	Countrywide	3.168.105	420.150	2.075.955	672.000	UNHCR, UNDP, UPP, IRC, InterSOS
Output 5.3 Social cohesion and peaceful co-existence between refugee and host community promoted and strengthened	128.000	144.000	50.000	Countrywide	1.125.000	945.000	180.000		UNHCR, UNDP, InterSOS

Output 5.4 The engagement and participation of youth and women in self-management of refugee and host communities is promoted, including through capacity-building and awareness-raising	5.000	7.000	50.000	Countrywide	1.335.668	260.500	567.000	508.168	UNHCR, UNDP, UPP, IRC, UNFPA, UNWOMEN
Output 5.5 Extremely Vulnerable Individuals are identified and provided with assistance.	45.000	72.000	20.000	Countrywide	6.000.000	6.000.000			UNHCR, ACTED, InterSOS, DRC, ACF, IRC
Objective 5					12.720.923	7.760.650	3.774.705	1.185.568	

Objective 6: Durable solutions for Syrian refugees facilitated.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 6.1 Potential for resettlement realized (identification of cases and submission, emergency resettlement organised)	250	250		Countrywide	392.500	392.500			UNHCR, IOM
Output 6.2 Potential for integration realized and made more sustainable (permits facilitated, advocacy, social and economic integration realized)	1000	4000		Countrywide	100.000			100.000	UNHCR, IOM, Qandil
Output 6.3 Potential for voluntary return realized (advocacy, assessment, information provided, cash grants to returnees)	1250	1250		Countrywide	175.000		175.000		UNHCR, IOM
Objective 6					667.500	392.500	175.000	100.000	

Sector indicators	Target
Number of Syrian refugees seeking access to Iraq are admitted and reside in a safe location	100%
Number of Syrian refugees registered and profiles shared to increase individuals' protection	100%
Number of persons identified as survivors of SGBV, referred to services, knowledge and capacity of community improved	100%
Number of reported children with specific needs are provided protection	100%
Community management established in camps and in hosting communities with ADGM consideration	All camps and identified host communities
Up to 1,000 resettled over 2014	100%

Protection - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	37.927.094	18.707.253	15.298.434	3.921.407	29.057.284

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Protection in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	3,170,000	1,902,000	1,268,000
ACTED	3,645,000	1,947,500	1,697,500
DRC	3,850,000	1,925,000	1,925,000
HAI	400,000	200,000	200,000
HI	1,680,000	1,000,000	680,000
INTERSOS	1,525,000	762,500	762,500
IOM	6,000,000	3,000,000	3,000,000
IRC	5,658,000	3,244,800	2,413,200
KURDS	500,000	300,000	200,000
MAG	1,500,000	925,000	575,000
NRC	4,086,090	2,043,045	2,043,045
SC KR-I	150,000	100,000	50,000
SCI	1,562,000	790,300	771,700
STEP	250,000	100,000	150,000
TGH TRIANGLE GH	900,000	450,000	450,000
UNDP	3,937,810	1,968,905	1,968,905
UNFPA	2,400,000	1,200,000	1,200,000
UNHCR	17,975,528	12,000,000	5,975,528
UNICEF	6,280,000	3,200,000	3,080,000
UPP	756,950	439,544	317,406
WarChild UK	499,000	299,000	200,000
WARVIN	259,000	129,500	129,500
Total	66,984,378	37,927,094	29,057,284

G. Livelihoods Response

Lead Agencies	UNHCR, UNDP		
Participating Agencies	Mercy Corps, ACTED-Reach, FAO, DRC, IRC, UNDP, IOM, UNHCR, UNDP, Kurds, Relief International, SCI		
Objectives	1. Provision of Individual Support through employment generation initiatives, public service provision and SME promotion 2. Access to on-the-job, post-secondary and vocational training		
Requirements from January to June 2014	US\$26,638,271		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
		US\$26,638,271	
Total 2014 indicative financial requirements	US\$49,223,446		
Contact Information	Inge Colijn, colijn@unhcr.org		
	Mizuho Yokoi, mizuho.yokoi@undp.org		

1. ACHIEVEMENTS AND CHALLENGES

Registered refugees receive residency permits and enjoy access to the labour market in the KR. However, residency permits have not been provided since early April for Syrians in non-camp settings, nor are they provided for the Al Qa'im population. While the economy in the KR, where the majority Syrian refugees are hosted, remains strong, there are challenges extant for both refugee and host populations.

Competition for jobs in the labour market may have the effect of driving wages down to unacceptable levels and causing resentment between the host and refugee population (although relations so far remain strong), thereby increasing protection concerns including risks of SGBV. In this respect, the sector proposes interventions that directly benefit members of both the refugee and host communities (i.e. by directly training members of both communities) but also interventions that strengthen the overall economic environment (i.e.: strengthening and supporting the small business sector). Activities proposed include those targeted at specific groups such as men, women, young people and people with a disability.

These interventions will build on the achievements of 2013 in the sector, which have already seen large numbers of refugees and their host communities improve their livelihood situation. In 2013, UNHCR and its partners provided cash assistance to some 750 vulnerable refugee families as well as a 220 litre drum of fuel for winter (2012-2013), over US\$2.5 million in cash and in kind contributions from the community, while IOM has assisted more than 170 beneficiaries with skills training, toolkits and materials to help establish small businesses in the Dohuk and Erbil governorates of KRG. Livelihoods projects as diverse as, for example, the establishment of greenhouses, bee-keeping, and transport were implemented successfully in 2013 across Iraq.

2. NEEDS AND PRIORITIES

An ability to secure sufficient income is one of the key needs, with assessments showing that Syrian refugees in Iraq are not financially self-reliant, and struggle to find sustainable livelihood opportunities. Up to 86 per cent of Syrian refugees say they have insufficient household income, 15 per cent report lacking food security, and up to 27 per cent say they are unable to access sufficient food for their families through the local market.

While the Government and host communities in KR and Anbar extend their generosity in hosting Syrian refugees, the rising numbers in 2013 is impacting services and economies in local communities.

While Government policy allows registered refugees to work, difficulties in finding employment outside of the informal sector (where 80 per cent of refugee households reporting having someone employed) are a reality, as is competition within and between the host and refugee populations in the community.

For refugees living outside of camps (more than 60 per cent of the population), financial difficulties are exacerbated by competition for rental housing potentially driving up costs and leading to overcrowding and occupancy of substandard accommodation like unfinished buildings, tents and crowded apartments.

These difficulties in sustaining livelihoods mean that interventions that strengthen labour markets and increase vocational training opportunities, to the benefit of both refugee and host communities, should be a priority. An AGD approach to these interventions is required to overcome some of the barriers, including cultural ones that might particularly restrict women's access to livelihood and self-reliance activities.

Population group	Population in need	Targeted population
Camp	160,000	36,187
Non-camp	240,000	30,968
Host Community		2,067

3. RESPONSE STRATEGY

The sector has prioritized interventions aimed at providing individual support through employment generation initiatives, public service provision and SME promotion. It is noted that an assessment of labour market needs will be the first step in ensuring that detailed activity modalities meet the needs of the market and are targeted where they are most likely to have the desired outcome of increased employment participation.

A project to establish a hub to match skills with business needs and skill shortages through a referral and placement programme aims to directly find work for refugees, as do cash for work programmes that offer incentives for businesses to hire refugee workers. Agencies will use training and direct investment through loans and grants in small business development and start-ups as priority activities proposed.

It is also acknowledged that investment in programmes for vocational education and skills training is also required, once again beginning with a mapping of vocational training needs, including for specific groups such as men, women, young people and people with a disability. A range of interventions are proposed by response partners in camps and non-camp settings to provide this training. Direct investment in the Government-run Training and Vocational Education Centres is also proposed to increase the capacity of existing centres. Reduced food and nutrition insecurity and increased incomes generated by vulnerable rural households, including Syrian refugees, will also be initiated by FAO. Finally, quick impact projects will support the resilience based development approach to ensure the medium and longer term concerns related to Syrian and host communities are addressed and planned for.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Provision of individual support through employment generation initiatives, public service provision and SME promotion.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Assessment of Labour Market Needs, Database of Skills & Businesses, Referral Hub for Job Placements	430	960	100	Countrywide	1.046.440		1.046.440		Mercy Corps, ACTED, DRC, UNESCO, ISHO, IRC, SCI
Output 1.2 Increased Incomes for Syrian refugee households	1.170	2.100	620	Countrywide	4.416.800		4.416.800		DRC, IRC, UNHCR
Output 1.3 Small Businesses Promoted, Established & Sustained	3.000	9000	1150	Countrywide	8.492.800		8.492.800		Mercy Corps, DRC, UNDP, UNHCR, IOM, UNESCO, FAO, ISHO, IRC, SCI
Output 1.4 Income Generation/work opportunities through infrastructure investment	25.728	11.686		Countrywide	2.982.400		2.982.400		UNDP
Objective 1					16.938.440		16.938.440		

Objective 2. Access to on the job, post-secondary and vocational training improved.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Assessment/ Mapping of vocational training needs	492	836		Countrywide	179.831		179.831		ACTED, Mercy Corps, UNESCO
Output 2.2 Training Programmes: Vocational, Technical, On-the-Job, Business, Life Skills, Language - including some equipment	5.878	7.705	851	Countrywide	8.254.000		8.254.000		UNHCR, ACTED, KURDS, DRC, Relief International, Mercy Corps, SCI, UNDP, IOM, UNESCO, ISHO
Output 2.3 Technical & Organizational Capacity Building in TVET Centres				Countrywide	1.266.000		1.266.000		DRC, UNHCR, UNESCO
Objective 2					9.699.831		9.699.831		

Sector indicators	Target
# of people placed in employment	1.504
# of people gaining income assistance	2.619
# of people provided with small business assistance	8.951
# of income opportunities created through infrastructure projects	2.576
# of people receiving vocational/skills training	15.680

Livelihoods - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	26.638.271		26.638.271		22.585.175

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Livelihoods in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	600,000	340,000	260,000
DRC	3,944,000	1,972,000	1,972,000
FAO	1,249,600	624,800	624,800
IOM	10,368,000	5,184,000	5,184,000
IRC	7,208,600	3,604,300	3,604,300
KURDS	800,000	480,000	320,000
Mercy Corps	1,265,680	793,704	471,976
RI	1,452,500	1,120,500	332,000
SCI	496,000	496,000	
UNDP	6,444,000	3,974,400	2,469,600
UNESCO	8,576,998	4,630,499	3,946,499
UNHCR	6,818,068	3,418,068	3,400,000
Total	49,223,446	26,638,271	22,585,175

H. Education Response

Lead Agencies	UNICEF		
Participating Agencies	People in Need, ACTED-REACH, Save the Children, UPP, KURDS, NRC, Relief International, IRC, Triangle, UNFPA, UNESCO, UNHCR, UNICEF		
Objectives	<ol style="list-style-type: none"> 1. To increase access to inclusive and equitable education opportunities for Syrian refugees, boys and girls from pre-school to university education levels using formal and alternative approaches by December 2014. 2. To improve quality of education for Syrian refugees, boys and girls, accessing inclusive education from pre-school to secondary level by December 2014. 		
Requirements from January to June 2014	US\$24,618,369		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$19,482,823	US\$3,776,386	US\$1,359,160
Total 2014 indicative financial requirements	US\$39,204,302		
Contact Information	Ikem Chiejine, ichiejine@unicef.org		

1. ACHIEVEMENTS AND CHALLENGES

Under RRP5, UNICEF established education coordination systems at all levels. In collaboration with other stakeholders, including UN agencies, NGOs and CBOs facilitated the enrolment of over 14,701 Syrian children in educational facilities both in camp and in host community schools. Education provision has been inclusive for all children (girls and boys) and involved mixing those with special learning needs in regular classrooms. Equal opportunity is being provided to both boys and girls to access education in camp and non-camp situations. Enrolment has been increasing over the past year as refugees resettle from transit to more permanent camps where semi-permanent classrooms have been constructed or rehabilitated in host community schools. During the last six months, eight schools were rehabilitated in Al Qa'im, three pre-fabricated schools were constructed in Domiz, and other 40 tented classrooms were provided with educational supplies in the new camps in Qushtapa, Kawergosk, Basirma, Akra and Gawilan camps. All pre-fab structures are being modelled to facilitate access for disabled children.

Several assessments including situation analysis of educational access for Syrian refugee children and youth in urban areas, rapid education assessments in new camps were conducted by UNICEF with technical support from NRC. Besides this, UNHCR and UNICEF conducted joint School Needs Assessment of Arabic medium schools in Erbil, Dohuk and Sulaymaniyah governorates for both basic education and secondary schools for which UNESCO also contributed. UNHCR partners are also conducting a Community Assessment of barriers for non-camp Syrian refugee children to access education in all governorates of the KR. The assessment will in addition examine how disabled Syrian refugee children have been accessing education and how education provision can be improved for children with special learning needs. UNESCO established 14 Community

Learning Centres (CLCs) in Erbil, Dohuk, Al Qa'im, Arbat, Dara Shakran and Kawergosk camps, from which about 1,700 youth, women and men have been benefitting; three pre-fab structures were provided for secondary education and four catch-up learning centres were established. Joint advocacy visits were undertaken by stakeholders to policy makers at the Ministry of Education and Directorates of Education for more support to be given to the education of Syrian refugee children.

Major challenges and concerns for the education sector are:

Sector Coordination: Reasonable level of sector coordination exists presently but requires dedicated personnel to focus only on coordination issues to ensure regular meetings and interaction among partners to reduce duplication, competition and seeming rivalry. Strong coordination will ensure accurate targeting and prioritisation of activities and bring synergy and focus to the emergency education interventions.

Limited absorptive capacity of existing schools: Existing Arabic speaking schools in the KR are insufficient to accommodate the existing and expected number of Syrian refugee children in the non-camp settlements. At present the needed space (1sq.m) per student as well as equipment/items including furniture etc. are insufficient for an anticipated higher number of enrolments. In addition, existing schools need some forms of rehabilitation, additional teachers, WASH facilities, teaching and learning materials including textbooks. In camps, while learning spaces and schools are being established, they have not yet been able to meet the educational demands of all the refugee children. Besides, there are expected movements of urban refugees to camps. If this occurs, the new influx will further strain learning spaces in camps.

Economic situation of Syrian refugees: The hidden cost of education which includes transport costs, cost of learning materials, uniforms, daily pocket money, school-time snacks etc. are obstacles discouraging a large number of Syrian families to send their children to school against which they rather have their children work outside as child labourers to earn more money to sustain the family.

Language Issues: Syrian Kurds did not study their mother tongue (Kurdish language-Kurmanji accent) in Syria; they studied in Arabic medium schools. The number of Arabic medium schools is limited in KR, which may limit their physical access to schools. For adults the limited knowledge of Kurdish restricts their capacity to socialise in the KR. In addition, there is a shortage of teachers for Arabic language as well as teachers who can teach other subjects in Arabic.

Children's psychosocial support needs: Syrian refugees continue to suffer from the emotional and mental consequences of forced displacement. Many claim to have witnessed bloodshed or generalized violence, which together with the trauma of being uprooted from their homes leads to various psychological conditions. According to the school social workers, Syrian children, as well as Iraqi IDP children, often display behavioural patterns which may require psycho-social support

Lost education opportunities in Syria: Most of the Syrian refugee children have been out of school for more than one year, and they may require some sort of support for resuming at their

grade level of education successfully, which may include catch-up classes, Accelerated Learning Programme, etc.

Environment: There is safety concern by parents and guardians for their children travelling unaccompanied in unfamiliar areas, especially for children attending school in host communities in KR who have to travel long distances to Arabic medium schools.

Higher education: There are concerns on the limited access of Syrian refugees to higher education and the absence of mechanism for addressing it. Presently access to higher education is treated on a case by case basis.

Access to secondary school: Currently there is no school offering secondary education in Al Obaidy camp and the lack of freedom of movement for refugees excludes their access to secondary or technical schools available in Al Qa'im.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	160,000	67,200
Non-camp	240,000	100,800
Total	400,000	168,000

It is estimated that about 168,000 children and adolescents will be in need of educational services by December 2014 with about 60 per cent living in host communities. The numbers of target beneficiaries are reflected below:

Beneficiary Group	Total	Urban	Camp
Early Child Devel & Ed	10,399	6,239	4,159
Basic education	91,442	54,865	36,576
Secondary education	30,408	18,244	12,163
Accelerated Learning programme	12,803	7,681	5,121
Adult literacy	6,955	4,173	2,782
Vocational training	15,993	9,595	6,397
Grand Total (Children and Adolescents)	168,000	100,800	67,200
Teachers	3,566	2,194	1,372
Caregivers	520	312	208

According to the UNHCR, 205,000 people are presently registered as refugees out of which 39 per cent are reported to be between ages 0-18 years. This is expected to increase by June 2014 to 300,000 and probably 400,000 by December 2014 resulting in an increase in the target school age population to approximately 42 per cent. Consequently to adequately respond to this population the following needs have been prioritized:

- Adequately coordinate the education sector to ensure accurate targeting and prioritization, promote synergy, avoid duplication to promote smooth programme delivery;
- Provision of protective, safe and healthy learning spaces in camps and host communities to increase access to education and learning for all refugee children from pre-school to secondary education levels as well as in the acquisition of vocational education and training and life skills by adolescents;
- Support for schools in urban locations to accommodate refugee children including provision of additional classrooms, WASH facilities, rehabilitation of school buildings and teacher support;
- Provision of cash transfer, transportation support etc for ensuring the educational access for extremely vulnerable children;
- Promote retention of those already enrolled in elementary and secondary levels;
- Provision of teaching/learning and recreation materials relevant (language, culture etc) to the learners for all levels both in camp and urban locations/host communities;
- Provision of non-formal education through accelerated learning programme to catch up on the years out of school;
- Teacher training: improved pedagogy; standards of response in education in emergency; psycho-social support;
- Psychosocial support to all children up to 18 years, parents, especially mothers, teachers and Government officials on various concerns including SGBV and child protection;
- Life skills, vocational education and training and advocacy with Government to provide job support for qualified job seekers;
- Literacy courses for adults who are unable to read and write. Access to higher education either to university, polytechnic or technical college; and,
- Undertake various assessments to provide evidence for planning monitoring and evaluating education interventions for refugee children in urban locations especially on the needs of the Kurdish medium schools to facilitate the admission of Syrian refugee children in their schools.

3. RESPONSE STRATEGY

Within the context of the broad, long term strategic framework covered by the “A Lost Generation?” initiative, the RRP6 strategy will ensure that children will be able to access education, will be protected from harm and violence, and will seize opportunities before them because partners will work in ways that contribute to the broadest reach and impact adopting both formal and non-formal approaches. Consequently stakeholders will continue to engage Government to provide required leadership in all aspects of the education intervention for Syrian refugee children ensuring that emergency education is mainstreamed with the education sector plan to avoid establishing any parallel system of education delivery. MoE will be supported to train teachers in the use of Arabic language to ensure that Arabic language teachers are proficient in the language.

Advocacy with MoE will encourage the continuation of the recruitment of qualified Syrian teachers in camp and non-camp schools and to allow school enrolment outside the camp. It will be ensured that education interventions are well coordinated at all levels thus resulting in proper targeting and prioritization.

Teachers will be facilitated to attend various trainings to develop and strengthen their capacities in improved pedagogy, classroom management and psychosocial support. Advocacy with Government will address the need for Government to continue to pay teachers' salaries and to hire qualified Syrian nationals as teachers; this approach will be more than a short-term measure that can transition to the medium-term.

More learning spaces will be provided in camps to accommodate the expected influx of refugee children from urban settlements. In addition, more learning spaces will be provided within existing school facilities in urban communities to absorb more refugee children.

Integrated approaches will be adopted to provide education for children and youth involving WASH, Health and Nutrition as well as Protection working together to position the education system as a sustainable way to cater for the needs of the refugee communities. Comprehensive measures will be adopted to address the issue of out-of-school youth while advocating with MoE for long term strategy to address the certification and accreditation of Syrian refugee children.

Back to school campaigns will be organized in camp and non-camp settings to attract the participation of all children as so few are presently going to school now. Community mobilization will be an integral part of the programming to ensure better operation and maintenance of services. Through social mobilization communities will be encouraged to participate in the development of education.

Girls' participation and attendance will be facilitated to avail them of educational opportunities in safe learning environments. The DoE will be supported to provide educational and learning opportunities for boys and girls using alternative approaches.

Children with disabilities will be supported to access educational facilities and teachers will be trained to recognize and address children with special learning needs.

Government will be supported to undertake studies and assessments to understand the root causes of non-access to education, and what is required to train qualified personnel and teachers, develop good quality education and build capacities of education systems. Issues around language, certification, recognition of previous learning attainments, measures to ensure retention of children will be addressed.

Adequate contingency planning/emergency preparedness and response mechanisms will be established to ensure timely response in case of sudden refugee influx or disease outbreak.

Priority interventions include:

- Coordination of education sector interventions at all levels;
- Provision of safe and protective learning spaces in camps and refurbishing/rehabilitating existing elementary/intermediate/secondary schools to support refugees in host communities, camps and non-camp locations. These structures would be made accessible to children with disabilities;
- Provision of prefabricated classrooms to accommodate basic education and secondary school girls and boys in camps and schools in host communities in need of more learning spaces;
- Provision of catch up classes through an accelerated education programme in temporary structures;
- Provision of essential teaching/learning materials, recreation kits to students and teachers in camp and non-camp locations;
- Teachers' training in improved pedagogy, active learning and psycho-social support skills; training for care-givers and parental education in camp and host communities to improve the quality of teaching and learning;
- Training of teachers on International Network for Education in Emergencies (INEE) Minimum Standards incorporating gender equality and culture sensitive issues and provided within the existing framework of teachers in-service training in KR;
- Provision of transportation support for refugee children in non-camp locations to attend public schools;

- Create access to preparatory secondary, vocational education as a valuable education option
- Establishment of Early Childhood Care and Education centres with health education psychosocial support and counselling with care givers engaged from among Syrian refugees to implement a holistic approach that will involve inter-sectoral approaches;
- Syrian adult refugees (50% women) in camps and non-camp settings in KR receive training in literacy and life skills (Human Rights, Health and Nutrition etc);
- Special attention will be addressed to the youth, especially due to the large number of youth in the KR; encouraging a resumption of activities and to explore possibility to enrol in secondary school or in university;
- Organise induction training for local partners including social workers, NGOs, universities and youth sport centres on INEE standards;
- Conduct participatory assessments in urban locations as already described under needs and priorities; and,
- Advocate for the establishment of mechanism for accessing higher education (universities, polytechnics, technical colleges and institutes).

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. To increase access to inclusive and equitable education opportunities for Syrian refugees, boys and girls from pre-school to university education levels using formal and alternative approaches by December 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Access provided to Syrian refugee children 0-5 years to integrated Early Childhood Development services in camp and non-camp settings	4.159	6.239		Countrywide	896.500,00		896.500,00		UNICEF, SCI
Output 1.2 Access provided to Syrian refugee children 6-15 years to basic education through formal and alternative approaches in camp and non-camp settings	36.576	54.865		Countrywide	7.732.251,00	7.425.180,00	305.911,00	1.160,00	UNICEF, UNHCR, ACTED-REACH & CDO, & Harikar, NRC, IRC, PIN, RI, SCI, UPP, Kurds, Triangle GH, ISHO
Output 1.3 Access provided to Syrian refugee children 16-18 years to secondary education through formal approaches in camp and non camp settings	12.163	18.244		Countrywide	995.000,00	995.000,00			UNESCO

Output 1.4 Access provided to adolescents and adults in camp and non-camp locations to university, technical and vocational education, literacy, life-skills and entrepreneurship training.	14.300	21.449		Countrywide	2.235.000,00	240.000,00	1.795.000,00	200.000,00	UNESCO, REACH, CDO & Harikar, MOLSA, MoE, MoHE/FTE MODEM, MoP, Governorates of Erbil, Duhuk, Suleimania
Output 1.5 No lost generation initiative	6.350	9.525		Countrywide	5.000.000,00	5.000.000,00			UNICEF with all the partners
Objective 1	73.548	110.322			16.858.751,00	13.660.180,00	2.997.411,00	201.160,00	

Objective 2. To improve quality of education for Syrian refugees, boys and girls, accessing inclusive education from pre-school to secondary level by December 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 ECED caregivers oriented on effective early learning and development support methodologies and parental education.	208	312		Countrywide	280.000,00		280000		UNICEF, DoE
Output 2.2 Teachers trained on improved pedagogy and child-centred methodology and capacity of school staff enhanced	1.372	2.194		Countrywide	2.159.480,00	2.159.480,00			UNICEF, UNESCO, NRC, DoE, SCI

Output 2.3 Essential teaching/learning materials and recreational kits provided in camp and non-camp schools	40.735	61.104		Countrywide	2.879.973,00	2.619.183,00	260.790,00	0,00	UNICEF, MoE, DoE, IRC, PIN, SCI, STEP
Output 2.4 Psychosocial support provided to increase well-being of refugee children from pre-school to secondary level.	52.898	79.348		Countrywide	1.402.165,00	1.043.980,00	238.185,00	120.000,00	Triangle GH, UNICEF, STEP, UNHCR, REACH, CDO, Harikar, UPP & Qandil, SCI,IRC
Output 2.5 Training and orientation of PTA conducted for their effective participation in school governance.	457	686		Countrywide	823.000,00			823.000,00	UNICEF, SCI, STEP, DoE, NRC
Output 2.6 Sector coordination strengthened for effective emergency education preparedness and response.				Countrywide	165.000,00			165.000,00	SCI, ACTED-REACH, UNICEF
Output 2.7 Minimum standards on education in emergency are mainstreamed in programme planning, implementation and monitoring				Countrywide	50.000,00			50.000,00	UNESCO, MoE, MOLSA, MoHE, MoHE/ FTE MODEM, MoP, Governorate of Erbil, Dohuk, Sulemania, Al-Qaim, NGOs INEE
Objective 2	95.670	143.644			7.759.618	5.822.643	778.975	1.158.000	

Sector indicators	Target
a) # Syrian children attending ECD facility	10,399
b) parents received parental education	520
# Syrian refugee children/adolescents attending school and received educational materials	91,442
a) Primary:	30,408
b) Secondary:	
# Teachers and school staff received training	3,566
# children/adolescents with access to psychosocial services	132,246
# adolescents with access to technical and vocational education, literacy, life-skills and entrepreneurship training.	35,749

Education - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	24.618.369	19.482.823	3.776.386	1.359.160	14.585.933

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Education in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	52,000	52,000	
IRC	884,000	884,000	
KURDS	640,000	640,000	
NRC	3,544,000	3,219,000	325,000
PEOPLE IN NEED	404,000	320,000	84,000
RI	2,240,000	1,120,000	1,120,000
SCI	1,000,000	673,000	327,000
TGH TRIANGLE GH	456,000	228,000	228,000
UNESCO	6,048,000	3,024,000	3,024,000
UNFPA	1,200,000	600,000	600,000
UNHCR	2,092,302	1,046,151	1,046,151
UNICEF	20,600,000	12,768,218	7,831,782
UPP	44,000	44,000	
Total	39,204,302	24,618,369	14,585,933

I. Health and Nutrition response

Lead Agencies	WHO and UNHCR		
Participating Agencies	WHO, UNHCR, UNICEF, UNFPA, PU-AMI, IMC, UPP		
Objectives	<ol style="list-style-type: none"> 1. Improve equitable access, quality, use and coverage to essential health care services, including referral, to Syrian refugees in camp and non-camp settings while ensuring sustained coverage of preventive, promotive and curative interventions in Iraq by end of 2014. 2. Improve coverage of comprehensive health services to Syrian refugees through integrated community level interventions by end of 2014. 3. Support the capacity of the national health care system to provide health and nutrition services to Syrian refugees and vulnerable Iraqis in the most affected governorates by the end of 2014. 		
Requirements from January to June 2014	US\$19,217,000		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$14,842,000	US\$3,250,000	US\$1,125,000
Total 2014 indicative financial requirements	US\$29,722,000		
Contact Information	Inge Colijn, colijn@unhcr.org		
	Syed Jaffar Hussain, hussains@irq.emro.who.int		

1. ACHIEVEMENTS AND CHALLENGES

Through partners' concerted efforts, health needs assessments were conducted and provision of/access to health services for Syrian refugees were achieved despite the planned target being surpassed due to the rapid influx of refugees since 15 August 2013. Services and supplies were ensured, mass measles vaccination, Vitamin A supplementation and deworming campaigns conducted.

Poor feeding practices (limited exclusive breastfeeding for infants below 6 months and inadequate complementary feeding) have been reported. Though mass vaccination (polio/measles) including deworming and Vitamin A could reach more than 90 per cent, routine immunization services need to be redesigned to address strengthening routine immunization with periodic mass vaccination, neonatal and child health issues.

Systems for communicable disease surveillance and early detection of outbreaks have been established in the camps, although the systems remain fragile and vulnerable due to increased influx of refugees. PHC centres were established in the camps that are delivering a free-of-charge package of essential health services, including reproductive health and mental health.

Despite these achievements, the delivery of optimum health services to Syrian refugees has been constrained by limited financial resources allocated to health and increasing number of refugees while the Government's efforts to provide support to health services is dwindling. Furthermore,

with establishment of additional camps, more human resources will be required for curative and preventive health. Other challenges include the ongoing security concerns that negatively affect access to the camps, exacerbated by the recent bomb blasts in Erbil. Also, the increased number of refugees in host communities is putting strain on an already fragile and overloaded health system.

2. NEEDS AND PRIORITIES

The overall aim of these activities will be to prevent excess morbidity and mortality among displaced Syrian populations (both inside and outside camps) by supporting the Ministry of Health (MoH) in responding to health needs of target populations. To address the changing needs the plan is to prioritize key child survival interventions and in addition scale up services, apply innovative approaches for the hard to reach and plan for contingencies such as outbreaks of epidemic-prone diseases, malnutrition and total lack of access (remote programming).

Priority needs and objectives for the response to the Syrian refugee influx include ensuring the delivery of a comprehensive package of primary health and nutrition care and referral services, so as to provide optimal health services for Syrian women, girls, boys and men of all ages with varying health needs. Services will also include a full package reproductive health including emergency obstetric service, ante and post-natal services and family planning. In addition to comprehensive response to SGBV, including identification of cases, providing medical support and clinical management to survivors, this will be worked on closely with the protection groups in order of identifying referral pathways and standard operating procedures.

Routine immunization would be strengthened in all the camps. Mass vaccination for measles and polio with vitamin A+ deworming would be conducted. Services for Infant and Young Child Feeding (IYCF) and acute malnutrition where indicated would be provided. Nutritional surveillance would be conducted and advocacy for proper use of breast milk substitutes would be conducted. Essential equipment, medicines, vaccines, micronutrients, water purification and other essential supplies would be procured. Communication for development including health and hygiene promotion and IYCF and social mobilization for broader engagement of communities, local leaders and influential people to support the response scale up would be carried on.

Primary health care services will include the following: promotion of proper nutrition, reproductive and child care, including family planning, appropriate treatment for common diseases and injuries, routine immunization against major infectious diseases, home visits for new born care using female midwives/nurses from among the Syrian refugees, nutritional assessment and response, services for IYCF and acute malnutrition where indicated, baby hut services for breast feeding counseling, growth monitoring and hygiene education, integrated community case management, prevention and control of locally endemic diseases, education about common health problems and what can be done to prevent and control them. Services would also be delivered through community based volunteers/workers. Contingency preparedness for epidemic prone diseases, malnutrition would also be done.

Another key priority is to improve the diagnosis and management of chronic illness, particularly among the refugee population already suffering from chronic non-communicable diseases such as hypertension, diabetes, heart problems, asthma and the need to ensure they have access to uninterrupted treatment and periodic medical examination. Similarly, uninterrupted supply and management of essential medicines and other medical supplies and equipment is vital.

Mass vaccination against polio, is another emerging public health matter of international concern, following the recent confirmation of cases of polio virus in a country which was declared polio free since 1999. To reduce the high risk of re-introduction of polio in countries hosting Syrian refugees, there is a need to conduct countrywide massive vaccination of all target groups in these countries. In the case of Iraq, an average of 5,700,000 children under 5 years to be targeted as well as children attending primary school (ages 6-12) and to extend the NID to six rounds from the current four per year. Regional plans for such coordination's are being prepared by WHO and MoH as a matter of utmost urgency.

There will be also a need to strengthen the current disease surveillance and control system, including Disease Early Warning System and Outbreak prevention and control for the displaced population given the increased risk of communicable disease outbreak calling for an effective early warning and response system.

The health information system (HIS) will be strengthened to monitor the health interventions and for evidence based planning.

Environmental health interventions have also been identified as a major priority. This includes promotion of hygiene, safe disposal of waste, water quality monitoring along with ongoing health education and promotion which are elements that need to be enhanced.

Mental Health and Psychosocial Support for Syrians escaping conflict and seeking refuge from war and persecution is also another priority requiring urgent attention. The move from their homes to new habitats with uncertainty is causing anxiety, not only among adult population but also causing mental health stress among children.

Population group	Population in need	Targeted population
Camp	160,000	160,000
Non-camp	240,000	200,000

3. RESPONSE STRATEGY

The overall response will be based on applying the primary health care approach and strategy to ensure that essential health services are timely provided and are guided by proper assessment of needs, challenges and resources, appropriate organization and coordination of public health and medical services delivery.

At the camp level, this strategy will be implemented by ensuring that there is at least 1 primary health centre (PHC) for 10,000 people in each camp. The Ministry of Health will be the overall manager of camp based activities with the support of UN and NGOs with some involvement in running curative services. The Primary Health Care package will include treatment of communicable and non-communicable diseases and injuries/disabilities, immunization against major vaccine preventable diseases, prevention and control of outbreaks, standard practice of HIS, promotion of proper nutrition including IYCF, growth monitoring, integrated community case management and nutrition surveillance, comprehensive reproductive and child care including family planning and SGBV, mental health and psychosocial support, functional referral system, environment health, BCC including health and hygiene promotion and social mobilization for broader engagement of communities, local leaders and influential people to support and scale up the response will be carried out.

The response strategy for non-camp refugees will differ from those in the camp setting. The main priorities will be to ensure that refugees living in the non-camp settings have free access to health services and that the host population's access is not hindered by the influx of refugees. In order to achieve this objective, various components of the health system in the host community will be strengthened, including among others, supporting PHC and referral facilities located near the camps or areas with high concentration of displaced Syrian population, uninterrupted provision of medicines and supplies and equipment, capacity building for health practitioners; and health education and promotion to the population in the community.

The main constraints/challenges that could impact on RRP 6 activity implementation include:

- Further deterioration of security conditions and unstable political context leading to limited access to population in need of humanitarian assistance.
- Limited financial resources to undertake priority activities.
- Insufficient human resources and interruption of the medical supply chain.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Improve equitable access, quality, use & coverage to essential health care to Syrian refugees in camp and non-camp setting while ensuring sustained coverage of promotive, preventive, & curative interventions in Iraq by end of 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Establishment of health services and provision of comprehensive primary health care including NCD and MHPSS	160.000	200.000		Countrywide	2.580.000	1.800.000	700.000	80.000	UNHCR, WHO, UNICEF, UNFPA, PU-AMI, IMC, UPP, ACTED
Output 1.2 Increased comprehensive coverage of EPI services	51.000			Highly congested camps	400.000	400.000			UNICEF, WHO
Output 1.3 Comprehensive reproductive health services including emergency obstetric care and GBV services provided to Syrian refugees in camps and non camps	42.500	38.250		Countrywide	425.000	175.000	250.000		UNICEF, UNFPA
Output 1.4 Referral system for secondary and tertiary care established	34.000	51.000		Camps and districts with a high concentration of refugees	250.000	250.000			UNHCR, PU-AMI, IMC

Output 1.5 Appropriate infant and young child feeding practices promoted	21.250			Camps and districts with a high concentration of refugees	100.000	100.000			UNICEF
Objective 1					3.755.000	2.725.000	950.000	80.000	

Objective 2. Improve coverage of comprehensive health services to Syrian refugees through integrated community level interventions by end of 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Community health volunteer teams in place	160.000	200.000		Camps and districts with a high concentration of refugees	375.000	200.000	125.000	50.000	UNHCR, WHO, UNICEF, UNFPA, PU-AMI, UPP, IMC
Output 2.2 Community based Newborn care and Integrated Community Case Management (iCCM) programs implemented and monitored	21.250			Dohuk, Erbil, Suleymania and Anbar governorates	115.000		115.000		UNICEF
Output 2.3 Community based reproductive health awareness programs using Syrian women volunteers	42.500	38.250		Camps and districts with a high concentration of refugees	135.000		110.000	25.000	UNFPA
Objective 2					625.000	200.000	350.000	75.000	

Objective 3. Support the capacity of the national health care system to provide services to Syrian refugees and vulnerable Iraqis in the most affected governorates by the end of 2014.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Access to primary and essential secondary and tertiary health care supported	160.000	200.000		Countrywide	3.200.000	2.000.000	500.000	700.000	UNHCR, WHO, UNICEF, UNFPA
Output 3.2 Contingency plan for disease outbreak maintained	160.000	200.000		Countrywide	950.000	750.000	200.000		UNHCR, WHO, UNICEF
Output 3.3 Increased comprehensive coverage of mass vaccination campaigns (Measles, Polio, Meningitis) with deworming and Vit-A supplementation	51000	240.000	5700000	All of the country (about 5,700,000 children per NID round), including both targeted Iraqis and Syrian children living	10.167.000	9.167.000	1.000.000		UNICEF,WHO
Output 3.4 Health information system strengthened	160.000			Countrywide	520.000		250.000	270.000	UNHCR
Output 3.5 Health Facility Assessment				Countrywide	0				UNHCR
Objective 3					14.837.000	11.917.000	1.950.000	970.000	

Sector indicators	Target
% of refugees having access to essential health services	370.000
% of women having access to reproductive health services	80.750
% of EPI coverage of under-fives children in the camp setting	51.000
% of children immunized for polio vaccines during campaigns	5.700.000
Number of functioning health facilities equipped/constructed/rehabilitated	14

Health and Nutrition - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	19.217.000	14.842.000	3.250.000	1.125.000	10.505.000

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Health and Nutrition in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
IMC	656,900	328,450	328,450
PU-AMI	2,420,000	1,210,000	1,210,000
UNFPA	2,200,000	1,200,000	1,000,000
UNHCR	4,705,000	1,875,000	2,830,000
UNICEF	11,183,500	8,483,500	2,700,000
UPP	573,100	286,550	286,550
WHO	7,983,500	5,833,500	2,150,000
Total	29,722,000	19,217,000	10,505,000

J. Shelter Response

Lead Agencies	UNHCR		
Participating Agencies	UNHCR, ACTED, INTERSOS, NRC, TRIANGLE, UNHABITAT		
Objectives	Shelter and infrastructure established, improved and maintained		
Requirements from January to June 2014	US\$31,259,101		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$27,069,890	US\$4,189,211	
Total 2014 indicative financial requirements	US\$62,518,202		
Contact Information	Inge Colijn, colijn@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

A key priority for the shelter sector was obtaining more land and construction of additional camps in Iraq's Kurdistan Region, both to decongest Domiz camp and to accommodate new arrivals.

UNHCR developed 12 new transit centres and camps in the KR to accommodate thousands of families that have arrived since 15 August into the KR. Approximately, 11,000 tents have been distributed and erected in Anbar and the KR governorates. In addition, concrete foundations have been or are in the process of being established for 6,940 tents in the newly established locations. In locations such as Darashakran, Kawergosk, Qushtapa, Basirma in Erbil Governorate, Domiz, Gawilan, Bajed Kandela Transit in Dohuk and Arbat in Sulaymaniyah, local authorities supported by UNHCR and its implementing partners are working on various technical activities, mainly camp development in particular earth works and road construction but also coordination and implementation of drainage. This significant number of new arrivals has placed immense pressure on shelter and other infrastructure in Domiz. Buildings for the camp administration are needed as well.

It is expected that by the end of 2013, an additional 50,000 Syrian refugees may arrive to the KR governorates, which will place a considerable pressure on the existing camps and also on host communities. Shelter support for urban refugees and provision of non-food items will be also critically needed, as well as WASH activities in all camps and camp like settings, which will remain challenging, in addition to obtaining more land for expansion if need be.

In Al Qa'im, a major accomplishment was the relocation of the refugees from Camp 1 and 2 to Al Obaidy camp, located further from the border. UNHCR equipped Al Obaidy camp with tents and all necessary infrastructure, including administration and management caravans; the Government ensured that levelling and demarcation was undertaken. In the Central and Southern governorates and in Al Qa'im (Al Obaidi Camp), continued coordination with the emergency cell for camp expansion, and minor rehabilitation in Al Qa'im camp 2, which is being maintained in the event of an influx.

2. NEEDS AND PRIORITIES

Camps

- Land allocation for establishment of new camps
- Expansion of existing camps to attain maximum capacity
- Provision of emergency shelter for new arrivals in transit centres and camps
- Improve and make adequate shelters for refugees in camps prior to the influx

Non-camps

- Advocacy for continued refugee residency in host communities
- Upgrade the dwellings of refugees living in non-camp settings
- Prevention of informal settlements in urban areas

Population group	Population in need	Targeted population
Camp	160,000	160,000
Non-camp	240,000	144,000
Total	400,000	304,000

3. RESPONSE STRATEGY

Camps: The provision of safe and adequate shelter to refugees is one of the tools of protection. The objective of this sector is to provide adequate and targeted shelter support to Syrian refugees living in camps in order to reduce vulnerability and physical settlement issues within the camp. Singles will be separated from the families, and proper lighting at night will be provided. In principle all refugees living in camps qualify for shelter assistance. In Kurdistan Region there are 160,000 Syrian refugees expected to be in camps by end of December 2014. There will two broad shelter interventions for refugees in camps and camp-like settings such as transit centres. Firstly, all individuals arriving in transit centres and camps will be prioritized for emergency shelter provision. The adequacy of shelter support provided will be measured by the potential to ensure mitigation of harsh weather conditions especially during the winter. Secondly, those who have been settled longer than six months will be assisted with replacement tents and plastic sheeting as well as inputs to further build up the cement walls around the tents.

The minimum standards of shelter space will be 3.5 m² per person and the minimum standard for overall site space will be minimum 45 m² per person, due to the fact that the camp block plan was adapted to cultural norms of the target population in terms of space. In order to achieve this, the concrete foundation platforms constructed will be issued out with two family sizes according to the following protocol:

- Family size 1-5 will receive one concrete platform of dwelling area, a kitchen, shower and latrine of minimum size 100 m²
- Family size 6 above will receive two concrete platforms of dwelling area, a kitchen, shower and latrine of minimum size 200 m²

In Al Qa'im (Al-Obaidy Camp), UNHCR is raising the floor level for the tents to insulate from water logging and cold winter conditions by placing blocks and covering with plywood and plastic sheeting. Constructing drainage channels for rain water, and replacement of tents is also planned as part of winterization. In addition, the tent flooring will be carpeted to insulate and the tent roofing will be covered with plastic sheeting to prevent rain water from seeping in. An area of 200 m² will be established inside the camp for social activities. One additional Rub hall will be installed inside the camp to increase the storage capacity.

Non-camp: As per UNHCR policy, families that have Persons with Specific Needs (PWSN, identified according to the vulnerability criteria, will be targeted first and non-vulnerable families would be targeted after. Persons with special needs will be provided construction support paid for by service provider; that is, the essential materials needed, will be provided and artisans paid to rehabilitate or fix the shelter problem identified. There will be mixed approaches for families without special needs; these will for example range from shelter grants, to rent or provision of shelter kits (through a voucher system) but the families will undertake the actual repair/construction of their shelters themselves.

Community outreach and protection services will be engaged in the beneficiary selection. In order to select beneficiaries a short list of criteria will be agreed by agencies and refugees so that refugees fulfilling the criteria will qualify for shelter assistance of their choice. Refugees will benefit from shelter assistance based on their demonstrated need, and the criteria will assist to determine their need.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Shelter and Infrastructure established, improved and maintained.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Emergency shelter provided for new arrivals	80.000	120.000		Countrywide	8.577.890	7.577.890	1.000.000		UNHCR, ACTED, NRC
Output 1.2 Shelters in urban settings and camps offer adequate living conditions	120.000	180.000		Countrywide	12.681.211	10.492.000	2.189.211		UNHCR, ACTED, NRC, INTERSOS, SAVE THE CHILDREN
Output 1.3 Refugees and host communities benefit from adequate infrastructure	160.000	180.000		Countrywide	10.000.000	9.000.000	1.000.000		UNHCR, NRC
Objective 1	360.000	480.000			31.259.101	27.069.890	4.189.211		

Sector indicators	Target
% of households living in adequate dwellings	60
# of persons supported with grants to upgrade shelters	50.000
# of person provided with cash for rent	70.000
# of new arriving persons in receiving emergency accommodation	80.000

Shelter - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	31.259.101	27.069.890	4.189.211		31.259.101

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Shelter in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	2,980,000	1,490,000	1,490,000
INTERSOS	780,000	390,000	390,000
NRC	8,800,000	4,400,000	4,400,000
SCI	1,058,206	529,103	529,103
UN-Habitat	8,000,000	4,000,000	4,000,000
UNHCR	40,899,996	20,449,998	20,449,998
Total	62,518,202	31,259,101	31,259,101

K. Core Relief Items response

Lead Agencies	UNHCR		
Participating Agencies	Save the Children, IRC, IOM, DRC, ACTED, Triangle GH, Mercy Corps, ACF, IYL, IRW		
Objectives	<ol style="list-style-type: none"> 1. Provision of Core Relief Items to refugees upon arrival into Iraq 2. Replacement of Core Relief Items 3. Provision of Core Relief Items based on seasonal requirements 4. The provision of logistics capacity and distribution modalities for Core Relief Items 		
Requirements from January to June 2014	US\$20,684,932		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$20,684,932		
Total 2014 indicative financial requirements	US\$62,261,757		
Contact Information	Inge Colijn, colijn@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

The provision of Core Relief Items (CRI) has been a key component of the response to the Syrian refugee emergency in Iraq and supports the protection of this vulnerable population. Thus far in the KR alone, UNHCR procured and distributed nearly 30,000 blankets, 133,000 quilts, over 26,000 hygiene kits, 55,000 jerry cans, 25,000 kitchen sets, 124,000 mattresses, 26,000 plastic tarpaulins, 20,000 stoves, 60,000 sanitary napkins and 150,000 baby diapers to Syrian refugees in camp and non-camp settings. In addition, IOM has so far procured and distributed over 12,000 kits, assisting more than 55,000 Syrian refugees in camps and non-camps settings.

Between 15 August and mid-September over 40,000 Syrian nationals fleeing the armed conflict and violence in their home country, entered the KR of Iraq. Upon arrival to the camps, each refugee family received an “on arrival” CRI kits consisting of mattresses, one hygiene kit, one kitchen set, quilts, kerosene and water jerry can, one stove and a fan. In addition, ongoing replacement of CRI has been occurring in already established camps in Domiz and Al Qa'im. The activities under this sector was challenged by the absence of a clear mapping as to where the new arrivals and uncertainty of the placement of the refugees when they cross the border. As a result the sector has often had to react to needs rather than being proactive with kits available upon arrival at a logical destination.

2. NEEDS AND PRIORITIES

The priority needs as identified by the Sectoral Working Group are:

- Provision of CRI kits on arrival
- Replacement of CRIs
- Provision of CRIs based on seasonal requirements
- Enhanced logistics distribution and capacity for Core Relief Items

These priorities include both Camp and Non-Camp refugee populations, as well as a consideration of the host community.

Population group	Population in need	Targeted population
Camp	100%	100%
Non-camp	40%	40%

3. RESPONSE STRATEGY

The strategy for the distribution modality of Core Relief Items implies blanket coverage of the camp population, particularly with regard to seasonal variations (e.g. winterization items), and a focus on EVIs among refugees in non-camp setting.

In addition, the broader non-camp population will be supported via the distribution of physical CRI or vouchers allowing the purchase of these items. The CRI will be broad in scope, and may include household items, clothing, shoes and kerosene. Partners engaged in activities targeting non-camp population include Triangle GH, DRC, ACTED, Mercy Corps, Save the Children, IOM, ACF and IRC.

Camp based populations will be supported with CRIs by UNHCR, through a broad coverage with regard to household items. Other partners including DRC, Save the Children, IOM, Mercy Corps, ACF and IRC will supplement these distributions with specific CRIs.

In addition to the replacement of CRIs, the distribution of seasonal CRI to cover winterization for Syrian refugees in camps and non-camp settings is a fundamental part of CRIs distribution both in Iraq's Kurdistan Region as well as Al Qa'im, Anbar governorate.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Provision of Core Relief Items to refugees at a logical point upon arrival into Iraq.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Procurement of Core Relief Items to cover expected influx as indicated in RRP6.	54.681	27.766	4.686	Erbil, Dohuk, Suleimaniyah, Al-Qaim	4.200.944	4.200.944			UNHCR, DRC, IOM, Mercy Corps, ACTED
Objective 1	54.681	27.766	4.686		4.200.944	4.200.944			

Objective 2. Replacement of Core Relief Items.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Mapping analysis and vulnerability assessment to identify requirements for the replacement of CRI//SEE COMMENTS	15000	30000	5.000	Erbil, Dohuk, Suleimaniyah	450.000	450.000			ACTED, IOM
Output 2.2 Procurement of Core Relief Items in a sufficient capacity to allow for replacement to occur.	105356	44027	4.665	Erbil, Dohuk, Suleimaniyah, Al-Qaim	7.645.892	7.645.892			UNHCR, IRC, DRC, IOM, Mercy Corps
Objective 2	120.356	74.027	9.665		8.095.892	8.095.892			

Objective 3. Provision of Core Relief Items due to the seasonal requirements.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Procurement of Core Relief Items that are appropriate for the seasonal conditions	160.000	152046	5.752	Erbil, Dohuk, Suleimaniyah, Al-Qaim	6.108.055	6.108.055			UNHCR, DRC, Triangle GH, IOM, Save the Children, ACF, Mercy Corps, ACTED
Objective 3	160.000	152.046	5.752		6.108.055	6.108.055			

Objective 4. The provision of logistics capacity and distribution modalities for Core Relief Items.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 4.1 Establishment of a distribution management system across the refugee community for Core Relief Items.	73100	12248	1.876	Erbil, Dohuk, Suleimaniyah	2.120.500	2.120.500			DRC, ACTED, IRC, Mercy Corps
Output 4.2 Warehousing and transportation of Core Relief Items across Iraq.	8141	12208	1.876	Erbil and Suleimaniyah	159.541	159.541			Mercy Corps
Objective 4	81.241	24.456	3.752		2.280.041	2.280.041			

Sector indicators	Target
" # of households receiving core relief items	550
# of households receiving seasonal support	1.946

CRIs - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	20.684.932	20.684.932			41.576.825

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Core Relief Items in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	3,367,600	1,366,800	2,000,800
ACTED	2,354,960	1,294,160	1,060,800
DRC	10,500,000	3,575,000	6,925,000
IOM	9,100,000	4,050,000	5,050,000
IRC	2,330,000	1,160,000	1,170,000
Mercy Corps	4,286,435	3,180,950	1,105,485
SCI	2,911,731	1,345,526	1,566,205
TGH TRIANGLE GH	1,084,800	564,800	520,000
UNHCR	26,326,231	4,147,696	22,178,535
Total	62,261,757	20,684,932	41,576,825

L. Food response

Lead Agencies	WFP & UNHCR		
Participating Agencies	ACTED, ACF, IRW (Iraq), FAO		
Objectives	1. Food Security for all Syrian Refugees in need is ensured.		
Requirements from January to June 2014	US\$41,304,175		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$39,506,300	US\$1,016,875	US\$781,000
Total 2014 indicative financial requirements	US\$99,613,626		
Contact Information	Yaver Sayyed, yaver.sayyed@wfp.org		

1. ACHIEVEMENTS AND CHALLENGES

WFP has been supporting vulnerable Syrian refugees through in-kind food assistance and a food voucher programme. In Domiz camp, WFP started in-kind food distributions in August 2012 before launching the food vouchers in November 2012.

In Domiz, from January to September 2013, WFP in partnership with Islamic Relief Worldwide (IRW) working with Barzani Charity Foundation, distributed food vouchers valued at US\$12.57 million to 62,000 refugees on a monthly basis. Both the beneficiaries and all other stakeholders are appreciative of the voucher programme and satisfied with the quality of the food items available in the voucher shops, being meeting the refugees' nutritional requirements.

In Al Qa'im camp, food parcels have been distributed since December 2012 to over 6,000 refugees on a monthly basis. MoMD provided complementary food in Al Qa'im until mid-January; thereafter UNHCR introduced a complementary food allowance of US\$15 per person/month, while AFKAR has been providing additional bread to the population on a regular basis.

School feeding at camp schools in Al Qa'im and Domiz started in March and April 2013. WFP provides children with a nutritious fortified biscuit each school day. In Domiz, the Ministry of Education provides children with milk and fresh fruit. As of September 500 school children were assisted through school feeding in Al Qa'im and 2,150 in Domiz on a monthly basis through the school feeding programme implemented by WFP.

Challenges

- Security concerns negatively affecting access to the camps, particularly Al Qa'im;
- Domiz camp is congested creating bottlenecks in delivery of services;
- Limited resources for programmes;
- Lack of purchasing power of the refugees to buy sufficient complementary foods;
- Heightened intolerance towards the refugee community leading to a restriction in the number of new arrivals or access to services such as complementary foods;
- High rental costs affecting refugees in non-camp settings;
- Limited access to the labour market or other means of livelihoods; and
- Needs of the host communities need to be addressed.

2. NEEDS AND PRIORITIES

Based on WFP monitoring reports, refugees in the camps are fully dependent on food assistance, whereas non-camp refugees are reliant on assistance from host communities. Overall there is a wide dependency on aid. To cope with the situation, most refugees have changed their consumption patterns, with lower intake of meat and fresh foods, and in some cases reduction of the number of meals to one or two per day. Other negative coping strategies being employed include incurring debt to buy complementary food or pay rent in non-camp settings. In Domiz camp 78 per cent of respondents declare that WFP food assistance represented between 51 and 75 per cent of their needs. Most refugee families depleted their reserves and are in need of food assistance. It is estimated that 30 per cent of the non-camp refugees are food insecure.

The Government supports humanitarian assistance to focus on those living in camps. In conjunction with UNHCR, WFP conducted a household food security assessment in the KR in December 2012. Preliminary information indicates that more than 30 per cent of non-camp refugees living are also vulnerable. The Joint Assessment Mission (JAM) in early 2014 will better inform on the overall humanitarian needs for both refugees in camps and host communities. WFP is also monitoring the nutritional situation of the refugees in collaboration with key partners including UNICEF and the MoH.

UNHCR's contingency plan for Iraq points out that the host communities' capacities and structures to absorb refugees will reach its limits relatively quickly. Many have arrived with limited means to cover basic needs and are now increasingly in need of assistance. The massive and accelerating influx of refugees is placing enormous strain on existing Government resources and host communities.

As the number of Syrian refugees continues to increase, their needs ranging from protection, social services and food become evident. Hence, there is a critical need to provide food assistance to save lives for EVIs in the camps and non-camp settings as well as female headed households in host communities.

Population group	Population in need	Targeted population
Camp	160,000	160,000
Non-camp	240,000	130,000
School Feeding (Camp)	10,000	10,000

3. RESPONSE STRATEGY

Refugee children of school age are attending elementary and intermediate schools that have been set up in the camps. The school feeding programme in the camps helps to attract children to attend school more regularly and to improve attendance of girls.

Responses

- Meet immediate food needs (basic and complementary food) of vulnerable refugees through WFP regular distribution of adequate food assistance to refugees living in camps and provision of cash assistance to EVIs by the GoI/KRG, WFP and UNHCR, (mostly refugee families residing in non-camp settings);
- Ensure regular school attendance and adequate learning capacity of school children in the camps through provision of a daily, micronutrient-fortified nutritious snack; and,
- Obtain adequate and regular information on the humanitarian needs of refugees through assessments across Iraq, with particular focus on the JAM, assessing the needs of refugees in camps and the host communities.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Food Security for all Syrian Refugees in need is ensured.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Food Assistance	160.000	130.000	10,000 children School feeding	KRG and Anbar Governorate	40.123.175	39.506.300	616.875		WFP, UNHCR, IR, ACTED and ACF
Output 1.2 Food security assessments are conducted for WFP on their commodities and voucher distributions				Erbil, Duhok and Sulaymaniyah Governorates	300.000		300.000		ACTED-REACH
Output 1.3 Monitoring and Evaluation of WFP activities				Erbil, Duhok and Sulaymaniyah Governorates	100.000		100.000		ACTED-REACH
Output 1.4 Improve food security among vulnerable Kurdish rural communities hosting Syrian refugees and Syrian refugees				Erbil, Duhok and Sulaymaniyah Governorates	781.000			781.000	FAO
Objective 1	160.000	130.000	10.000		41.304.175	39.506.300	1.016.875	781.000	

Sector indicators	Target
# of benefacaries receiving food assistance per month	100% of targeted population
# of benefacaries receiving food vouchers per month	100% of targeted population
# of benefacaries attending schools receiving food vouchers per month	100% of targeted population attending schools

Food - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	41.304.175	39.506.300	1.016.875	781.000	58.309.451

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Food in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	400,000	400,000	
FAO	2,489,835	1,708,835	781,000
UNHCR	2,591,006	2,000,000	591,006
WFP	94,132,785	37,195,340	56,937,445
Total	99,613,626	41,304,175	58,309,451

M. WASH response

Lead Agencies	UNICEF		
Participating Agencies	ACF, ACTED, DRC, FRC/IRCS, IRC, IRW,UPP, NRC, Qandil, Relief International, Save the Children, UNHCR, UNICEF, UNHABITAT, PU-AMI and WHO		
Objectives	<ol style="list-style-type: none"> 1. WASH interventions targeted affected populations are effectively coordinated at the national and sub-national levels in close collaboration with other sectors. 2. Affected populations have timely, equitable and sustainable access to sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene. 3. Affected populations have access to safe, sanitary and hygienic living environment through provision of sanitation services that are culturally appropriate, secure, sanitary, user-friendly and gender-appropriate. 4. Affected populations have reduced risk of WASH-related diseases through access to improved hygienic practices, effective community mobilisation to address harmful current practices, hygiene promotion, and delivery of hygiene products and services on a sustainable and equitable basis. 		
Requirements from January to June 2014	US\$85,806,311		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$30,388,305	US\$44,949,636	US\$10,468,370
Total 2014 indicative financial requirements	US\$143,010,517		
Contact Information	Ali Al-Khateeb, aalkhateeb@unicef.org		

1. ACHIEVEMENTS AND CHALLENGES

In order to effectively coordinate the WASH intervention targeting Syrian refugees, a sector coordination mechanism has been established at the governorates level and regular meetings of the partners are being held in this regard at the national and regional levels. WASH sector partners, including Gol, KRG, UNICEF, UNHCR, national and international partners are providing WASH services to the refugees at the border points as well as in transit and permanent camps. These services have thus far benefitted about 114,840 including all camps and a low percentage of host communities' population in Central and Northern Iraq. Other achievements include:

- Rapid expansion of camps to accommodate the influx of refugees
- Rapid response of Government and partners to provide essential services for refugees
- Dedicated Government agency/dept. (DMC) to manage the emergency

A number of challenges exist:

Operation and maintenance of water and sanitation services: Misuse of WASH facilities by refugees, especially of water taps and latrines, is leading to inefficient service delivery and hence high operation and maintenance costs;

Wastewater management: The soil in north of Iraq has low permeability so regular de-sludging resulting in high operation cost for sanitation services is required;

High cost of WASH services: Deep water table (more than 200 meters), non-existence of sewerage system in KRG have resulted in very high investments being required for provision of WASH services to refugees;

Security situation: Security situation in central zone has affected the presence of the implementing partners and hence timely delivery of WASH services to the refugees;

Limited funding which is impeding partners' capacity to provide WASH services; and,

Expectation of refugees to remain in KRG thus need for more durable and higher technical measures which automatically elevates standards and costs.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	160,000	160,000(100%)
Non-camp	240,000	90,000(37.5%)

The rapid increase in number of refugees in Iraq particularly in the KR threatens to overwhelm capacity of the Government; UN and NGO support agencies to meet the basic needs of the refugees especially in WASH sector.

The recent influx of 40,000 Syrians on and after August 15th created a significant gap; surveys and assessments reported inequity in water distribution (especially in Domiz camp). Moreover, about 80,000 refugees are still receiving water by tankers, while sanitation services need to be upgraded to meet SPHERE standards. However, WASH interventions for camps in three governorates of the KR have begun.

The WASH programme will also scale up to cover extremely vulnerable children in communities “significantly impacted” by refugees, by improving WASH projects, WASH facilities in schools, child friendly spaces and health facilities, hygiene promotion and Distribution of WASH related CRIs. This will ensure child protection issues, including SGBV, are considered in WASH implementation.

The key priorities in camps are:

Community mobilization to facilitate greater ownership of resources;

- Safe water supply and equitable distribution;
- Adequate sanitation, solid waste management to agreed sector standards;
- WASH in schools, clinics and child friendly services;
- Winterization (availability of hot water for bathing and washing, increased de-sludging services);
- Identifying more sustainable cost efficient technologies for water and sanitation services;
- Operation and maintenance of WASH facilities;
- Hygiene promotion;
- Provision of WASH CRIs; and
- Building capacity of partners for effective management and implementation of WASH emergency response as well as for operation and maintenance.

While the non-camps key priorities are:

- Improving safe water supply and equitable distribution to areas with high influx;
- Improving sanitation and solid waste in areas with high influx of refugees;
- Water conservation as part of hygiene promotion;
- WASH in schools;
- Assessment of host community areas water, sanitation needs and developing priority plans with respective northern and central authorities.

3. RESPONSE STRATEGY

UNICEF with partners leads and manages WASH interventions by providing access for Syrian refugees to safe water (20 -50 ltrs/P/day), sanitation services (latrines, baths 4-8 families per unit in transit camps), solid waste management and hygiene promotion, Gender sensitive approach was taken into consideration as the indicator measures the extent to which females have access to separate lockable facilities, which is an important factor in protection of women and girls, including girls' attendance in school, CFS' &YFS'.

The following strategies will be used to address the needs identified above:

- Encourage Government engagement and leadership;
- Ensure that WASH interventions are well coordinated at all levels thus resulting in proper targeting and prioritization, also include coordination with other sectors such as health, education and protection to maximize impacts;
- Community mobilization will be made an integral part of programming to ensure better operation and maintenance of services;
- Adequate contingency planning/emergency preparedness and response mechanism will be established to ensure timely response to emergency situations such as sudden influx of refugees or disease outbreak;
- Standardization of approaches for hardware and software will be promoted while keeping in view the local context and specific needs.

The priority interventions include the following:

- Strengthening of coordination mechanism at national and sub-national levels;
- Provision of adequate water supply for all refugees in camps, ensuring water quality is monitored and maintained;
- Provision of basic sanitation for all refugees in camps, including improvements in wastewater collection and disposal systems;
- Provision of solid waste and sludge collection and disposal services in camps;
- Provision of adequate WASH services in schools, health facilities, child friendly spaces in camps and in host communities;

- Intensive hygiene promotion in camps as well as host communities focusing on safe water handling and storage, water conservation, hand washing at critical times and latrine usage, with special attention to parents of children at risk of malnutrition;
- Distribution of WASH related CRIs among refugees including water kits to support safe drinking water storage and handling at household level and hygiene kits, catering appropriately to the needs of women and adolescent girls;
- Provision of winterisation items to ensure availability of hot water for basic needs;
- Sanitary decommissioning of temporary water and sanitation facilities as required, in an environmentally appropriate manner.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. WASH interventions targeted affected populations are effectively coordinated at the national and sub-national levels in close collaboration with other sectors.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Functional WASH sector coordination mechanism at national and sub-national levels	160000	90000	0	KRG, Center	1.430.105	1.072.579	286.021	71.505	UNICEF, UNHCR, UNHABITAT, WHO and national and international partners including ACF, ACTED, AFKAR, Barzani Humanitarian Foundation, CDO, DRC, Harikar, IRC, IRCS/ FRC/ICRC, IRW, FPA, KURDS, MSF, NRC, Qandil, UPP, PU-AMI, Relief International and Save the Children
Objective 1	160.000	90.000			1.430.105	1.072.579	286.021	71.505	

Objective 2. Affected populations have timely, equitable and sustainable access to sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene.

Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Adequate water supply services for the affected people living in camps & non camps are provided and being well operated and maintained	160000	90000		KRG, Center	38.612.840	17.375.778	17.375.778	3.861.284	UNICEF, UNHCR, UNHABITAT and national and international partners including ACF, ACTED, AFKAR, Barzani Humanitarian Foundation, CDO, DRC, Harikar., IRC, IRCS/FRC/ICRC, IRW, KURDS, MSF, NRC, Qandil, Relief International
Output 2.2 Quality of water supplied in camps and host communities is monitored for compliance with agreed standards on bi-weekly basis	160000	90000		KRG, Center	4.290.316	1.930.642	1.930.642	429.032	UNICEF, WHO, UNHABITAT and national and international partners including ACF, DRC, IRC, MSF, NRC, Qandil, Relief International
Objective 2	160.000	90.000			42.903.155	19.306.420	19.306.420	4.290.316	

Objective 3. Affected populations have access to safe, sanitary and hygienic living environment through provision of sanitation services that are culturally appropriate, secure, sanitary, user-friendly and gender-appropriate.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Adequate sanitation services (latrines, bathing units, hand washing and laundry facilities and wastewater collection and disposal system) of facilities for the affected people living in camps are provided and being well operated and maintained	160000	90000		KRG, Center	65.641.827	19.692.548	39.385.096	6.564.183	UNICEF, UNHCR , UNHABITAT and national and international partners including ACF, ACTED, AFKAR, DRC, IRC, IRCS/FRC/ICRC, IRW, KURDS, MSF, NRC, Qandil and PU-AMI
Output 3.2 Adequate system for collection and disposal of solid waste in camps and host communities is provided and functional	160000	90000		KRG, Center	11.583.852	5.212.733	5.212.733	1.158.385	UNICEF , UNHABITAT and national and international partners including ACF, ACTED, AFKAR, DRC, IRC, NRC, Qandil, RI and PU-AMI
Objective 3	160.000	90.000			77.225.679	24.905.282	44.597.830	7.722.568	

Objective 4. . Affected populations have reduced risk of WASH-related diseases through access to improved hygienic practices, effective community mobilization to address harmful current practices, hygiene promotion, and delivery of hygiene products and services on a sustainable and equitable basis.

Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 4.1 All the affected people in camps and host communities receive WASH NFI (hygiene, water and winterization kits) with awareness messages on safe hygiene practices	160000	90000		KRG, Center	17.161.262	4.290.316	8.580.631	4.290.316	UNICEF, ACF, AFKAR, CDO, DRC, IRC, IRW, FPA, MSF, NRC, UPP, Qandil, Relief International and Save the Children
Output 4.2 Adequate water and sanitation services for schools and child friendly spaces, clinics in camps and host communities are provided and being well operated and maintained	62400	35100		KRG, Center	4.290.316	1.072.579	2.145.158	1.072.579	UNICEF, UNHABITAT, ACF, AFKAR, CDO, DRC, IRC, IRW, FPA, MSF, NRC, Qandil, PU-AMI, Relief International and Save the Children
Objective 4	160.000	90.000			21.451.578	5.362.894	10.725.789	5.362.894	

Sector indicators	Target
"# of WASH sector coordination mechanisms at nation and sub-national levels that are performing and fulfilling the 6 core function of a coordination platforms	24
# of emergency affected population provided with access to drinking and domestic water	250.000
# of emergency affected population with access to appropriately designed toilets and sanitation services	250.000
# of emergency affected population provided with access to soap and other hygiene items.and receive messages on safe hygiene practices	250.000
# of childrenwith access to safe water, sanitation and hygiene facilities in their learning environment and in child friendly spaces	97.500

WASH - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	85.806.311	30.388.305	44.949.636	10.468.370	57.204.206

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

WASH in Iraq (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	6,031,035	3,618,621	2,412,414
ACTED	1,034,483	620,690	413,793
DRC	3,793,104	2,275,862	1,517,242
FRC/IRCS	5,379,310	3,227,586	2,151,724
IRC	6,089,655	3,653,793	2,435,862
IRW	3,335,835	2,035,862	1,299,973
NRC	3,448,276	2,068,966	1,379,310
PU-AMI	827,586	496,552	331,034
QANDIL	2,075,863	1,245,518	830,345
RI	4,586,206	2,751,724	1,834,482
SCI	2,827,586	1,696,552	1,131,034
UN-Habitat	3,103,448	1,862,069	1,241,379
UNHCR	31,945,862	19,167,517	12,778,345
UNICEF	67,383,303	40,395,620	26,987,683
UPP	286,896	172,138	114,758
WHO	862,069	517,241	344,828
Total	143,010,517	85,806,311	57,204,206

N. Iraq Financial Requirements Summary

Table 1: Country Financial Requirements per Agency

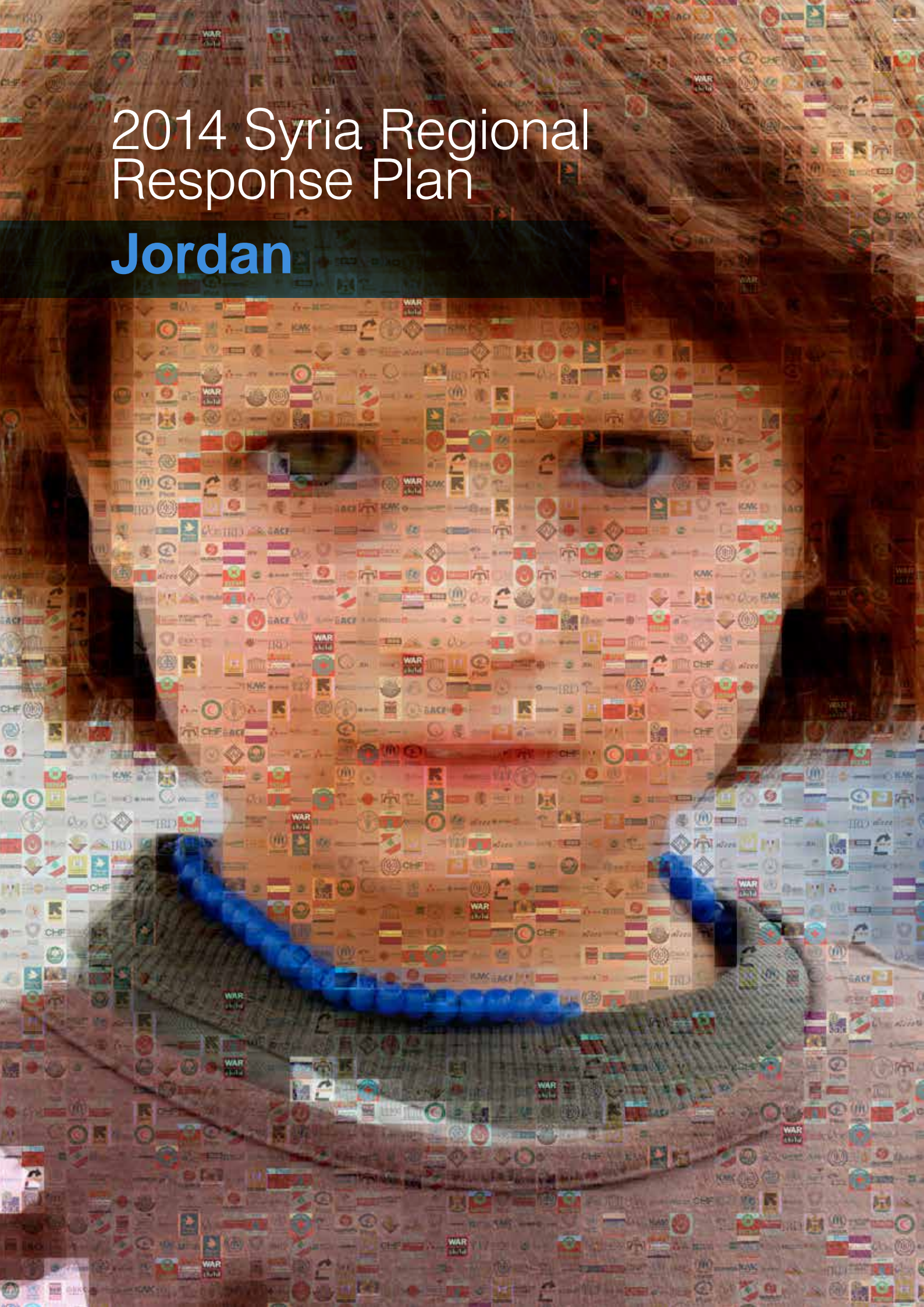
Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	12,568,635	6,887,421	5,681,214
ACTED	11,066,443	6,144,350	4,922,093
DRC	22,087,104	9,747,862	12,339,242
FAO	3,739,435	2,333,635	1,405,800
FRC/IRCS	5,379,310	3,227,586	2,151,724
HAI	400,000	200,000	200,000
HI	1,680,000	1,000,000	680,000
IMC	656,900	328,450	328,450
INTERSOS	2,305,000	1,152,500	1,152,500
IOM	25,468,000	12,234,000	13,234,000
IRC	22,170,255	12,546,893	9,623,362
IRW	3,335,835	2,035,862	1,299,973
KURDS	1,940,000	1,420,000	520,000
MAG	1,500,000	925,000	575,000
Mercy Corps	5,552,115	3,974,654	1,577,461
NRC	19,878,366	11,731,011	8,147,355
PEOPLE IN NEED	404,000	320,000	84,000
PU-AMI	3,247,586	1,706,552	1,541,034
QANDIL	2,075,863	1,245,518	830,345
RI Relief International	8,278,706	4,992,224	3,286,482
SC KR-I	150,000	100,000	50,000
SCI	9,855,523	5,530,481	4,325,042
STEP	250,000	100,000	150,000
TGH TRIANGLE GH	2,440,800	1,242,800	1,198,000
UNDP	10,381,810	5,943,305	4,438,505
UNESCO	14,624,998	7,654,499	6,970,499
UNFPA	5,800,000	3,000,000	2,800,000
UN-Habitat	11,103,448	5,862,069	5,241,379
UNHCR	133,353,993	64,104,430	69,249,563
UNICEF	105,446,803	64,847,338	40,599,465
UPP	1,660,946	942,232	718,714
WarChild UK	499,000	299,000	200,000
WARVIN	259,000	129,500	129,500
WFP	94,132,785	37,195,340	56,937,445
WHO	8,845,569	6,350,741	2,494,828
Total	552,538,228	287,455,253	265,082,975

Table 2: Country Financial Requirements per Sector

Sector	Total 2014	Jan-Jun 2014	Jul-Dec 2014
CRI	62,261,757	20,684,932	41,576,825
Education	39,204,302	24,618,369	14,585,933
Food	99,613,626	41,304,175	58,309,451
Health and Nutrition	29,722,000	19,217,000	10,505,000
Livelihoods	49,223,446	26,638,271	22,585,175
Protection	66,984,378	37,927,094	29,057,284
Shelter	62,518,202	31,259,101	31,259,101
WASH	143,010,517	85,806,311	57,204,206
Total	552,538,228	287,455,253	265,082,975

2014 Syria Regional Response Plan

Jordan





2014 Syria Regional Response Plan

Jordan

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Jordan Response Plan

OVERVIEW

A. Executive Summary

Under the leadership of the Government of Jordan (GoJ) and coordinated by UNHCR, the refugee response is a collaborative effort between the donor community, UN agencies, international and national NGOs, community-based organizations, refugees and Jordanian communities.

The total requirements for the Jordan RRP6 in 2014 are US\$1,200,650,591 requested by 64 organizations, through 1,265 project submissions across the eight sectors¹ of Water, Sanitation and Hygiene (WASH), Cash, Education, Food Security, Health, Non-Food Items (NFIs), Protection, and Shelter. In addition, the GoJ has presented projects totalling US\$413,787,018 for prioritized needs in the municipalities and the Education, Health and Water sectors.

This budget is calculated on the projected needs of an expected 800,000 refugees who will be protected in Jordan by the end of 2014, and includes assistance that will reach over two million Jordanians affected by the presence of refugees.

The projection of 800,000 refugees represents an increase of 250,000 from the total of 550,000 refugees currently registered by UNHCR in early November 2013 as residing in Jordan. Based on the age and gender breakdown of the current refugee population, the projected number of refugee women by the end of 2014 is 196,800 (25.6 per cent), including 15,200 elderly (1.9 per cent); men 167,200 (20.9 per cent), including 10,400 elderly (1.3 per cent); girls 210,400 (26.3 per cent), including 73,600 under five years old (9.4 per cent); and boys 217,800 (27.2 per cent), including 75,200 under five years old (9.2 per cent).

It is assumed that 75 per cent of refugees (600,000) will be accommodated outside of camps, and 25 per cent inside camps (200,000).

Reflecting the urgent need to relieve the pressure on services and resources and maintain protection space in Jordan, the RRP6 has a significant component of support to Jordanian host communities. Many interventions in urban areas for the benefit of refugees will also be of direct benefit to Jordanians living in the same areas – especially support to services and infrastructure. The RRP6 also includes humanitarian projects that primarily target Jordanians.

1 While sectors are also referred to as Working Groups, in this country chapter, they will be referred to as Sectors

Support to refugees in camps comprises 32 per cent of the RRP6 budget, compared to 68 per cent supporting refugees and host communities in non-camp settings in urban and rural areas. The nature of the provision of assistance and services in camps is intensive and relatively costly (US\$1,900 per refugee per year²), reflecting the full package of services and assistance received. In urban areas, where assistance packages target both vulnerable households and build on existing services, the cost will be US\$980 per refugee. The numbers of Jordanians who will benefit from the RRP6 varies depending on the type of support provided. As examples, several million Jordanians will receive vaccinations. Over 700,000 will benefit from projects that will support absorption capacity at the municipal level, including improved services in health care, extension of waste water systems, and support to municipal solid waste management. Almost 40,000 Jordanian children will benefit from education supplies, while more 60,000 Jordanians will be targeted with hygiene promotion. More details are available in each sector response plan.

To account for the evident uncertainty in the refugee planning figures, a review mechanism will be established within the Jordan RRP6 process. This will allow for periodic review and validation of figures and assumptions. In addition, the Jordan refugee response coordination will be maintaining and updating a contingency plan, independent from the main RRP document, for an additional 200,000 refugees arriving over a one-month period.

B. Context

The year of 2013 witnessed a massive arrival of refugees fleeing Syria into Jordan.³ In total, 250,000 Syrian refugees were welcomed by Jordan between January and October 2013, at an average of 26,000 per month. The peak months were between January and April (Jan: 49,248; Feb: 62,441; Mar: 46,096; Apr: 44,765), with up to 4,000 refugees arriving in one day. Since June 2013, however, the monthly arrival rate has dropped significantly below the average, with as few as 2,500 arriving in August, and 4,000 arriving in September.⁴ The Government maintains an open border policy. Nonetheless, it is now apparent that refugees face increased challenges to reach the border and crossing to safety.

With those refugees who arrived prior to 2013, the total number of refugees registered with UNHCR has reached 550,000, with no backlog pending registration. As of 5 November, 25.6 per cent of registered refugees were women (including 1.9 per cent elderly); 20.9 per cent were men (including 1.3 per cent elderly); 26.3 per cent were girls (including 9.4 per cent under five); and 27.2 per cent were boys (including 9.2 per cent under five). The main place of origin is Dar'aa (53.4 per cent), followed by Homs (14.9 per cent), Rural Damascus (7.5 per cent) and Hama (4.4 per cent). This represents a shift since March 2013, when 68 per cent of refugees originated from Da'raa, reflecting how an increasing number of refugees entering Jordan originate from central and northern areas of Syria.

2 These figures are calculated based on the proportion of the RRP6 funds designated for Syrians in camps or in urban areas. They represent a 'projection' of the total cost in 2014, should the RRP6 be fully funded.

3 Editorial note: Assumes that "Hashemite Kingdom ..." and "Syrian Arab Republic" are spelt out in early section of the RRP.

4 IOM Transportation figures, representing number transported from the Government screening centres in Mafraq and now Rabaa Al-Sarhan, to the refugee camps.

Refugees are received and assisted at the border by the Jordanian Armed Forces (JAF). The JAF transfer the refugees to a screening centre at Rabaa Al-Sarhan, before onward transport to the refugee camps. On arrival in the camps, refugees are registered, receive medical screening, are assisted with food, NFIs, shelter, and are provided access to water and sanitation, education, psycho-social and other services.

Approximately 20 per cent of Syrian refugees reside in refugee camps. The largest refugee camp is Zaatari, administered by the GoJ-appointed Syrian Refugee Camp Directorate (SRCD), with the support of UNHCR. More than 350,000 Syrians have been registered in Zaatari camp since its opening in July 2012. A large number of refugees have subsequently left Zaatari to urban and rural areas in Jordan. This includes departures facilitated through a legal system of sponsorship by Jordanians, through Government-organized return to Syria, and through refugees simply moving out of the camp. The GoJ estimates that over 90,000 Syrians have returned to Syria in 2013, although many of these may have subsequently re-entered Jordan. Following a GoJ-UNHCR joint verification in November 2013, an estimated number of 75,000 refugees (women 25.3 per cent; men; 18.7 per cent; girls 28.6 per cent; boys 27.5 per cent) were living in the camp.⁵

A series of smaller sites house refugees, including King Abdullah Park (821 refugees; women 21.2 per cent; men 21.3 per cent; girls 25.9 per cent; boys 31.6 per cent) and Cybercity (202 refugees; women 31.7 per cent; men 16.8 per cent; girls 24.9 per cent; boys 27.3 per cent). The Emirati Jordanian Camp (EJC, previously Mreijeb Al-Fhoud or MAF) opened in April 2013, currently accommodating 3,885 refugees (women 22.8 per cent; men 9.1 per cent; girls 31.3 per cent; boys 29.7 per cent), and with a capacity of up to 5,000 persons.

In late March 2013, the GoJ approved the construction of another sizeable camp near Azraq. As of October 2013, Azraq is ready to receive refugees, with a capacity of 52,000 in the first phase and a potential of up to 130,000 persons in total. Due to lower arrival rates since mid-May, for the present, Azraq is being kept in a state of readiness in the event of an increase in refugee arrivals.

In total, it is estimated that up to 200,000 refugees will be sheltered in camps at any one time in 2014. The phenomenon of refugees moving from these camps to urban areas, to then be replaced by new arrivals, means that the cumulative numbers of persons actually assisted in the camps could be significantly higher than 200,000.

Approximately 80 per cent of Syrian refugees are living in non-camp settings in urban and rural areas. As of November 2013, there are 420,000 refugees residing outside of camps. The highest concentrations are in northern and central Jordan. These include Amman (25 per cent) Irbid (23 per cent), Mafraq (11 per cent) and Zarqa (8 per cent). Smaller but significant concentrations are in Balqa (3 per cent), Jerash (2 per cent), Ajloun (2 per cent), Karak (2 per cent), Madaba and Ma'an (1 per cent each).

⁵ Zaatari verification figures are presented as a projected percentage, applying the breakdown for the current registration data (110,000) to the estimated 75,000.

Jordan has a population of six million people. The current Syrian refugee population constitutes almost an additional 10 per cent to this population. The projected 800,000 refugees by the end of 2014 would increase this to 13 per cent. The ratio of Syrians to Jordanians in some governorates in the north has surpassed 10 per cent (with Mafraq governorate at 60 per cent if refugees in camps are included).

Syrians in urban areas purchase water, electricity and shelter through the Jordanian market, and are granted access to public services, including health and education. This has resulted in additional pressure on Jordan's scarce resources. The surge in population has stretched the ability of local authorities to maintain service delivery, resulted in over-crowded labour markets, and induced considerable additional public expenditure. Schools and hospitals are running well beyond capacity, with 77 schools currently double-shifting in order to accommodate Syrian children. Significant numbers of Syrian refugees may be working in Jordan, primarily in the construction, agriculture and service sectors, although without work permits. Competition for jobs has driven wages down, in parallel to increases in prices for basic necessities, fuel and rental accommodation.⁶

6 World Bank, *Emergency Assistance for Jordan to Cope with Impacts of Syrian Crisis*, July 2013.

C. Needs, vulnerabilities and capacities

A high proportion of Syrian refugees arriving are families (97% of refugees). On average, there are approximately five individuals in each household.⁷ In Syria, traditionally, men are expected to provide for and protect their families. There are significant numbers of households where men are absent, although often these households are connected to male relatives of the husband/father. Traditionally, women are expected to care for their family within the home and, depending on the wealth of the family, undertake subsistence work for the daily survival of the family. Girls and boys are expected to attend and perform well at school, although often in rural areas of Syria boys are not expected to complete secondary education and are expected to work in order to contribute to the family income. In some areas of Syria, adolescent girls are expected to leave school to contribute to the family through domestic chores, or they may marry at a young age. During the conflict, women, girls, boys and men were exposed to loss of family and friends, physical injury and sexual violence, and were restricted from meeting their basic needs.

While in displacement, family roles have changed. Children – boys in particular, but also girls – are entering the labour market at the expense of their education. Refugees report that many men are not able to get work, contributing to psychological disorders and to violence within the home and outside. Some report that the collection of available assistance by women is in conflict with ascribed roles, and there are reports of harassment. Households headed by women, girls and boys are reportedly more vulnerable than those headed by men due to cultural difficulties in negotiating entitlements. It is not uncommon for these households to band together or to seek shelter with a household headed by a man in order to secure social protection.

In the camps, refugees are more vulnerable and dependent on the provision of assistance and services across the different sectors. These needs will continue into 2014, although improvements in efficiency and quality will be made. Participatory assessments have identified, for instance, the need to strengthen access for female-headed households, persons with disabilities and older persons to registration, distributions and services. Women, girls, boys and men need to be enabled to participate in the design, implementation, monitoring and review of services in the camp.

Shifts towards market-based programming, most notably by WFP through food vouchers and UNHCR through cash assistance, have already empowered refugee choice and similar initiatives are planned in other sectors. Currently, economic opportunities for refugees are limited in the camps, linked primarily to engagement by humanitarian agencies or informal trade. A recent ACTED Household Economic Survey in Zaatari camp showed that humanitarian assistance does not cover all basic household needs. Households recorded an average income gap of US\$82 per month, with main expenditures on food and hygiene items.⁸ Refugees report using up savings (16 per cent of income source) and selling part of any in-kind humanitarian assistance (27 per cent of income source) to cover this gap. Women in particular have limited income sources, with only 4 per cent reporting economic occupations in the camp. This income

7 Analysis of UNHCR Registration data indicates an average of 4.5 per household. For Zaatari camp, the average number is higher – at 5.58 per household.

8 ACTED, *Zaatari Household Economic Survey*, August 2013.

gap in turn has led to a cycle of asset depletion, which may expose some vulnerable refugees to negative coping mechanisms, including child labour, early marriage and survival sex.⁹

Around 15,000 pre-fabricated caravans have been provided in Zaatari; however, several thousand families still live in tents. The generous donations of caravans have dropped in the last quarter, compared to earlier in 2013. Harsh weather conditions, in both the summer and winter, require timely and targeted responses across the sectors.¹⁰ The distance from WASH facilities, schools and hospitals, coupled with transportation costs,¹¹ limit access to services for some groups, including pregnant women, older persons and persons with disabilities.

The security situation in Zaatari has improved in the second half of 2013, due in part to increased capacity of the GoJ through the SRCD, and greater community engagement by humanitarian organizations. However, security challenges remain. Violence and harassment of women, girls, boys and men are reported in public areas and inside households. Women and girls have reported feeling unsafe going to WASH facilities in camps due to the lack of lighting, harassment and fear of assault, and girls and boys report harassment on the way to, and inside, schools. In assessments conducted in 2013, parents reported being afraid to let children play outside,¹² while the presence of criminal elements inside the camp has contributed to the risks of exploitation and to fear of leaving the home. Further gains in security must be pursued to ensure protection standards are met. This includes expanding SRCD presence in the districts, and strengthening humanitarian organizations' engagement and communications with – and accountability to – refugees. Specific points of frustration and potential violence need to be addressed, such as the retrieval of personal identity documents and logistics in relation to the GoJ's return programme to Syria.

In urban and rural areas, community groups and the generosity of Jordanian neighbours have supported many of the most vulnerable Syrian households, in addition to aid from humanitarian agencies and charities. As these community coping mechanisms and safety nets are saturated, vulnerabilities will become exacerbated and community tensions may rise. Only 10 per cent of urban refugee households report having at least one employed family member.¹³ Refugees rely on humanitarian assistance, personal saving and remittances as income sources.¹⁴ Refugee households have higher dependency ratios than Jordanian or pre-conflict Syrian households (58.5 per cent, versus 48.2 per cent pre-conflict Syria and 49.8 per cent Jordan. The ratio in Zaatari

9 UNHCR, *Participatory Assessment: Zaatari Refugee Camp*, April 2013.

10 See Shelter Sector Response plan, below.

11 ACTED, *Zaatari Household Economic Survey*, August 2013.

12 Child Protection and Gender-Based Violence Sub-Working Group Jordan, *Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Zaatari Refugee Camp*, March 2013; UNICEF, *Syrian refugee children in Jordan: Desk Review*, October 2013.

13 UNHCR, *Syrian Refugees in Jordan: Needs, Targets, Gaps*, September 2013 (based on ACTED/REACH household assessment).

14 Oxfam, *Integrated Assessment of Syrian Refugees in Host Communities*, March 2013. Quoted in WFP, *Food Security Desk Review*, October 2013.

alone is 60.8 per cent).¹⁵ Financial debt is also common among urban and rural refugees; between 50¹⁶ to 70¹⁷ percent of the overall refugee population is reported to carry some debt.

For the few refugees who have been able to find more regular casual work, these opportunities tend to be illegal, scarce, exploitative and insufficient to support their livelihoods, since Syrians are not allowed to work without a valid work permit.¹⁸

Approximately 75 per cent of refugee households are living in rented accommodation. Refugees perceive cost and availability as the main obstacles to accessing adequate shelter.¹⁹ Food and shelter/rent are reported as the highest monthly expenditures.²⁰ Refugees cite basic household items as among their highest unmet needs.²¹ The limited livelihood opportunities and rising market prices have resulted in a significant income gap – between JOD 230 to 400 per household per month.²²

Resulting negative coping mechanisms have included:

- Reliance on less preferred and less expensive food; reduction in number of meals; limited portion size; borrowing to pay for food; adults foregoing food in favour of younger children.²³
- Refugees move to poorer areas of Jordan where rent is cheaper. The overstretching of local resources in such areas further fuels tensions between communities.²⁴
- More families are sending their children to work to help offset rising living costs and diminishing assets and foreign remittances. An estimated 30,000 children, mainly boys, are engaged in child labour in Jordan, which is approximately one in six children (16 per cent of children). This is four times higher than the pre-crisis rate in Syria of 4 per cent.²⁵

15 UNHCR, *Syrian Refugees in Jordan: Needs, Targets, Gaps*, September 2013. Calculated based on total under 18 and over 60, divided by total population.

16 UNHCR & WFP, *Joint Assessment Mission of Syrian Refugees in Jordan*, June 2013.

17 CARE International, *Syrian Refugees in Urban Jordan*, April 2013.

18 UNHCR & WFP, *Joint Assessment Mission of Syrian Refugees in Jordan*, June 2013. See WFP, *Food Security Desk Review*, October 2013.

19 REACH, *Syrian Refugees in Host Communities: Key Informant Interviews*, October 2013.

20 REACH, *Syrian Refugees in Host Communities: Key Informant Interviews*, October 2013.

21 Based on responses from 70,000 Home Visits, by UNHCR and IRD in 2012 and 2013.

22 The Hashemite Kingdom of Jordan Department of Statistics, 2013.; UNHCR/IRD, *Home Visits Analysis*, November 2013.

23 WFP Jordan, *Monthly Monitoring Report: July at a Glance*, July 2013.

24 Mercy Corps, *Analysis of Host Community-Refugee Tensions in Mafraq, Jordan*, October 2012.

25 UNICEF Education Section & Save the Children Jordan, *Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid*, 18 Feb – 20 Mar 2013. Quoted in UNICEF, *Syrian Refugee Children in Jordan: Desk Review*, October 2013.

- Intra-households tensions which sometimes result in domestic violence.²⁶
- Transactional or survival sex, as well as forced and early marriage, are reported, but the challenges in reporting these issues, which include cultural barriers and isolation of Syrian girls and women inside the home, make it difficult to know the extent.²⁷

Refugee women and girls in urban and rural areas report that they experience limited privacy and personal space because of their crowded living conditions. More than 40 per cent of women and girls report that they spent significant amounts or even all of their time inside the home due to perceived security risks or because they are restricted in their ability to leave the home without a male family member.²⁸

There are some 190,000 Syrian school-aged children in Jordan based on UNHCR registration data as of September 2013. In part due to a recent “Back to School” campaign jointly carried out by UNICEF, the Ministry of Education (MoE) and Save the Children Jordan, over 83,000 children (44 per cent of eligible children) are enrolled in public schools (primary education) in both camp and non-camp settings as of late September 2013. With 90 per cent of Syrian children concentrated in four governorates (Mafraq, Irbid, Amman, and Zarqa), the pressure on public schools in these locations is extremely high. The joint absorption capacity mapping exercise carried out by the MoE and UNICEF revealed that over 120 schools were identified as overcrowded and after field visits, 77 schools were prioritized to be double-shifted. Needs for adolescent boys and girls remain a clear gap, specifically due to limited access to overcrowded or distant schools and lack of social activities. Ensuring children with disability have access to education opportunities is also prioritized within the Education Sector.

The majority of urban refugees (89 per cent) are accessing municipal services for garbage disposal, although these are infrequent and overstretched. 70 per cent are using piped municipal water as the primary water source, however over half of households are receiving water through this network less than once a week. Gaps in municipal services are supplemented by private water tankers and other purchases.²⁹ Sewage services only cover about one-third of the population and mainly in urban centres.³⁰ Septic tanks are often in an inadequate state.³¹ Families living in temporary shelters in rural areas are particularly vulnerable – they are least likely

26 UNICEF, *Syrian Refugee Children in Jordan: Desk Review*, October 2013.

27 UNICEF, *Syrian Refugee Children in Jordan: Desk Review*, October 2013.

28 UNICEF, *Syrian Refugee Children in Jordan: Desk Review*, October 2013.

29 REACH, *Syrian Refugees in Host Communities: Key Informant Interviews*, October 2013; REACH, *Findings of Household Assessment of Syrian Households in Host Communities in the northern governorates*, 2013.

30 Oxfam GB, Jordan, *Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection*, March 2013 (t-refers to Yarmouk Water Company data).

31 WASH Working Group Jordan, *Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results*, October 2013.

to have piped water or septic tanks, are at increased risk of bad water quality, likely to have a latrine outside their home or no latrine, and have the lowest levels of hand-washing practice.³²

As a result of the efforts of the Ministry of Health (MoH), UN and NGO health organizations, mortality and acute malnutrition rates are not currently elevated among Syrian refugees. Refugees are in general able to access basic primary health care, both in camp and non-camp settings. The demographic and disease profile of Syrian refugees is that of a middle-income country, characterized by a high proportion of chronic or non-communicable diseases (e.g. diabetes, cancer, cardiovascular and respiratory disease), which are costly and complex to manage and which place considerable pressure on the limited resources available for secondary and tertiary care. A Health Facility Assessment in the five northern governorates of Irbid, Mafraq, Jerash, Ajloun and Balqa demonstrated that 9 per cent of total patient visits were by Syrians. This manifests in shortages of medications – especially those for chronic diseases – and beds, overworked staff and short consultation times. Refugees in urban areas have cited distance and ensuring updated registration status as challenges to accessing health services.³³ Following a declared polio outbreak in Syria, with 17 reported cases as of mid-November, there is a need to ensure immunization of children under five in Jordan, with coordinated campaigns targeting not only Syrian refugees but also Jordanians and other members of the host community.

Jordanians residing in areas with a high concentration of Syrian refugees are also vulnerable to market dynamics and other constraints. About 900,000 Jordanians (approximately 14 per cent of the population) are living below the official poverty line. In some poor areas, rent has increased substantially from around JOD 50 up to JOD 200, while prices of basic commodities have also been affected. Limited employment opportunities, over-stretched social services, ineffective safety nets and lack of assistance compound existing vulnerabilities. Vulnerability factors at the Jordanian household level include families headed by women, girls and boys; those with elderly members; large families; those with higher food expenditure, and dependence on unskilled casual labor.³⁴

A recent impact analysis by the Ministry of Planning and International Cooperation (MoPIC) underlines the costs of the Syrian refugee crisis on Jordan. The GoJ estimates that more than US\$152.4 million is needed to provide subsidized items to a refugee population of 600,000 (US\$19.2 million for water, US\$23 million for flour³⁵, US\$93.6 million for electricity, and US\$16.6 million for household gas). For education, the annual cost of each student enrolled in the primary and basic stages is US\$877, increasing to US\$1,995 for the secondary stage. To cover an additional 80,000 students, the annual cost would be US\$81.4 million. According to MoH estimations, the cost of providing annual primary and tertiary health services reaches US\$206 and US\$655 per patient, respectively.

32 Oxfam GB, Jordan, *Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection*, March 2013.

33 REACH, *Syrian Refugees in Host Communities: Key Informant Interviews*, October 2013; REACH, *Findings of Household assessment of Syrian Households in host communities in the northern governorates*, 2013.

34 FAO, *Agricultural Livelihoods and Food Security Impact Assessment and Response Plan for the Syria Crisis in the Neighboring Countries of Egypt, Iraq, Jordan, Lebanon and Turkey*, March 2013.

35 WFP pays the full, unsubsidized price for all bread distributed in Zaatari camp.

Given that approximately 32 per cent of patients will require primary and tertiary care, the expected number of Syrian patients would be around 190,000 with a total cost reaching US\$167.8 million. According to the Ministry of Water and Irrigation, the annual running and maintenance cost is around US\$102.3 per capita, meaning the total running cost to cover the needs of more than 600,000 Syrian refugees reaches around US\$62 million annually.

Together with increased costs on municipal services, civil defence and security, and while acknowledging both humanitarian aid and direct budget support from donor countries, the GoJ estimates the gross cost of hosting 600,000 refugees – not including the projected 200,000 in camps – at US\$1.68 billion.³⁶

36 The Hashemite Kingdom of Jordan, Ministry of Planning and International Co-operation, *Impact of Hosting Syrian Refugees*, October 2013.

D. Response strategy and priorities

The Strategic Objectives for Jordan, reviewed by the GoJ and the UNHCR-chaired Inter-Agency Task Force (IATF), are as follows.

- 1) Strengthen the protection of women, girls, boys, and men³⁷ affected by the Syrian crisis in Jordan, including through advocating for international burden-sharing, ensuring access to the territory and registration of Syrian refugees, preventing *refoulement*, and by preventing and responding to violations of protection norms, with a particular emphasis on child protection (CP) and sexual and gender-based violence (SGBV).
- 2) Ensure the effective protection, reception of and assistance to Syrian refugees in camps, with an emphasis on maintaining humanitarian standards across all sectors while moving towards more efficient, participatory and sustainable methods of delivering assistance.
- 3) Provide protection and humanitarian assistance to vulnerable refugees in non-camp settings in urban and rural areas in a targeted and equitable manner across all sectors.
- 4) Reinforce the resilience of host communities, through support to basic services benefiting both host populations and refugees in urban and rural areas in the immediate term, increasing awareness of, equitable access to, and the quality of such services.
- 5) Strengthen linkages between RRP6 activities and medium and longer-term host community resilience plans being undertaken by the GoJ and international development actors, including through the collection, analysis and sharing of information on refugee and host communities, available to the humanitarian community.

The Syrian refugee crisis in Jordan will require a combination of emergency response, care and maintenance, pursuit of resettlement and burden sharing, and linkages to more sustainable delivery mechanisms occurring simultaneously. This implies that the response should have elements of “life-saving” interventions, activities that prevent further deterioration of vulnerabilities, and more constructive investment in capacity building of communities. It should also remain flexible in its ability to respond to sudden changes in the operational context.

A key planning assumption is that the GoJ will maintain its open border policy, and will continue to be supported to receive and transport refugees in a safe and dignified manner. Registration will take place at the Rabaa Al-Sarhan centre, before onward travel to the camps. IOM has transported over 350,000 refugees from the borders to the camps since 2012, and plans to transport an additional 250,000 in 2014.

Registration is crucial to ensuring access to protection and services for refugees, and is critical in order to preserve the integrity of humanitarian programmes, to identify specific needs of individuals

³⁷ This disaggregation is applicable across all subsequent mention of the terms “refugees” or “communities”.

and to refer them to geographically close service providers. In 2014, the GoJ and UNHCR will engage in Joint Registration, including the capturing of biometric data.

With considerable lessons learned from the Zaatari experience, Azraq will become the primary location for the reception of new arrivals. Civil works are completed for large areas of the camp, WASH, health and shelter infrastructure is in place, and protection and community support procedures have been established. The early and sustained engagement with new arrivals as communities will be a crucial element of Azraq camp management.

The focus of the response in Zaatari will be on consolidation of security and administration, as well as on more efficient and sustainable assistance delivery. Market-based programming principles will be injected, where appropriate and feasible, into assistance and service delivery – including increased use of vouchers for food and non-food items. Building on gains from 2013, the decentralization of camp administration to 12 zones will be completed, with district teams of Government, UN and NGO staff. Empowered refugee committees, sensitive to gender, age and disability, will work with these teams. With improvements in security already underway, the SRCD will be supported to have more oversight of service provision and camp administration. Community outreach, enhanced mass communications, and identification of persons with specific needs, including refugees with disabilities, as well as timely and efficient referrals of vulnerable Syrians to geographically close service providers will remain a key element of the response.

Contingency Plans for a large-scale influx that would surpass existing reception will be developed and maintained as an annex to the Jordan RRP6 country chapter.

For non-camp refugees in urban and rural areas, coverage will be expanded across the different sectors, while, in parallel, common vulnerability criteria and situation analysis improves targeting. In the Cash, Health and Food Security Sectors, specific vulnerability analysis is already underway, and will be harmonized across the sectors moving into 2014. Sectors will use targeted cash assistance as a means to counter the depletion of refugee assets, in an environment that restricts gainful employment, in the expectation that women, girls, boys and men are less likely to have to resort to harmful coping strategies as a means of survival. Men and women have both reported that cash assistance provides them with the dignity in defining their own priorities. The continued transition to food voucher assistance in Zaatari camp is essential in order to enable greater choice to refugees in the food they consume.

Urgently needed capacity support to host and refugee communities and to Government services in all sectors – in particular Food Security, Education, Health and WASH – in the immediate term will set the stage for longer-term investments by development actors. Shelter initiatives will include repairs to and expansion of refugee and host community dwellings. Protection actors will continue to support the development of decentralized services, particularly for survivors of SGBV and children at risk. Projects will also aim to promote peaceful coexistence with refugees and host communities, both through the expansion of available resources and services, and through community engagement.

Enhancing the existing capacity of the GoJ to respond to the immediate crisis is an integral part of the RRP6. This includes financial, logistics and technical support, from skills training, provision of materials, equipment and medicines, and capacitating of Government service providers, to supporting GoJ delivery of security and protection in camps, urban and rural areas.

In response to the polio outbreak in Syria, a prevention and response strategy has been developed by the MoH, WHO, UNICEF, UNHCR and other actors in Jordan. Building upon the Zaatari oral polio vaccine campaign in October and November 2013 and the national immunization campaign conducted in November, an additional four national immunization campaigns are planned for 2014, targeting all children under five including Syrians in camp and non-camp settings, Jordanians and other members of the host community. The strategy includes strengthening active and passive surveillance for acute flaccid paralysis cases, introducing environmental surveillance, establishing three walk-in cold rooms and enhancing social mobilization for immunization.

UNHCR will pursue appropriate durable solutions, including targeted resettlement or humanitarian admission for up to 3,000 of the most vulnerable Syrian refugees in Jordan.

Based on a prioritized list of interventions, the Government of Jordan is appealing for US\$413,787,018 under the RRP6, in particular in the sectors of Health, Education, Water and delivery of municipal services.

E. Partnerships and coordination

All levels of the GoJ are engaged in the response, from the Office of the Prime Minister, the Ministry of Foreign Affairs, the Ministry of Interior (MoI) and MoPIC, to the line ministries working with each of the sectors, and the governorates and municipalities in refugee-affected areas. In 2013, the GoJ established the SRCD, under the MoI, to coordinate support to camp-based refugees.

Sixty-four humanitarian organizations are appealing under the RRP6 umbrella for Jordan, working through the eight aforementioned sectors. Protection is sub-divided into sub-sectors for SGBV, Child Protection (CP) and Mental Health and Psycho-Social Support (MHPSS), which is also part of the Health Sector. The Health Sector is divided into sub-sectors of MHPSS, Reproductive Health (RH) and Nutrition. At camp level and in urban and rural areas, a number of multi-sector fora exist, while the sectors also operate through location-specific meetings. Coordination will be further decentralized in 2014, in particular to urban areas, to ensure that decision-making is closest to the target beneficiaries.

UN agencies and NGOs chair the sectors and sub-sectors, including UNHCR (Protection, Health, Cash, NFIs, Shelter; Nutrition, CP and SGBV); UNICEF (WASH, Education and CP); WFP (Food Security); JHCO (Food Security); UNFPA (SGBV and RH); WHO (Health and MHPSS); NRC (Shelter and NFIs); CARE (Cash); IRD (Protection); Save the Children (Education); and International Medical Corps (MHPSS).

The sectors are coordinated through the Inter-Sector Working Group, which in turn reports to the country-level IATF. The IATF oversees the response for the humanitarian community, chaired by UNHCR.

The IATF Gender Capacity Advisor works with all levels of coordination to ensure that the sectors understand the distinct needs of women, girls, boys and men and accordingly tailor their responses to these needs and measure the degree of anticipated change through disaggregated performance indicators. In turn this will ensure that women, girls, boys and men have equitable access to available humanitarian resources. One of the measures of this is the coding of the Sector Response Plans according to the IASC Gender Marker. All of Jordan's Sector Response Plans have been coded 2A.

International and national NGOs have an integral role in the design, coordination and delivery of the RRP6, with NGOs acting as both appealing organizations and in implementing activities for the large appealing UN organizations. The INGO forum is comprised of [33] organizations and works to ensure an independent voice and representation for INGOs both within and outside of the refugee response coordination.

To facilitate the delivery of the RRP6, a series of measures are being taken to strengthen coordination into 2014. These include the continued deployment of dedicated coordination staff, and training and capacity building of Government officials and humanitarian staff involved in coordination. Significant investments are being made in information management tools to facilitate coordination, including improvements to the refugee response portal (data.unhcr.org), and an online activities planning, tracking and reporting tool specifically for the RRP6 (syrianrefugeeresponse.org).

Coordinated initiatives planned or underway include:

- 1) roll-out of geographic-focused strategies for specific camp, urban and rural areas. An example is the Zaatari Governance Plan, which, under the SRCDC's leadership, draws together the sectors under a shared vision for the future of Zaatari;
- 2) expansion of common vulnerability analysis mechanisms – currently developed under Health, Cash and Food Security – across the sectors, with the aim to improve and facilitate targeting of the most vulnerable;
- 3) strengthening of inter-sector referral mechanisms, including existing CP and SGBV referral mechanisms and standard operating procedures, development of inter-agency protection messages and awareness-raising campaigns, and case-management in camp and urban areas;
- 4) inter-sector sharing and application of best practices on needs assessments and monitoring and evaluation, including post-distribution monitoring;
- 5) updating of inventories of existing assessments, supported by secondary data analysis, followed by regular targeted multi-sector assessments, feeding into common vulnerability and situation analysis and ensuring that the response remains evidence-based. Agencies will be encouraged to undertake needs assessments and monitoring processes of services and the distribution of goods in a manner that is coordinated by the sectors and the GoJ in order to focus the streams of inquiry useful to guide service provision, comply with assessment standards and reduce the burden on the affected population to meet with surveyors. Sectors will coordinate sectoral analysis of needs assessments and monitoring reports in order to periodically review the tailoring of activities (including targeting) to the needs of women, girls, boys and men and the evidence of change and/or the meeting of targets.
- 6) an integrated community-based complaints mechanism will be established and coordinated across agencies in order to receive feedback on the quality of services and mobilize appropriate responses so that practice standards and the appropriateness of service delivery are maintained.

Crucially, the RRP6 coordination will ensure effective linkages with parallel host community resilience initiatives led by the Government. The recent establishment of the Host Community Support Platform to be chaired by MoPIC with the participation of line ministries (Labour; Municipality Affairs; Health; Education; and Water and Irrigation) as well as UN agencies, NGOs and donors, is an important institutional structure to bridge humanitarian and development efforts.

Individual NGO projects are reviewed by the Government Coordination Committee, an inter-ministerial body chaired by MoPIC. All projects listed in the RRP are subject to GoJ approval prior to implementation.

F. Protection response

Lead Agencies	UNHCR <ul style="list-style-type: none"> with UNICEF in Child Protection (CP) Sub-Sector with UNFPA in Sexual and Gender-Based Violence (SGBV) Sub-Sector with IMC and WHO on Mental Health and Psycho-social Support Sub-Sector 		
Participating Agencies	ACF, ACTED, ARDD - Legal Aid, AVSI, CARE, Caritas, DRC, FCA, FGAC, FPSC, Global Communities, HI, ICCS, IFH/NHF, ICMC, Internews, INTERSOS, ILO, IMC, IOM, IRC, IRD, JBA, JOHUD, JRC, JRF, JWU, KnK, LWF, MA, Mercy Corps, MPDL, NCCA, NICCOD, NRC, OPM, OXFAM, Questscope, SCI, SCJ, TdH Lausanne, TdH Italy, TGH, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UN Women, UPP, WAAJC, War Child UK, WVI, Y-PEER		
Participating Government entities	Civil Status Department, FPD, JAF, JPD, MoE, MoI, MoJ, MoL, MoSD, National Council for Demining and Rehabilitation, SRCD/PSD		
Objectives	<ol style="list-style-type: none"> Refugees fleeing Syria are able to access the territory, to seek asylum and their rights are respected. Community empowerment, engagement, outreach and self-reliance is strengthened and expanded, and women, girls, boys and men are engaged in the planning, implementation and evaluation of services. The risks and consequences of SGBV experienced by women, girls, boys and men are reduced and/or mitigated, and the quality of response is improved. Emergency CP interventions for boys and girls are strengthened and harmonized. Durable and protection solutions are made available to refugees from Syria. 		
Requirements from January to June 2014	US\$101,532,898		
Prioritized requirements (Jan-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$30,714,709	US\$58,660,285	US\$12,157,905
Total 2014 indicative financial requirements	US\$169,076,190		
Contact Information	Giulia Ricciarelli-Ranawat, ricciare@unhcr.org		
Gender Marker	2A		

1. ACHIEVEMENTS AND CHALLENGES

ACHIEVEMENTS

UNHCR has continued to reinforce its registration capacity in 2013, both in the camps and in urban areas, with the opening of new registration centres in Irbid and in Amman (Khalda). UNHCR succeeded in eliminating its registration backlogs in the late summer and early fall of 2013 such that Syrians approaching registration centres in Amman and in Irbid were registered on the same day of first approach. In addition, the joint UNHCR-Government of Jordan (GoJ) verification, re-registration and personal identity document return exercise began in Zaatari in November 2013.

The GoJ and UNHCR have completed the classification and data entry of all 175,000 Syrian personal identity documents held by the GoJ in Rabaa Al-Sarhan; document return for Syrians living in host communities will take place after the verification exercise in Zaatari is completed. In 2013, biometrics (iris scan) was introduced as part of the registration process in urban registration centres, and will be introduced in the new registration centre in Rabaa Al-Sarhan and in Zaatari. New Ministry of Interior (MoI) service cards with enhanced security features will be introduced as part of the verification exercise in Zaatari, and also for refugees living in host communities.

As a result of this classification of documents, it is now possible (i) to retrieve promptly the Syrian identification documents for families declaring newborns in Zaatari and (ii) for Syrians opting for spontaneous return to Syria to obtain their personal identification documents prior to departure. A Civil Status Registry office and Religious Court will be established in Zaatari in November in order to facilitate issuance of documents. Support will also be provided to Civil Registries outside of the camps, and efforts have been made to strengthen the provision of information and counselling to Syrians on documentation, including expanding the provision of legal representation where required.

UNHCR has been granted more regular access to border areas and has also gained access to the new registration and screening centre at Rabaa Al-Sarhan, where all new arrivals coming through unofficial border crossings will be registered as of November 2013. UNHCR has continued to receive reports of persons being denied entry into Jordan or being returned to Syria for security reasons. Advocacy interventions continued to be made with various GoJ counterparts to call for the respect of the right to seek protection and asylum, and a number of individual interventions were made by UNHCR to secure access to the territory and enable family reunification. UNHCR also systematically intervenes with the MoI to request a halt of deportation orders issued against Syrians of concern. For the 136 Syrians³⁸ placed in administrative detention in 2013, UNHCR conducted advocacy interventions, monitoring visits and provided legal representation where needed.³⁹ UNHCR regularly visits Juvenile Centres across Jordan, provides legal representation to all refugee children in conflict with the law, and works closely together with UNICEF and other partners, including the Juvenile Police Department (JPD), on issues related to youth-at-risk.

A number of inter-agency assessments were carried out, including assessments highlighting child protection (CP) and sexual and gender based violence (SGBV)-related issues in Zaatari Camp and host communities, and mental health and CP issues in Zaatari Camp. In addition, the Mental Health and Psycho-social Support Sub-Sector, in collaboration with the CP and SGBV Sub-Sectors, conducted a 4W mapping of relevant services in Jordan in March 2013, with an update planned for the last quarter of 2013.

In July 2013, the CP and SGBV Sub-Sectors launched the national Inter-Agency Emergency Standard Operating Procedures (SOPs) for CP and SGBV, detailing procedures, roles and responsibilities for actors involved in prevention and response activities, and include referral pathways for CP and

38 93 men, five women and 38 boys.

39 Of the 136 Syrians placed in administrative detention in 2013, 36 were bailed out and 35 released.

SGBV in host communities and in camps. Trainings and awareness-raising activities on the SOPs and referral pathways began in October 2013, as part of a six-month project funded by UNHCR, UNICEF and UNFPA, and implemented by Save the Children International (SCI) and International Rescue Committee, with the support of the National Council for Family Affairs and members of the Sub-sectors. Additional components of this inter-agency project on “Strengthening child protection and gender-based violence services and systems” include the development and roll-out of CP and SGBV prevention messages and information campaigns and the development and implementation of a training programme on case management for CP and SGBV. Other key achievements of 2013 include the establishment of a Best Interest Determination panel in Zaatari refugee camp, the development of Alternative Care Guidelines Procedures by UNHCR, UNICEF, SCI, the Ministry of Social Development (MoSD) and members of the CP Sub-Sector, the introduction of information systems to monitor the incidence of violence and track response,⁴⁰ and the development by the MHPSS Sub-Sector of Inter-Agency Guidance Notes on MHPSS.

A significant number of Syrians accessed protection services in 2013, including (all numbers as of end of September 2013):

- 3,051 unaccompanied children, separated children and children-at-risk received multi-sectoral services (1,747 girls and 1,304 boys).
- 2,316 SGBV survivors were supported or referred to multi-sectoral services [1,995 females (1,360 women and 635 girls) and 321 males (156 men and 165 boys)].
- 7,036 refugees with specific needs, including persons with disabilities, received special support [3,713 females (2,712 women and 1,001 girls) and 3,323 males (2,026 men and 1,297 boys)].
- 93,322 refugee children (54,888 girls and 38,434 boys) and 35,955 adults (27,745 women and 8,250 men) benefited from psycho-social support, including through the 84 child friendly spaces (CFS) and youth friendly spaces and 24 women safe spaces that are operational in camps and in host communities.
- 7,579 Syrian refugees received legal counselling on a range of issues, including marriage, divorce, child custody, criminal prosecution of SGBV incidents, and work and residence permits.
- 6,388 GoJ officials, civil society and humanitarian workers have been trained on refugee protection, CP and SGBV (2,871 females and 3,517 males). This figure is inclusive of 1,899 refugee community mobilizers and volunteers (1,014 females and 885 males).
- Some 200 refugees with specific needs (women survivors of SGBV, refugees with serious medical conditions, victims of torture and separated children for family reunification purposes) have been identified and submitted for third country resettlement.

Efforts to improve information on available services include the printing and distribution of more than 9,000 inter-agency service guides, the establishment and staffing of five Help Desks, the maintenance of the Info Line, and the launching of a series of town hall meetings across Jordan to disseminate information to refugee communities on rights and obligations, available services, and to increase interaction with community-based organizations (CBOs) and local authorities. The

⁴⁰ Gender-Based Violence Information Management System (GBVIMS), Child Protection Information Management System (CPIMS), Refugee Assistance Information System (RAIS).

expansion of the inter-agency protection outreach network has been identified as one of the key protection priorities in Jordan. In terms of community outreach and empowerment activities, as of September 2013, three Community Centres and six Community Action Committees (CACs) were established by UNHCR and partners in Amman, the North and the South. In addition, more than 950 Syrian refugees and Jordanians volunteer in 99 community-based child protection committees (53 in camps and 46 in host communities), implemented by UNICEF and its partners. The first community-based protection network (CBPN) was established in District 6 of Zaatari camp in October 2013. The CBPN is expected to expand to at least 2-3 more districts before the end of 2013. 65 Quick Impact Projects (QIPs) and 15 Community Impact Projects (CIPs) were completed as of the end of September 2013, increasing peaceful coexistence between refugee and host communities and thereby increasing the protection space for refugees in Jordan.

UNHCR has been working closely with States to provide resettlement or humanitarian admission as part of the broader protection response to refugees who have fled Syria to neighbouring countries. To date nearly 10,000 places for the region have been offered by resettlement countries for resettlement or other forms of admission for Syrian refugees and further places are expected. For refugees considered for resettlement, refugee status determination is required.

CHALLENGES

Despite the significant achievements noted above, a number of challenges remain. Insecurity at the border makes access to the territory difficult for refugees seeking protection in Jordan. Insecurity and civil unrest in Zaatari remain concerns, not only for refugee women, girls, boys and men, but also for humanitarian workers delivering services and assistance. The implementation of the governance plan in Zaatari, planned to reduce tensions and improve conflict resolution, has encountered some delays, including the appointment of appropriate civil administration representatives and the establishment of committees providing equitable voice to women and men.

Syrians continue to opt for spontaneous return to Syria, with more than 85,000 Syrians having returned from Jordan by the end of September 2013 according to GoJ figures. The return process remains administered by the GoJ, through the Syrian Refugee Camp Directorate (SRCD) in Zaatari, as well as the General Intelligence Department and the Military Intelligence. UNHCR has established a daily return monitoring mechanism to provide counseling to refugees on the risks associated with return to Syria and assess the voluntariness of the movement and motivations of those returning. A more systematic individual tracking and monitoring procedure for Zaatari and Rabaa Al-Sarhan is being discussed by UNHCR and GoJ authorities to fully understand factors informing decisions to return, and address concerns through an adapted assistance and protection framework, including information on the risks of landmines and explosive remnants of war (both during the return crossing and once they are back in Syria) and a systematic mechanism to prevent the recruitment of children into armed forces and their return to Syria. At present, UNHCR regularly shares lists of unaccompanied and separated children with the GoJ as a measure to prevent the return of children at risk to Syria.

The Protection Sector continues to grapple with providing services to refugees dispersed throughout Jordan (75 per cent reside outside of refugee camps). The outreach capacity of available services remains limited, particularly in light of reports that Syrian refugees, in particular persons with disabilities, and women and girls, often do not leave their homes due to security concerns and other constraints limiting their freedom of movement. Access to services for survivors of SGBV⁴¹ are similarly limited due to their restricted freedom of movement, lack of knowledge of services, lack of decision-making power and cultural impediments to disclosure. While there have been efforts to increase the quality and quantity of case management and psycho-social support services, there are still gaps, especially in the south and in Jordan Valley, and there is increasing pressure on services in the north due to high population density. Considerable effort has been invested into the establishment of SGBV services for women and girls, but specialized services for lesbian, gay, bisexual, transgender and intersex (LGBTI) individuals and for men and boy survivors, remain insufficient. While additional shelter facilities for SGBV survivors are planned, there is still a need for increased safety and security options for men and boy survivors of SGBV.

As Syrian law only permits men to confer nationality to children, a child who is not registered at birth as having a Syrian father is at risk of statelessness. A Syrian refugee child in Jordan cannot be registered unless its parents possess valid evidence of marriage registration. Problems arise for couples whose marriage certificates or family booklets were lost or destroyed in Syria, or who were wed in a religious ceremony but never completed the formalities of marriage registration. While it is possible to petition Jordanian courts for validation of marital status, the cost is prohibitive and the procedure is especially difficult in cases where the husband is missing, deceased, or otherwise separated from the family. Furthermore, it may be impossible in practical terms to register children born from extramarital relationships or incidents of sexual violence. Although the law in principle permits the registration of children born out of wedlock, implementation of this provision is hindered by the risks of private violence, including so-called “honour killings”, as well as current MoI policy which authorizes termination of the unwed mother’s parental and custodial rights, along with involuntary placement of the mother in protective custody. Accordingly, children born out of wedlock are likely to remain unregistered and at a heightened risk of statelessness. UNHCR is launching efforts to raise awareness among refugees of the relevant procedures to register new births, and continues to provide legal and protection counselling to individual cases.

41 Evidence from reports, assessments, interviews and focus groups discussions, suggests that SGBV remains one of the main protection concerns for women and girls, as well as for men and boys during displacement. In particular, the following types of violence are reported: (i) domestic violence (Physical violence by intimate partners and other relatives is reported as the main type of violence faced by Syrian refugee women and girls in Jordan. Domestic violence goes largely unreported, as according to Syrian social norms, the realm of the home is “private” and actions at home are not for public judgment. This was confirmed in a recent assessment in Zaatari, where respondents indicated that domestic violence is the most prevalent type of violence, and it most affects girls aged 12-18 years of age.); (ii) sexual violence; (iii) sexual assault (there is a reported increase in harassment and in certain cases unwanted touching); (iv) early and forced marriage (early marriage is a pre-existing practice, which may have been exacerbated in displacement in Jordan due to economic necessity and the perceived need to protect young women. Forced marriage has also been reported, particularly affecting single women and widows. Forced marriage is also used/practiced as a form of reparation for women that have been victims of rape in the Syria conflict.); and (v) survival sex (there is an increased risk of exposure to survival sex, including that used as a coping mechanism, to pay rent or gain access to services. Penalization of prostitution in Jordan (which is illegal and punished with arrest and deportation) makes the identification of survival sex/forced prostitution victims difficult).

Self-reliance programmes for refugees remain extremely limited, and should, in consultation with the GoJ and other sectors, and mindful of the needs of the host community, be increased to support resilience and positive coping mechanisms of Syrian refugees, particularly for those living in host communities with limited humanitarian assistance. Access to formal and informal education remains limited for refugee women, girls, boys and men, and activities and programming for adolescents remain a significant gap.

Tensions between the refugee and host communities are reported to be increasing, with the need to increase support to national institutions and communities hosting refugee populations, including through QIPs and CIPs, in order to foster peaceful coexistence and so as to increase the protection space. Increased community tensions over assistance and resource allocation need to be addressed urgently, possibly through integration of host communities in humanitarian interventions. A major focus of protection actors in 2014 will be to improve communication with GoJ officials and local leaders, including religious leaders, to better understand their needs and to promote their involvement in the planning and delivery of humanitarian assistance to create better linkages between humanitarian and national services.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	200,000
Non-camp refugees	600,000	600,000
Other affected population	700,000	700,000

ⁱ Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs. The population figures in the above table take into consideration the fact that registration activities target all Syrian populations (camp and non-camp)

Key findings of the inter-agency Protection assessments carried out in 2013 identified the following needs and priorities:

PROTECTION

- Refugees, in particular women and girls, report that they do not have sufficient information about available services (including access to public services and services for SGBV survivors), as well as their rights, entitlements and obligations. They also report being unable or not feeling comfortable accessing services due to a sense of insecurity or inability to leave the home.
- Governance structures and community-based protection mechanisms in Zaatari, other camps and host communities, including provisions to ensure the specific participation of women and youth, continue to be a need.

- Protection monitoring reports continue to note a lack of clarity on procedures for spontaneous return for refugees living in camp and non-camp settings. UNHCR also continues to receive reports of Syrians being denied entry to Jordan or being returned to Syria for security reasons.
- In Zaatari, families and adolescents reported fears about their security in the camp, including as a result of alleged gang violence.
- In Zaatari and in host communities, the restrictions on Syrian labour imposed by the GoJ were reported to have undercut the role of Syrian men in their families as providers. Refugees reported that host communities resent reduced access to jobs for Jordanians, but that businesses are exploiting Syrian refugees (and children in particular), who are willing to accept lower wages and more willing to work under dangerous conditions.
- Women, girls, boys and men need to participate more in the design, implementation, monitoring and review of services. Refugees have reported that the only time they are asked what they need is if they participate in a needs assessment.

SGBV

- According to the Commission of Inquiry on Syria, “sexual violence has been a persistent feature of the conflict.”⁴² Assessments on Syrian refugees in urban communities indicate that 28 per cent of households surveyed left Syria due to specific fears of violence, including SGBV.⁴³ Young Syrian women residing in the north reported that they have experienced SGBV perpetrated in Jordan, either by their husbands or men outside the family, and emphasized the risk of exploitation.⁴⁴
- Syrian women have reported that their husbands are under immense stress, and that they anticipate that this will lead to an increase in physical and psychological violence within the home.⁴⁵ Women also spoke about how their husbands were physically or emotionally abusive, with many stating that such behaviour results from an increased level of tension due to poor living conditions and the current crisis in Syria.⁴⁶
- In host communities, refugee women and girls reported that they experienced limited privacy and personal space because of their crowded living conditions. More than 40 per cent of women and girls surveyed reported that they spent significant amounts or even all of their time inside the home due to security concerns (verbal or physical abuse or harassment) or because they are restricted in their ability to leave the home without a male family member.⁴⁷
- Most Syrians in Jordan, whether in camp or non-camp settings, have limited or no income, placing them at risk of exploitation and abuse, and leading some to resort to harmful coping mechanisms.

42 UN Human Rights Council, 5th Report of Commission of Inquiry on Syria, 4 June 2013.

43 CARE International, *Syrian Refugees in Urban Jordan*, April 2013.

44 UNHCR Amman, *Report of the Participatory Assessment*, December 2012.

45 Child Protection and Gender-Based Violence Sub-Working Group Jordan, *Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Zaatari Refugee Camp*, March 2013.

46 CARE International, *Syrian Refugees in Urban Jordan*, April 2013.

47 UN Women, *Inter-Agency Assessment of Gender-based Violence and Child Protection among Urban Syrian Refugees in Jordan, with a Focus on Early Marriage*, July 2013.

- Early marriage is more common among Syrian girls from rural areas, although the prevalence is not known; 44 per cent of Syrian participants in an inter-agency assessment identified the normal age of marriage for girls between 15 and 17 years while 6 per cent identified 12 to 14 years as the average in their community. While there is no conclusive evidence that Syrian refugees are marrying early at a higher rate in Jordan than in Syria, the assessment noted that the sense of economic and physical insecurity which, among other factors, drive early marriage, is amplified in displacement.⁴⁸
- Participants of both genders in an inter-agency survey confirmed that survivors cannot speak openly about SGBV, and that survivors are often afraid to discuss what has happened to them.

CP

- Violence against children is reportedly common and both boys and girls are at risk in the home, school and public areas.
- In both camps and in host communities, children, primarily boys, have come into conflict with the law (this includes participation in civil unrest and vandalism/theft in Zaatari, and theft in urban/rural areas) with some 38 Syrian boys being placed in Juvenile Centres in 2013.
- In both camp and non-camp settings, domestic violence is a major issue, with some girls and boys indicating that they themselves had perpetrated violence against other family members.
- In both Zaatari and host communities, refugees reported that children were engaged in labour. Overall, child labour is most prevalent among boys. In June 2013, the Secretary-General of the Ministry of Labour estimated that 30,000 Syrian girls and boys were engaged in labour activities in Jordan.
- During displacement, some boys and girls are becoming separated from their families.⁴⁹ Traditionally, these children are cared for within Syrian families until their reunification with their parents; as their resources are running out, however, this is becoming more difficult.
- Assessments in Zaatari and in host communities included reports that young boys were returning to Syria to join armed groups, sometimes linked to peer or family pressure to do so.

MHPSS

- Adolescents in Zaatari, in particular male adolescents, report the following mental health and psycho-social concerns: physical security in the camp, grief related to family separation and loss, as well as concerns related to child abuse in the family.⁵⁰
- There are gaps in the provision of protective support for youth through peer outreach workers (with supervision) in order to help promote behaviours that may prevent violence.⁵¹
- There is a lack of specialized programming for individuals who may develop more enduring mental health problems such as depression or anxiety disorders, as well as those suffering

48 UN Women, *Inter-Agency Assessment of Gender-based Violence and Child Protection among Urban Syrian Refugees in Jordan, with a Focus on Early Marriage*, July 2013.

49 Since the beginning of the refugee influx in March 2011, more than 2,555 children (742 unaccompanied children; 1813 separated children) have been identified, registered, and referred for specialized assistance, including family reunification and placement in alternative care arrangements.

50 IMC, UNICEF, *Mental Health/Psycho-social and Child Protection Assessment for Syrian Refugee Adolescents in Zaatari Refugee Camp, Jordan*, July 2013.

51 IMC, UNICEF, *Mental Health/Psycho-social and Child Protection Assessment for Syrian Refugee Adolescents in Zaatari Refugee Camp, Jordan*, July 2013.

from pre-existing mental health problems, requiring more specialized care by a psychologist and/or psychiatrist.

- MHPSS actors must strive to ensure there is a continuum of care being provided at all levels of the Inter-Agency Standing Committee (IASC) Pyramid of MHPSS in Emergency Settings and work to fill in gaps where there are geographic limitations to services provided.
- Reporting and information gathering for MHPSS services and activities through the production of sound and reliable data need improvement.
- Increased awareness of and access to services for people suffering from crisis induced and pre-existing mental health problems and intellectual disabilities is crucially needed.

3. RESPONSE STRATEGY

The Inter-Agency Protection Strategy in Jordan is centred on (i) ensuring access to basic rights, including the right to seek asylum and timely access to registration and documentation as a prerequisite for proper protection delivery; (ii) expanding community outreach and development of community-based protection mechanisms, with a focus on community empowerment and self-reliance, and ensuring that women, girls, boys and men are engaged in the planning, implementation and evaluation of services; (iii) mitigating and reducing the risks and consequences of SGBV, while improving the quality of multi-sectoral response services, as well as expanding access and reach of services; (iv) ensuring that emergency CP interventions are strengthened and harmonized; and (v) exploring third country resettlement/durable solution options as a protection response to cases with special needs.

In order to achieve these objectives, protection actors in Jordan have developed an inter-agency refugee protection response strategy and work plan. In 2014, the Protection Sector will continue its efforts to increase the involvement of the GoJ in the development, implementation and evaluation of protection activities, and greater emphasis will be placed on ensuring the involvement of national partners, including national NGOs, CBOs and key members of the local community. In 2014, protection actors will also prioritize interventions that swiftly and substantially increase the level of support available to the GoJ and communities hosting refugees, thereby mitigating the socio-economic and political pressures generated by the refugee influx. The Protection Sector will continue to work with other sectors in order to mainstream protection into the refugee response, and will also increasingly strengthen its fundamental links with the Education Sector. In light of the fact that education is a central part of a protection strategy for children and youth, actors in both sectors will develop mutually reinforcing programmes.

Monitoring of the borders as well as capacity support to border authorities to increase and improve their reception capacity as well as the safe onwards movement of refugees to camps will remain an essential part of the protection response strategy. In this regard, UNHCR and other members of the Protection Sector will use advocacy with the GoJ in order to promote protection objectives, and increase mine risk awareness activities for Syrians opting to return. UNHCR will also continue its advocacy interventions to reduce instances of administrative detention, and will increase its cooperation with Correction and Rehabilitation Facilities, Juvenile Centres and governor's offices across Jordan.

Registration will continue to be a priority as a vital protection and assistance tool, since it is the primary means of accessing services for refugees. Maintaining timely and efficient registration procedures will be critical to preserving the integrity of humanitarian programmes, detecting the specific needs of individuals and referring them to appropriate services. The joint UNHCR-GoJ registration strategy focuses on improved quality of registration and a harmonized approach across the country, including the collection of enhanced data elements, the introduction of anti-fraud mechanisms, biometrics country-wide and the issuance of MoI service cards to all refugees. UNHCR will create a mobile rapid registration response team, and enhance its emergency preparedness as part of contingency planning. UNHCR will also promote the development of an effective data sharing policy among partners, with enhanced data protection and confidentiality procedures. Protection partners will continue to invest in the strengthening of administrative institutions and practice, including through continued partnership with GoJ institutions, such as the MoI, Ministry of Planning and International Cooperation, SRCD, the Family Protection Department (FPD), the JPD and the MoSD. In 2014, access to legal assistance and legal remedies will be improved and civil registration and civil status documentation will be strengthened, including through increased partnerships with GoJ institutions and through information campaigns for Syrian refugees, in particular with regards to the obtaining of birth certificates and marriage registration. Courts and civil status departments will be established in the camps, and will be supported in their documentation work inside and outside of camps.

In 2014, protection actors will strengthen and expand community-based protection mechanisms, community empowerment initiatives and community mobilization both in camp and non-camp settings. Outreach and identification of persons with specific needs, including refugees with disabilities, as well as timely and efficient referrals of vulnerable Syrians to geographically close service providers, are integral parts of the inter-agency protection response strategy. Protection partners will strengthen protection data collection, identification, case management and referrals of protection cases, including through centralized databases like RAIS and proGres. Other priorities for protection actors will be to expand community-based protection networks in the camps and CACs and other joint refugee/host community structures outside of the camps. Protection actors will focus their activities in the camps and in host communities on: community engagement and mobilization, participatory needs assessments through the age, gender and diversity approach, outreach and protection monitoring, public information/mass communication, strategic use of assistance-related projects for identification and referral purposes, and the implementation of effective inter-agency protection referral mechanisms.

Projects will also aim to promote peaceful coexistence with local communities, including through QIPs and CIPs. In close consultation with the GoJ, protection actors will seek to improve access to self-reliance activities, post-basic education, and accessing life skills training for Syrian women and men (as well as for vulnerable host community members), while ensuring that there are appropriate formal, informal and non-formal educational and recreational activities for girls and boys.

The SGBV Sub-Sector has identified four thematic priorities for 2014: early and forced marriage, domestic violence (SGBV-related), survival sex and sexual violence. These four thematic priorities will be addressed through enhanced prevention, response and coordination efforts. Women,

girls, boys and men will be actively involved in prevention through a peer-to-peer approach, and through involvement in educational and awareness-raising activities to support empowerment of women and girls as leaders and agents of change and engage men and boys as allies in SGBV interventions. Through increased capacity development and engagement, community structures will increasingly be at the centre of prevention activities. Efforts will be made to further integrate SGBV prevention and response into the wider humanitarian response. In 2014, partners will work to increase opportunities for safe and confidential disclosure through outreach, including through mobile teams and the expansion of safe spaces. Innovative partnerships between local institutions, CBOs and international organizations will create more opportunities for SGBV survivors to access culturally appropriate and survivor-centred information and services in accordance with age, gender and diversity principles. The roll-out of the Gender-Based Violence Information Management System will also ensure harmonized, safe and confidential collection and analysis of SGBV data. The quality of case management will be improved through the roll-out of case management training in line with the SGBV SOPs and referral pathways, and services for men and boy survivors will be expanded, including for male survivors of SGBV who have been targeted due to their sexual orientation. Specialized capacity building programs and the expansion of service provision will result in increased numbers of clinics able to provide CMR (clinical management of rape) services, women safe spaces, legal services able to respond to SGBV and the establishment or improvement of safe shelters thereby significantly improving the access of SGBV survivors to life-saving support. The SGBV Sub-Sector works with national and local institutions to support good policy, legislation and practices that promote the basic principles of human rights to prevent SGBV, supporting and building upon the national system. This includes through continued support to the FPD, who responds to the needs of survivors through case management, mediation, the operation of a 24-hour hotline, referrals to safe shelters and legal assistance.

The CP Sub-Sector has identified five thematic priority areas for 2014: unaccompanied and separated children, child labour, children associated with armed forces and armed groups, violence against children and children in conflict with the law. These five priority areas will be addressed through capacity building and mainstreaming of CP concerns into the wider humanitarian response, increased prevention and outreach activities, improving opportunities for safe and confidential disclosure and through effective referrals to expanded and improved multi-sectoral response services, including working within and strengthening existing national CP systems and GoJ services to address CP issues. This will also include continued work on alternative care procedures and strengthening the capacity of the MoSD and Courts to identify and formalize alternative care arrangements. In 2014, the CP SWG aims to strengthen humanitarian, national, and community-based child protection systems, provide timely services, interventions and decisions in children's best interests, and to enhance monitoring, reporting and response to grave violations of children's rights, in particular child recruitment. Protection actors will endeavor to ensure that all interventions take into account the different protection needs and capacities of girls and boys and their families through the provision of improved case management services, including through the roll-out of a case management training and accreditation system for case managers, as part of the larger framework of the national SOPs and referral pathways. CP actors will also work closely with partners in the Education Sector in order to address the issues of violence in schools (peer to peer and other forms of violence), the training of teachers and counselors working with Syrian children, the

strengthening of referrals through CFS to the Education Sector, the issue of access and inclusion for children with disabilities, and the strengthening of informal education opportunities, including through CFS.

The MHPSS Sub-Sector will focus on the integration of psycho-social activities throughout all four levels of the IASC Pyramid of care. The MHPSS SWG will reserve specialized supportive services which provide clinical mental health treatment under level four while ensuring strong coordination and referral pathways are in place and secured at level one, two, and three. Integration will occur through the support of CBOs, home based care for families and individuals not able or ready to access formal care and support to community based protection services. At every level and integrated into every programme, natural community supports shall be reinforced whenever possible and supportive services remain as brief as possible allowing for families to re-establish healthy coping strategies that bring their families back to a sense of normalcy. MHPSS actors will strive to support the MoSD, FPD and MoH in their efforts to integrate psycho-social programming into the national structure of care. Support will also be provided specifically to the MoH in line with their national strategy for children and adolescents, including specialized services, preventive strategies, comprehensive interventions and efficient referrals. This will be achieved through developing child friendly and focused language in mental health, support for children who present with intellectual impairments to access schools and ensure that specialized services are using sound and reliable methods when working with women, girls, boys and men.

Finally, UNHCR aims to promote resettlement or humanitarian admission as a protection solution for up to 3,000 of the most vulnerable Syrian refugees in Jordan. Refugees whose vulnerabilities place them at risk in Jordan will be prioritized for these solutions, including women and girls at risk, survivors of violence and/or torture, elderly refugees at risk, refugees with physical protection needs, refugees with medical needs or disabilities, children and adolescents at risk, LGBTI persons and refugees in need of family reunification. To achieve this, UNHCR will further enhance its refugee status determination capacity, as well as its outreach to vulnerable populations. Referral pathways will also be developed to ensure that the most vulnerable cases are assessed for resettlement solutions.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Refugees fleeing Syria are able to access the territory, to seek asylum and their rights are respected.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Access to territory improved, protection space preserved and risk of Refoulement and detention reduced	250.000	2.000		Country Wide (Mafraq, Zaatari)	3.598.463	3.280.189	318.273		IOM, UNHCR (JAF, SRCD, MOI, MOPIC)
Output 1.2 Administrative institutions and practice developed or strengthened	200, 00	600.000		Country Wide	6.362.463		6.122.257	240.206	UNHCR (SRCD, MOI, MOPIC, FPD, DAW, MoSD)
Output 1.3 Quality of registration and profiling improved (age and gender disaggregated data), and quality of reception conditions improved and maintained.	200.000	600.000	7.505	Country Wide	6.335.440	6.305.414	30.026		ACTED, UNHCR
Output 1.4 Access to legal assistance and legal remedies improved and civil registration and civil status documentation strengthened	122.299	25.000	5.000	Country Wide (Balqa, Amman, Irbid, Madaba, Ma'an, Mafraq, Tafileh and camps (Zaatari and Emirati Jordanian Camp (EJC))	2.141.710		2.141.710		DRC, Internews, NRC, UNHCR (ARDD-LA, JBA, Civil Status Department, Rel. Judges Department), UPP

Output 1.5 Identification and referral of persons with specific needs strengthened and access to services improved	121.000	75.500	25.500	Country Wide (Amman, Irbid, Karak, Ma'an, Mafraq, Tafileh, Zarqa, and camps (Zaatari and Azraq Camp)	8.320.590	3.726.200	3.855.756	738.634	DRC, FPSC, HI, IRC, MPDL, NRC, TGH, UNHCR (Zain Al Sharf Institute), WarChild UK
Objective 1					26.758.666	13.311.803	12.468.022	978.841	

Objective 2. Community empowerment, engagement, outreach and self-reliance is strengthened and expanded, and WGBM are engaged in the planning, implementation & evaluation of services.

Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Community-based protection mechanisms, outreach and community mobilization strengthened	82.500	33.000	60.000	Country Wide (Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Madaba, Karak, Ma'an, Mafraq, Tafileh, Zarqa, and Camps (EJC and Zaatari))	14.623.194		12.540.173	2.083.021	CARE, Global Communities, DRC, IMC, Intersos, IRC, LWF, NRC, Save the Children International, Save the Children Jordan, TDH, UN WOMEN, UNESCO, UNFPA (IRC, IMC, UPP/JWU, IFH, WAAJC, NCCA and YPEER), UNHCR (IRD), UNICEF (SCI, NHF, Mercy Corps, INTERSOS, JOHUD, UPP, JWU, ICCS, FGAC, JRF, JRC), WarChild UK, WWI
Output 2.2 Peaceful Coexistence with local communities, including through community-support projects (such as QIPs and CIPs) is promoted	100.000	21.000	699.999	Country Wide (Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Madaba, Karak, Ma'an, Mafraq, Tafileh, Zarqa, and Camps (EJC and Zaatari))	6.848.094	48.041	6.161.705	638.348	ACTED, DRC, ILO, IMC, Intersos, Mercy Corps, TDHI, UNDP, UNFPA (YPEER, WAAJC, NCCA), UNHCR (IRD), UN Women

Output 2.3 Complaint and Accountability Mechanisms are established and functional	200.000	600.000		Country Wide	180.155		180.155		UNFPA, UNHCR
Output 2.4 Community empowerment and self reliance opportunities for refugee and host communities are promoted as part of comprehensive protection interventions	10.000	1.751	25.000	Country Wide (Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Madaba, Karak, Ma'an, Mafraq, Tafileh, Zarqa, and Camps (EJC, Cyber City, King Abdullah Park and Zaatari))	9.261.149		5.644.847	3.616.302	ACTED, DRC, ILO, IOM, IRC, LWF, NICCOD, Save the Children International, UN Women, UNDP, UNFPA (IRC, IMC, UPP/JWU, IFH, WAAJC, NCCA and YPEER)
Output 2.5 Psychosocial support services are strengthened and expanded	46.493	81.000	24.300	Country Wide (Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Madaba, Karak, Ma'an, Mafraq, Tafileh, Zarqa, and Camps (EJC and Zaatari))	13.620.130	1.398.612	9.528.806	2.692.712	ACF, AVSI, CARE, DRC, FCA, IMC, IRC, LWF, MPDL, Save the Children International, Save the Children Jordan, TDH, TDHI, TGH, UNFPA (IRC, IMC, UPP/JWU, IFH), UNHCR, UNICEF (SCI, NHF, Mercy Corps, INTERSOS, JOHUD, UPP, JWU, ICCS, FGAC, JRF, JRC, IMC) UPP WarChild UK
Objective 2					23.061.434	1.398.612	15.353.808	6.309.014	

Objective 3. The risks and consequences of SGBV experienced by WGBM are reduced/mitigated, and the quality of response is improved, in accordance with AGD principles.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 SGBV risks are reduced through WGBM's empowerment and engagement in prevention initiatives	68.843	81.844	34.761	Country Wide (Aqaba, Azraq, Irbid, Mafraq, Tafileh, Zarqa and Zaatari)	2.418.709		2.418.709		ICMC, IRC, Save the Children Jordan, TDHI, UNFPA (IRC, IMC, UPP/ JWU, IFH, WAAJC, NCCA and YPEER), UNHCR, UN Women
Output 3.2 SGBV survivors access safe, confidential and compassionate multi-sectoral services adapted to their age, gender and diversity	2.000	2.350	800	Country Wide (Ajloun, Balqa, Amman, Irbid, Jarash, Karak, Ma'an, Mafraq, Zarqa and camps (Zaatari and EJC))	9.926.269	9.457.866	468.402		IOM, IRC, UNFPA (IRC, IMC, UPP/JWU, IFH, FPD, MOH), UNHCR (FPD, MoSD (DAW), JRF, NHF, IMC), UNICEF, UPP
Output 3.3 Government and non-government actors in all sectors provide safe, confidential and informed referral for survivors and incorporate SGBV risk-reduction in the planning and implementation of their activities.	120.000	190.000	27.000	Country Wide (Balqaa, Amman, Irbid, Karak, Madaba, Mafraq, Zarqa)	623.035			623.035	IMC, IRC, UNFPA (IRC, IMC, IFH, FPD, MOH), UNHCR
Objective 3					12.968.012	9.457.866	2.887.111	623.035	

Objective 4. Emergency child protection interventions for boys & girls are strengthened & harmonized.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 4.1 Capacity development and collaboration with relevant stakeholders is strengthened, including through the mainstreaming of child protection into other humanitarian response sectors	700	1.500	3.500	Country Wide (Ajloun, Amman, Aqaba, Azraq, Irbid, Mafraq, Jarash, Tafileh, Zarqa and camps (Zaatari and EJC))	1.674.136		243.299	1.430.837	AVSI, ILO, IMC, IRC, Mercy Corps, Save the Children International, Save the Children Jordan, TDH, TDHI, UNHCR, UNICEF, (SCI, NHF, Mercy Corps, INTERSOS, JOHUD, UPP, JWU, ICCS, FGAC, JRF, JRC, FDP JDP, SRCD), WVI
Output 4.2 CP prevention activities are increased, including through the strengthening of CBCPCs and other community structures	100.000	41.184	13.754	Country Wide (Ajloun, Amman, Aqaba, Azraq, Irbid, Mafraq, Jarash, Tafileh, Zarqa and camps (Zaatari and EJC))	5.038.785		4.965.594	73.191	ACTED, AVSI, DRC, ILO, Mercy Corps, Save the Children International, Save the Children Jordan, TDH, TDHI, UNHCR, UNICEF (SCI, NHF, Mercy Corps, INTERSOS, JOHUD, UPP, JWU, ICCS, FGAC, JRF, JRC, HI, National Council for Demining and Rehabilitation) WarChild UK, WVI

Output 4.3 Procedures and coordination mechanisms, including SOPs and referral mechanisms, are established and strengthened in order to support early disclosure, identification and referral in a safe & confidential manner	2.306	4.050	1.215	Country Wide (Ajloun, Azraq, Irbid, Mafraq, Jarash, and camps (Zaatari and EJC))	1.022.837		1.022.837		ILO, Save the Children International, Save the Children Jordan, TDH, UNHCR, UNICEF
Output 4.4 Quality of multi-sectoral response services for girls and boys and their families is strengthened and improved in accordance with AGD principles	6.007	6.000	3.500	Country Wide (Ajloun, Amman, Aqaba, Azraq, Irbid, Mafraq, Jarash, Tafileh, Zarqa and camps (Zaatari and EJC))	7.288.478	6.498.386	786.489	3.603	DRC, IMC, IRC, Questscope, Save the Children International, Save the Children Jordan, TDH, UNHCR, (IRC, IMC, FPD, MOSD (DAW), NHF) UNICEF (IRC, IMC)
Objective 4					13.350.101	6.498.386	6.774.921	76.794	

Sector indicators*	Target
# of incidents reported where access to territory was denied	100
# of WGBM receiving legal information, counselling and/or representation	347.314
# of WGBM with specific needs identified who are receiving targeted assistance and interventions	329.970
# of persons (WMGB) benefiting from community-support project implemented for host and refugee communities	2.593.260
# of WGBM having access to psychosocial support services (level 2 & 3)	386.492
# of WGBM involved in designing, implementing and reviewing GBV prevention activities	6.046
# of WGBM who access and benefit from safe, confidential and compassionate specialized multi-sectoral services	17.524
# of specialized SGBV service providers who receive training on case management, SOP and survivor centered approach (disaggregated by sex).-	1.100
# of gov't and non-gov't actors trained on SGBV referral pathways and core principles of working with survivors of SGBV.	3.880
# of community members, including children, sensitized on CP issues, services available and referral pathways (age & gender disaggregated) (includes inter-agency information campaigns)	400.788
# of UAC, SC, and children at risk provided with multi-sectoral services (age & gender disaggregated)	36.647
# of individuals submitted for resettlement	3.000
* these are just a sample of the total indicators being monitored under the RRP6 Jordan	

Protection - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	101.532.898	30.714.709	58.660.285	12.157.905	67.543.292

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Protection in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	1,680,000	1,008,000	672,000
ACTED	600,000	360,000	240,000
AVSI	716,200	429,720	286,480
CARE International	5,250,000	3,150,000	2,100,000
DRC	7,115,880	4,269,528	2,846,352
FCA	1,500,000	900,000	600,000
FPSC	1,536,680	922,008	614,672
Global Communities	9,390,000	5,634,000	3,756,000
HI	3,500,000	2,100,000	1,400,000
ICMC	400,000	240,000	160,000
ILO	2,850,000	1,710,000	1,140,000
IMC	4,095,080	2,457,048	1,638,032
Internews	630,000	378,000	252,000
INTERMOS	650,000	390,000	260,000
IOM	7,536,126	4,521,676	3,014,450
IRC	10,150,000	6,090,000	4,060,000
LWF	1,072,000	643,200	428,800
Mercy Corps	5,200,000	3,120,000	2,080,000
MPDL	133,000	79,800	53,200
NICCOD	50,000	30,000	20,000
NRC	750,000	450,000	300,000
Questscope	267,500	160,500	107,000
SCI	3,814,000	2,288,400	1,525,600
SCJ	1,515,000	909,000	606,000
TDH	1,282,160	769,296	512,864
TDHI	496,000	297,600	198,400
TGH TRIANGLE GH	812,000	487,200	324,800
UN Women	1,130,000	678,000	452,000
UNDP	8,700,000	5,220,000	3,480,000
UNESCO	453,892	272,335	181,557
UNFPA	6,149,180	3,689,508	2,459,672
UNHCR	56,663,588	33,998,153	22,665,435
UNICEF	22,085,515	13,251,309	8,834,206
UPP	217,961	217,961	
WarChild UK	272,948	163,769	109,179
WVI	411,480	246,888	164,592
Total	169,076,190	101,532,898	67,543,292

G. Food Security response

Lead Agencies	WFP		
Participating Agencies	ACF, ACTED, ADRA, Caritas, FAO, HRF, IOCC, IOM, IRD, IRW, JHCO, Medair, NAJMAH, NICCOD, SCI, SCJ, UAERC, UNOPS, UNRWA, UN Women, UNHCR, WFP, WVI		
Objectives	<p><u>Save lives and protect livelihoods in emergencies in order to:</u></p> <ol style="list-style-type: none"> 1. Maintain food security and improve food availability, access and utilization for Syrian refugees in Jordan through appropriate and consistent food assistance. 2. Improve food security including food availability, access and utilization for vulnerable Jordanian populations through targeted food production and livelihood interventions. 3. Improve the nutritional status of Syrian refugees, particularly malnourished girls and boys under the age of five and pregnant and lactating mothers. 4. Ensure effective and coordinated sectoral response through evidence-based food security and livelihood interventions. 		
Requirements from January to June 2014	US\$152,590,456		
Prioritized requirements (Jan-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$145,715,792	US\$5,755,532	US\$1,119,131
Total 2014 indicative financial requirements	US\$322,120,343		
Contact Information	Dorte Jessen, dorte.jessen@wfp.org		
Gender Marker	2A		

1. ACHIEVEMENTS AND CHALLENGES

The Food Security Sector has provided uninterrupted food assistance to Syrian refugees since the start of the crisis in early 2012. In urban and rural areas, WFP dry food rations were distributed in the initial stages of the emergency operation before being replaced by value-based food vouchers. By September 2013, WFP had reached nearly 350,000 refugees (equivalent to 97 per cent of UNHCR registered refugees in communities) in all governorates of Jordan with food vouchers valued at JOD 24 per person per month. Several NGOs, in coordination with the Jordan Hashemite Charity Organization, have provided interim food assistance to vulnerable un-registered Syrians and those awaiting registration.

The National Alliance Against Hunger and Malnutrition and Save the Children have provided targeted assistance to vulnerable Jordanian communities, supporting livelihoods through activities such as vocational training.

Food assistance has been provided to all camp refugees throughout this period, initially through provision of two hot meals per day, but once kitchens were constructed in Zaatari camp (October 2012), WFP started distribution of dry rations consisting of rice, bulgur wheat, lentils, pasta, oil, sugar and a daily provision of fresh bread. UNHCR distributed complementary food consisting of beans, tuna, tomato paste, hummus, halwa and tea through September 2013. Markets were established in Zaatari camp in early September 2013, paving the way for the gradual transition from dry food rations to voucher assistance. When the voucher programme was initiated, 110,000 individuals began receiving reduced in-kind dry food rations accompanied by reduced-value vouchers worth JOD 6 per month. Gradually, the voucher value will increase as the dry rations are phased out.

UNHCR has provided welcome meals at the border for 25,000 refugees arriving at night. WFP provides ready-to-eat welcome meals for new arrivals in Zaatari camp, covering their first 24 hours in the camp, after which they begin receiving general food rations. In coordination with UNICEF, WFP provides fortified date bars to nearly 11,000 students in Zaatari camp. UNHCR has provided fortified porridge as a supplement for children six to 24 months old.

The Food Security Sector, activated on 5 April 2012, coordinates the food support-related activities to enhance the response by information sharing, mapping, identifying gaps and avoiding duplication. Regular meetings are held and attended by NGOs, UN agencies and other Food Security Sector partners.

The ACTED Food Security and Livelihood Assessment of northern Jordan conducted in June 2013⁵² corroborates WFP monitoring findings, observing Syrian refugees' Food Consumption Scores (FCS) and dietary diversity have increased since their arrival in Jordan, indicating their improved food security status due to the food assistance provided through the sector.

Principle challenges and concerns for the Sector include:

- Deterioration of the food security situation inside Syria (in terms of availability, access and utilization), has resulted in new refugees showing a poorer nutritional status on arrival.⁵³
- Verifying registered Syrians in Jordan, including maintaining up-to-date records on both camp and non-camp refugee populations.
- Developing multi-sectoral, gender-mainstreamed targeting and selection criteria to move from blanket assistance of registered refugees to targeted distributions with identification and outreach of the most vulnerable refugees living in host communities, while taking into account the unique needs of women, girls, boys and men.

52 ACTED, *Food Security Situation and Livelihood Intervention Opportunities for Syrian and Host Communities in North Jordan*, June 2013.

53 Prepared by OCHA on behalf of the Humanitarian Country Team, *2014 Humanitarian Needs Overview, Arab Republic of Syria*, October 2013.

- Improving equity of assistance between registered Syrians and local Jordanian populations in an effort to mitigate tensions and competition for housing and livelihood activities.
- Increased demand for resources including water and food; the consequent rise in prices particularly for fresh produce affects both Syrian refugees and local Jordanian communities, impacting their purchasing power for food and non-food items, leading to increased dependency on the food assistance provided by different organizations.
- Food safety and food quality are compromised by the collapse of the veterinary extension system in Syria and unofficial border crossings of agricultural and livestock products between Syria and Jordan, leading to an increased risk of trans-boundary animal diseases and pests.
- Limited availability of detailed national food security and livelihood assessments related to the impact of the Syrian crisis on Jordanian host communities.
- Resource mobilization is becoming increasingly challenging given the protracted nature of the crisis in Syria and the global financial climate.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	200,000
Non-camp refugees	600,000	510,000
Other affected population	700,000	127,500

ⁱ Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs.

The ACTED Food Security and Livelihood Assessment⁵⁴ corroborates findings from the 2013 UNHCR/WFP Joint Assessment Mission (JAM)⁵⁵ that food expenditure constitutes more than one-third of all expenditure for both Syrian refugees and local Jordanians. In addition, it was found that the income versus expenditure gap, caused by limited livelihood opportunities, rising rent, food and service prices, induces increased use of negative coping strategies as the Syrian crisis becomes more protracted, increasing the financial pressure on vulnerable refugees and Jordanians alike. This impacts women, girls, boys and men differently, which is reflected in their negative coping strategies. Young girls, boys and pregnant and nursing mothers are particularly put at risk when eating less diverse quality food.

⁵⁴ ACTED, *Food Security Situation and Livelihood Intervention Opportunities for Syrian and Host Communities in North Jordan*, June 2013.

⁵⁵ UNHCR and WFP, *Joint Assessment Mission of Syrian Refugees in Jordan*, June 2013.

It is becoming more and more prevalent for families to take on debt and send their adolescent boys to work, as households spend their savings and sell their remaining assets.⁵⁶

These recent assessments have determined that Syrian refugees are highly reliant on food assistance as their main food source, and thus food assistance remains a high priority to prevent the deterioration of refugees' food security status, particularly in camp settings where there are very few income opportunities. Food assistance deters the adoption of additional negative coping strategies, thereby freeing up cash resources to be used for other imminent needs (shelter, health, water, sanitation and hygiene, education, etc.). The preservation of Syrian refugees' food security status through appropriate and consistent food assistance, Objective 1, has therefore been prioritized as *Life-saving or preventing immediate risk of harm*.

Increased food, rent and service prices, combined with the refugee competition for informal unskilled labour has aggravated the food security and livelihood conditions of poor Jordanians living in host communities.⁵⁷ The improvement of food security conditions for vulnerable Jordanian populations through food and livelihood interventions, Objective 2, has therefore been prioritized under *Preventing Deterioration of Vulnerabilities*.

Although there is no direct correlation between low income and poor FCS there is evidence that low FCS is related to low consumption of animal protein and protein-rich food which can be a result of poor nutritional practices, attitude or knowledge among Syrian refugees and vulnerable Jordanian families.⁵⁸

In Jordan, livestock has a significant impact on rural well-being, particularly in the marginal areas bordering Syria. The disruption of the veterinary services in Syria and the unofficial border crossing of animals may cause uncontrolled spread of Trans-border Animal Diseases (TADs) resulting in threats to public health and in large animal losses.⁵⁹

The Inter-Agency Nutrition Assessment⁶⁰ found that Global Acute Malnutrition (or wasting) rates for boys and girls under the age of five, and pregnant and lactating mothers, are between 5–9 per cent (classified "poor" by WHO standards). The assessment also found that 4 per cent of Syrian boys and girls under the age of five and 6.3 per cent of pregnant and lactating mothers need treatment for Moderate Acute Malnutrition (MAM), recommending the provision of specialized nutritious food, Objective 3, which has been prioritized under *Preventing deterioration of vulnerabilities*.

56 WFP Jordan, *Monthly Monitoring Report*, July 2013.

57 FAO, *Agricultural Livelihoods and Food Security Impact Assessment and Response Plan for the Syria Crisis in the Neighboring Countries of Egypt, Iraq, Jordan, Lebanon and Turkey*, March 2013.

58 ACTED, *Food Security Situation and Livelihood Intervention Opportunities for Syrian and Host Communities in North Jordan*, June 2013.

59 FAO, *Agricultural Livelihoods and Food Security Impact Assessment and Response Plan for the Syria Crisis in the Neighboring Countries of Egypt, Iraq, Jordan, Lebanon and Turkey*, March 2013.

60 *Inter-agency Nutrition Assessment: Syrian Refugees in Jordan Host Communities and Zaatari Camp*, November 2012.

The UNHCR/WFP JAM⁶¹ found that a more coordinated and effective response between humanitarian actors is necessary to ensure food security and livelihoods of those most in need. In line with Objective 4, it has been prioritized under *Capacity-building/resilience*.

3. RESPONSE STRATEGY

The overall strategy aims to save lives and protect livelihoods through: a) food and nutrition assistance to Syrian refugees in Jordan; and b) livelihood support to vulnerable Jordanian households. Both are coordinated through evidence-based and gender-sensitive interventions.

The response will build on existing retail and agricultural market structures and channel humanitarian assistance through technologically advanced voucher/cash modalities to the extent possible, thereby supporting the Jordanian market economy. This will make the service provision more efficient and dignified, whilst further enhancing gender equality.

Assistance to refugees living outside camps will be increasingly targeted to identify and reach the most vulnerable. Criteria for identifying vulnerable households will be informed by the UNHCR/WFP JAM, the Inter-Agency Data Analysis 2013, and the planned Profiling Exercise 2013.⁶²

The Food Security Sector will provide food assistance to Syrian refugees registered with UNHCR living in urban/rural communities and camp settings through welcome meals, food parcels, value-based vouchers, electronic vouchers or cash assistance for food purchases. Various organizations within the sector provide food parcels as an interim safety net for extremely vulnerable unregistered Syrian refugees, on a case-by-case basis. Transit centres and large-scale camps include kitchens and retail infrastructures, thus enabling assistance through vouchers. Facilitating assistance through existing markets supports the Jordanian economy as beneficiaries redeem vouchers through local retailers in camps and communities.

The food security status of Syrian refugees and market prices for staple foods are monitored closely by WFP and partners to ensure the voucher assistance reflects food price fluctuations, thereby consistently ensuring an appropriate daily kilocalorie intake.

WFP will provide a mid-session snack to students attending UNICEF-supported camp schools to increase enrolment and attendance while also addressing short-term hunger, thereby improving students' concentration and performance. WFP and partners will implement a targeted supplementary feeding programme for the treatment of MAM, targeting boys and girls under the age of five⁶³ and pregnant and lactating mothers in camps and host communities, through the provision of specialized nutritious food.

61 UNHCR and WFP, *Joint Assessment Mission of Syrian Refugees in Jordan*, June 2013

62 A provisional 15 per cent reduction has been applied, thereby targeting 85 per cent of refugees with voucher assistance in local communities from April–December 2014.

63 Girls and boys between six–59 months.

All camp children under the age of two⁶⁴ will receive age-appropriate food as part of the General Food Distribution ration.

Distribution sites are designed in recognition of the cultural preferences of Syrian women and men, observing gender segregation. Women are encouraged to participate actively in all food assistance related activities by collecting and managing household entitlement and provided transport in camps to minimize cultural distress and ensure their dignity and safety.

In close coordination with the Government of Jordan, the Food Security Sector will provide targeted food assistance (food/cash/voucher) as well as livelihood support to vulnerable Jordanian households living in areas with high concentrations of Syrian refugees. Emergency livelihood interventions will support household agricultural production through provision of agricultural inputs. Of equal importance will be provision of emergency livestock interventions for disease surveillance, vaccination and treatment of animals, as well as TAD control.

A comprehensive national food security assessment should be conducted, which would include the impact of the crisis on Jordanian livelihoods. Such an assessment should consider how men and women are impacted differently by the crisis. Furthermore, under the Host Community Platform, capacity building will be implemented through support to the national school feeding programme and augmentation of livelihoods through food for asset projects.

64 Girls and boys between six–23 months.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Maintain food security and improve food availability, access and utilisation for Syrian refugees in Jordan through appropriate and consistent food assistance.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Syrian refugees received welcome meals, dry rations and/or food vouchers in camps and transit centres	200.000			Country Wide	34.812.301	34.812.301			UNHCR, WFP (ACTED, SCI)
Output 1.2 Syrian refugees received cash, vouchers or other forms of food assistance in urban and rural areas including vulnerable Syrian refugees awaiting UNHCR registration		510.000		Country Wide	110.602.407	110.602.407			JHCO, WFP (HRF, IR, SCI)
Output 1.3 Syrian girls and boys received school snacks in camp schools	50.000			Country Wide	947.413		947.413		WFP (ACTED, SCI)
Objective 1					146.362.121	145.414.708	947.413		

Objective 2. Improve food security including food availability, access and utilisation for vulnerable Jordanian populations through targeted food production and livelihood interventions.

Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Vulnerable Jordanian families living in areas with high concentration of Syrian refugees received food assistance			18.000	Country Wide	301.084	301.084			Caritas
Output 2.2 Vulnerable Jordanian families living in areas with high concentration of Syrian refugees provided with livelihood opportunities			55.000	Country Wide	1.823.769		1.823.769		ACTED, FAO (CARE)
Output 2.3 The production, access and utilization of diversified and nutritious food by vulnerable Jordanians families living in refugee concentrated areas is enhanced and increased			9.500	Country Wide	592.133		236.853	355.280	ACF, WWI
Output 2.4 Risk of Trans-boundary Animal Diseases (TAD's) contained and animal productivity of livestock herds in the north of Jordan improved			45.000	Country Wide	1.231.637		1.231.637		FAO
Objective 2					3.948.623	301.084	3.292.259	355.280	

Objective 3. Improve the nutritional status of Syrian refugees, particularly malnourished girls and boys under the age of five and pregnant and lactating women.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Moderately malnourished Syrian girls and boys under the age of five and pregnant and lactating women received specialized nutritious foods (SuperCereal Plus)	2.118	5.402		Country Wide	1.421.119		1.421.119		WFP (ACTED, MEDAIR, SCJ)
Output 3.2. Syrian girls and boys under the age of five and pregnant and lactating women with moderate acute malnutrition attended until they have recovered	2.118	5.402		Country Wide					WFP (ACTED, MEDAIR, SCJ)
Output 3.3. Nutritional habits of Syrian women, girls, boys and men have improved through healthy behaviour training, communication and sensitization	94.000	239.700		Country Wide	402.650			402.650	FAO (ACTED), WFP (ACTED, MEDAIR, SCJ)
Objective 3					1.823.769		1.421.119	402.650	

Objective 4. Ensure effective and coordinated sectoral response through evidence-based food security and livelihood interventions.									
Output	Targeted population by type (individuals) in 2014			Location(s)	Detailed requirements from January - June 2014				Partners (brackets indicates appealing on behalf of)
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 4.1. Food sector activities coordinated to ensure complementarity of activities by different food sector actors in order to minimize duplication and increase efficiency of assistance				Country Wide	17.784			17.784	JHCO, WFP
Output 4.2. Food sector documents, projects and assessments covering various aspects of protection in food security and livelihood interventions applying the gender marker tool				Country Wide	11.855			11.843	WFP
Output 4.3. Comprehensive (quantitative and geographically significant) food security and livelihood assessments conducted taking into account the different and special needs of women, girls, boys and men				Country Wide	426.777		94.741	331.594	ACTED, Caritas, FAO, WFP
Objective 4					456.416	0	94.741	361.221	

Sector indicators*	Target
# of newly arriving refugees receiving welcome meals, dry ration & Vouchers	550.000
# of Syrian women, girls, boys and men, receiving food vouchers or other forms of food assistance in urban and rural areas	762.500
# of Syrian girls and boys receiving school snacks in camp schools	50.000
# benefiting from livelihood opportunities	55.000
# of malnourished girls and boys under the age of five and pregnant and lactating women reaching discharge criteria/recovery rates	7.520
* these are just a sample of the total indicators being monitored under the RRP6 Jordan	

Food - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	152.590.456	145.715.792	5.755.532	1.119.131	169.529.887

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Food Security in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	750,000	450,000	300,000
ACTED	1,700,000	1,020,000	680,000
Caritas	2,118,644	1,271,186	847,458
FAO	6,500,000	4,400,000	2,100,000
JHCO	4,012,500	2,407,500	1,605,000
UNHCR	1,489,199	893,519	595,680
WFP	305,050,000	141,848,250	163,201,750
WVI	500,000	300,000	200,000
Total	322,120,343	152,590,456	169,529,887

H. Education response

Lead Agencies	UNICEF and SCI		
Participating Agencies	ACTED, ADRA, AVSI, Caritas, DRC, FCA, Global Communities, ILO, IOCC, IRD, JEN, JRS, JHAS, LWF, Madrasati Initiative, Mercy Corps, MA, NICCOD, NRC, Questscope, RI, SCI, SCJ, TDH-I, Taghyee, UNESCO, UNHCR, UNICEF, WVI, War Child UK. <i>Participating Government Entity: MoE</i>		
Objectives	<ol style="list-style-type: none"> 1. Children and youth have sustained access to appropriate education opportunities 2. Children and youth benefit from learning environments that promote quality education, protection and their well-being. 		
Requirements from January to June 2014	US\$51,790,265		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$28,678,219	US\$16,049,166	US\$7,062,881
Total 2014 indicative financial requirements	US\$86,317,109		
Contact Information	Maria Paradies, mparadies@unicef.org		
Gender Marker	2A		

1. ACHIEVEMENTS AND CHALLENGES

As the crisis in Syria enters its third year and the emergency assistance to refugees protracts, Syrian children's well-being and futures will be shaped by their experiences in Jordan. Uninterrupted education, including early childhood interventions, and physical and psycho-social protection, is essential to ensure they acquire the skills necessary to integrate into the host society and to rebuild their country once they return. The number of Syrian children registered in Jordan's host community public schools and camp schools increased significantly; from 30,000 children in March 2013 to over 83,000 children⁶⁵ in late September 2013. This represents 44 per cent of the total registered school-aged Syrian children with UNHCR, and includes over 1,000 children benefitting from formal education in Zaatari camp and the Emirati Jordanian Camp. While the Government of Jordan (GoJ) has demonstrated commitment to support vulnerable Syrian children to continue with their formal schooling in Jordan, the ever-increasing number of Syrian refugees in country is placing enormous pressure on a public education system already strained due to a deteriorating economic climate.

Since the beginning of 2012, Education Sector partners have been providing emergency education assistance to displaced Syrian children within the framework of the Regional Response Plan. In formal education, UNICEF, together with the Ministry of Education (MoE), has ensured that Syrian children benefit from free access to public schools across the country, regardless of their status.

⁶⁵ MoE, September 2013

Pending their registration with the Ministry of Interior, Syrian refugee children have access – with donors' support – to public schools during the academic year 2013/14. Remedial and catch-up classes have been provided in both host communities and camps so vulnerable Syrian children are able to overcome the learning difficulties they were facing after weeks, and sometimes months, without school access.

In 2013, in order to relieve overcrowded classrooms in host community public schools, the MoE and UNICEF provided teacher training and financial support to operationalize the double shifting of 77 schools in directorates with high numbers of Syrian children. Furthermore, UNICEF and Save the Children International (SCI) have completed small-scale renovations and established child friendly spaces (CFS) in 44 schools in directorates with high numbers of Syrian students. In addition, 23 schools received prefabricated classrooms to increase the number of learning spaces. This was based on the public school absorption capacity mapping exercise jointly carried out by UNICEF and MoE in August 2013. Nearly 3,000 teachers, counselors, and MoE staff have been trained by various partners including UNICEF/MoE and UNESCO. Training included basic induction and psycho-social topics to strengthen capacity of teachers to respond to students' needs. Furthermore, over 12,000 children have benefited from psycho-social activities in schools and community centres.⁶⁶

Outreach activities ensured accurate information regarding education services are provided to families and children. Through its Help Desk project, Save the Children Jordan (SCJ) in partnership with UNICEF reached over 141,000 parents and children across the country with necessary and vital information in order for Syrian children to access education services and follow-up referral services.⁶⁷

Various education partners including UNICEF, SCI, Questscope, Caritas, Finn Church Aid, Jesuit Refugee Service, Madrasati Initiative, East Amman Charity, Yarmouq Baqa Centre, Association of Volunteers in International Service, Children without Borders, Norwegian Refugee Council, Nippon International Cooperation for Community Development and Un Ponte Per have provided informal/non-formal education, basic life skills, vocational training, and recreational activities to over 39,000 adolescent girls and boys as well as youth in host communities and the Zaatari camp. These services assist those adolescents who are not able to re-integrate into formal education. In addition, approximately 7,100 young children have benefited from pre-primary education services provided by SCI and Jesuit Refugee Service. In addition, almost 69,000 vulnerable Syrian and Jordanian children have received education kits (basic stationery items), uniforms, and basic clothing.

In light of the clear gap in assistance to adolescent girls and boys and youth, education actors endeavored to further strengthen the coverage and coordination through a dedicated forum: the Youth Task Force. Created under both the Education Sector and Child Protection (CP) Sub-Sector, this task force aims to ensure that existing gaps are filled. Additionally, it strives to guarantee that youths' education, peace building and participation needs are addressed in a participatory manner in Zaatari camp.

⁶⁶ The figures are as of end of September 2013 (sources: MoE, UNICEF)

⁶⁷ The first phase of the assessment done in August and September in Amman, Ramtha, Mafraq, Irbid, Jerash, Jordan Valley, and Zarqa (16,641 cases tracked) indicates that the main causes for children to be out of school are the following: no school capacity (30 per cent), no financial ability (30 per cent), distance (16 per cent), Child labour (9 per cent)

CHALLENGES

Ensuring continuous and adequate support for the Jordanian public education system to absorb a growing number of Syrian refugee children in host communities and build MoE capacities to respond to future “shocks” remains a key priority and challenge. The capacity of the public education system is overstretched with an increasing number of Syrian refugee children as well as some 35,000 Jordanian students moving from private schools to public schools⁶⁸ during the 2013/14 academic year. The lack of space and capacity in public schools hinders the continued access for Syrian girls and boys. In Zaatari camp, the current formal school infrastructures have capacity for up to 15,000 girls and boys yet close to 25,000⁶⁹ children are eligible for formal education.

Concomitantly, Syrian parents in host communities face economic and geographic challenges (school costs and distance, respectively) which prevent them from sending their children to school. Moreover, as the vulnerability of Syrian refugee families increases, other protection issues such as child labour and early marriage are hindering children’s access to education. Refugee children who are able to access public schools often fall behind for reasons including differences in the curriculum, and the loss of school time.

Persons with special needs, especially children with physical disabilities, are often the most affected group as their access to services is further limited by displacement. Assistance to this population is further constrained by a lack of data. While the GoJ is committed to inclusive education, several factors pose significant obstacles to the inclusion of children with disabilities in mainstream education: a) accessibility of school facilities and transportation; b) lack of resources and capacity in schools; c) lack of public awareness about the rights of children with disabilities to education, in particular among parents of those children. Serving this population requires an innovative approach that addresses these interrelated issues, and responds to the immediate needs of Syrian refugee children with disabilities while building the long-term capacity of the MoE to ensure children with disabilities the right to education.

68 MoE and Al Rai newspaper

69 Based on 100,000 estimated refugee population in Zaatari camp, approximately 25 percent was calculated as eligible for formal education.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ (*school-aged children 36% of total population)
Camp refugees	200,000	72,000*
Non-camp refugees	600,000	216,000*
Other affected population	700,000	40,000 ⁱⁱ

i Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs.

ii Based on highest figure of Jordanians receiving essential learning materials.

With 550,000 Syrian refugees registered in Jordan as of October 2013,⁷⁰ some 190,000⁷¹ are school-aged boys and girls. Of those, over 83,000⁷² are enrolled in public schools in camps and host communities. 47,000 children still need to be enrolled. Almost 60,000 more require alternative education opportunities through massive outreach, with specific efforts to address barriers faced by girls and boys. Jordan has accepted Syrian children in public schools with financial support from donors; however, the burden on the public system is taking its toll. Double-shifting in overcrowded schools to absorb Syrian students is affecting quality and derailing ongoing public education system reform. In August 2013, the MoE estimated that hosting a further 60,000 children in the public system, with infrastructure costs, would amount to US\$344 million.

According to the overall assumption of the RRP6 2014, up to 800,000 Syrian refugees will be in Jordan by the end of December 2014. The Education Sector estimated some 36 per cent of the population will be school-aged children (5–17 years)⁷³ which represents 147,000 boys and 131,000 girls. Based on estimation, up to 200,000 Syrian boys and girls will require access to formal education while 88,000 Syrian boys and girls will need alternative education opportunities such as informal and non-formal education. During the process of RRP6 target-setting, the Education Sector aims to provide formal education to 150,000 school-aged children representing 75 per cent of the total formal education needs of school-aged children. An additional 62,500⁷⁴ Syrian boys, girls, and youth are to be provided with alternative education services such as informal or non-formal education coupled with life skills activities. The services are also provided to Jordanian children. In addition, almost 10,700 Syrian and Jordanian young boys and girls will be provided with pre-primary education, and 4,520 children with disabilities will receive the support necessary to access education services.

70 UNHCR refugee registration data, October 2013.

71 UNICEF, *Analysis of Out of School Students*, October 2013.

72 MoE enrolment data, September 2013.

73 According to UNHCR demographic data of registered Syrians, 36 percent of total registered Syrians are of age between 5-17 years. In particular, 17.8 per cent are boys and 17.1 per cent are girls.

74 This represents 70 per cent of the Syrian school aged children who are not readily eligible for formal education.

According to the needs assessment conducted in Zaatari camp in April 2013, fewer boys than girls were attending secondary schools.⁷⁵ When linking school attendance to data on CFS, the attendance of out-of-school boys is double that of girls.⁷⁶ Girls and boys also advised that they were concerned about the level of violence on the way to and from school as well as within the school. Teachers mentioned that aggression between boys is common.⁷⁷ Psycho-social support is still needed so as to promote a conducive learning environment where all students feel safe and protected.

Servicing the needs of adolescents and youth remains a clear gap resulting from limited access to schooling, life skills and vocational training. The provision of informal and non-formal education services for Syrian adolescent boys and girls and youth in host communities remains a key focus for 2014. Psycho-social support for children in education settings is needed to ensure that children can learn and play with their peers while promoting peace building and integration within classrooms.

Few children with disabilities access education services due to physical and cultural barriers, along with the lack of specialized staff to help with their integration. Support for these children to access adequate education facilities is a priority along with awareness-raising activities in 2014. Early childhood development and pre-primary education for younger children needs to be scaled up to ensure young children have better chances to access and succeed in primary education. In order to facilitate the increasing number of education actors as well as to ensure that a proper referral mechanism is in place, the Education Sector will continue its efforts through quality information management. It will continue to link and reinforce collaboration with other sector services, in particular with Protection, Health and Water, Sanitation and Hygiene so as to address the needs and the challenges mentioned above.

The priority for 2014 will be to ensure uninterrupted access to public education for displaced Syrian children across the country including those in refugee camps. Given the large number of refugees living in host communities, Syrian children are enrolling in public schools across Jordan. Support to boost the capacity of the public education system is much needed including providing extra learning spaces as well as remedial/catch-up classes for those children who have missed out on weeks and months of schooling. Capacity building of teachers is also a priority to ensure the quality education adherent to global norms and standards established by Inter-Agency Network for Education in Emergencies Minimum Standards. Moreover, to ensure equal access to all school-aged boys and girls for education, the Education Sector and the CP Sub-Sector are collaborating to ensure child centred services are provided in both CFS and schools.

75 Education Sector, *Joint Education Needs Assessment in Zaatari Camp*, April 2013.

76 Education Sector, *Joint Education Needs Assessment in Zaatari Camp*, April 2013.

77 Education Sector, *Joint Education Needs Assessment in Zaatari Camp*, April 2013.

3. RESPONSE STRATEGY

As the crisis in Syria continues, schooling for boys and girls is further disrupted resulting in a longer-term impact on an entire generation of children. The key assumption of the education strategy are:

1. The GoJ continues to accept displaced Syrian children (regardless of their registration status with UNHCR) in public schools throughout the academic years of 2013/14 and 2014/15;
2. Children in camp settings are to receive relevant education services within the camps;
3. Syrian refugee population continues to enter Jordan with a maximum planning figure of 800,000 by December 2014.

UNICEF and its partners are working to ensure all vulnerable Syrian boys and girls have access to appropriate learning opportunities wherever they are, recognizing that uninterrupted access to education is key to shaping their future and that of their country.

The Host Community Platform, an initiative addressing the longer-term developmental needs and impact of refugees, is also being created for the Education Sector and will ensure that the humanitarian assistance within the RRP6 framework is linked up with medium and longer-term development needs in host communities. Student councils and Parent Teacher Associations to ensure community and student participation represent a crucial element in reducing the potential negative impact of the refugee influx and transforming a crisis into an opportunity for a longer-term improvement. UNICEF, together with SCJ, is supporting the MoE to ensure that all teachers sign a Code of Conduct in 2014. Syrian teachers and Jordanian teachers working in camps and in double-shifted schools in host communities will be prioritized.

The Education Sector will continue to collaborate with the Protection Sector (CP and Mental Health and Psycho-social Support Sub-Sectors) on key issues such as psycho-social support and reducing the exposure to child labor and early marriage risks through accessing education, and ensuring a safe learning environment in schools. Education actors will design psycho-social support activities to ensure that the needs of boys and girls are adequately and consultatively addressed. Following the lessons learnt, key education actors will encourage synergy and complementarity with child protection. This will include provision of informal education services in CFS and youth friendly spaces.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Children and youth have sustained access to appropriate education opportunities.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 School aged Syrian boys and girls benefit from formal education (primary and secondary)	50.000	100.000	7.505	Country Wide (Amman, Aqaba, Irbid, Karak, Ma'an, Mafraq, Tafileh, Zarqa)	12.137.292	12.077.292	60.000		ACTED, DRC, IRD, RI, TDHI, UNICEF, WarChild UK, WVI (MoE, MercyCorps, Save the Children Jordan)
Output 1.2 Out-of-school boys and girls including adolescents and youth (6-24 years) benefit from alternative education services such as informal, non-formal education, and basic life skills activities.	6.000	18.000	6.000	Country Wide (Amman Aqaba, Azraq, Emirati Jordanian Camp (EJC), Irbid, overnorate, Karak, Ma'an Mafraq, Tafileh, Zaatari Camp, Zarqa)	12.129.727	11.620.927		508.800	ACTED, AVSI, Caritas, DRC, FCA, Global Communities, JRS, NICCOD, NRC, RI, Save the Children, Save the Children Jordan, Taghyeer, TDHI, UNESCO, UNICEF, WarChild UK, WVI, (Yarmouq Baqa, East Amman Charities, SCJordan)
Output 1.3 Boys and girls (3-6 years) have access to pre-primary education services	4.300	2.060	840	Country Wide (Ajlun, Amman, Irbid, Zaatari Camp, Zarqa)	1.220.520		1.132.320	88.200	Caritas, IOCC, JRS, Save the Children International, WarChild UK, WVI
Output 1.4 Children with specific needs access educational and psychosocial services	500	1.000	500	Country Wide (Amman, Irbid)	5.220.000	4.980.000	240.000		Caritas, Mercy Corps, UNHCR, UNICEF (MercyCorps)

Output 1.5 Youth benefit from Secondary and higher education	2.400	750	750	Country Wide (Amman, Irbid, and camps (Zaatari, EJC, and Azraq Camp)	5.950.800		600.000	5.350.800	JRS, NRC, RI, UNESCO, UNHCR, UNICEF (NRC)
Objective 1					36.658.339	28.678.219	2.032.320	5.947.800	

Objective 2. Children and youth benefit from a learning environment that promotes quality education, protection and well-being.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Boys and girls benefit from activities that support psychosocial development and resilience in public schools	5.000	5.000	5.000	Country Wide (Amman, Irbid, Zarqa)	1.206.600		1.206.600		MADRASATI, UNICEF, WarChild UK (Madrasati, East Amman Charities, Yarmouq Baqa, Relief International)
Output 2.2 Quality of teaching is ensured through training of education service providers such as teachers, school supervisors, and counsellors	1.250	70	2.450	Country Wide (Amman, Irbid, Mafraq and Camps (EJC and Zaatari))	1.115.081			1.115.081	ILO, NRC, Save the Children International, Taghyeer, UNESCO, UNHCR, UNICEF (Cader, MoE, **All agencies doing education train their own teachers be in in formal or non-formal education)
Output 2.3 Children receive essential learning materials including basic stationery and other education supplies	50.000	40.000	40.000	Country Wide (Amman, Aqaba, Azraq, Irbid, Jarash, Ma'an, Mafraq, Tafileh Zarqa, and Camps (EJC, and Zaatari))	3.840.211		3.840.211		ADRA, DRC, JHAS, LWF, MA, NICCOD, NRC, TDHI, UNICEF, WarChild UK (Save the Children Jordan)
Output 2.4 Jordanian public schools supported with additional learning spaces	40.000	40.000	20.000	Country Wide (Amman, Azraq Irbid, Mafraq, Zarqa, and Camps (EJC, and Zaatari))	8.970.035		8.970.035		ACTED, JEN, LWF, MA, MADRASATI, NRC, Save the Children International, UNHCR, UNICEF (UNICEF, Madrasati)
Objective 2					15.131.927		14.016.846	1.115.081	

Sector indicators*	Target
# of boys and girls, parents, community members provided with information relevant for education and assisted with referral services	335.360
# of school aged Syrian boys and girls registered in Jordanian public schools	151.000
# of school aged boys and girls who attend remedial and catch-up classes	21.050
# of children and youth benefiting from alternative education service such as informal education and life skills	138.266
# of children and youth benefiting from alternative education service such as non-formal education	13.281
# of boys and girls with specific needs provided with inclusive education and psychosocial services	3.290
# of boys and girls benefitting from psychosocial development course in public school setting including extra-curriculum activities, recreation activities and sports.	17.300
# of boys and girls provided with individual education kits (school bags and stationery)	165.210
# of schools provided with furniture, equipment, etc to support formal education	151
# of schools provided with prefab classrooms, double-shifted, rented space, etc to support formal education	252
* these are just a sample of the total indicators being monitored under the RRP6 Jordan	

EDUCATION - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	51.790.265	28.678.219	16.049.166	7.062.881	34.526.844

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Education in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	380,000	228,000	152,000
ADRA	77,500	46,500	31,000
AVSI	300,000	180,000	120,000
Caritas	3,250,000	1,950,000	1,300,000
DRC	1,380,000	828,000	552,000
FCA	1,500,000	900,000	600,000
Global Communities	1,000,000	600,000	400,000
ILO	30,000	18,000	12,000
IOCC	30,000	18,000	12,000
IRD	500,000	300,000	200,000
JEN	1,500,000	900,000	600,000
JHAS	200,000	120,000	80,000
JRS	667,000	400,200	266,800
KnK	300,000	180,000	120,000
LWF	1,186,440	711,864	474,576
MA	290,000	174,000	116,000
Madrasati Initiative	2,525,900	1,515,540	1,010,360
Mercy Corps	2,000,000	1,200,000	800,000
NICCOD	292,000	175,200	116,800
NRC	8,895,000	5,337,000	3,558,000
RI	2,700,000	1,620,000	1,080,000
SCI	3,125,000	1,875,000	1,250,000
SCJ	400,000	240,000	160,000
Taghyeer	220,000	132,000	88,000
TDH I	369,000	221,400	147,600
UNESCO	2,747,679	1,648,607	1,099,072
UNHCR	3,750,000	2,250,000	1,500,000
UNICEF	44,759,280	26,855,568	17,903,712
WarChild UK	385,110	231,066	154,044
WVI	1,557,200	934,320	622,880
Total	86,317,109	51,790,265	34,526,844

I. Health response

Lead Agencies	UNHCR and WHO Reproductive Health Sub-Sector: UNFPA Mental Health and Psycho-social Support Sub-Sector: WHO and IMC Nutrition Sub-Sector: UNHCR		
Participating Agencies	Action Aid, Aman Association, ACTED, Caritas, CVT, FRC, HI, IOM, IMC, IRC, IRD, IRW, JHAS, Medair, MdM, NICCOD, OPM, RHAS, RI, SCJ, TDHI, UNFPA, UNHCR, UNICEF, UNOPS, UPP, WHO,		
Objectives	<ol style="list-style-type: none"> 6. Improve equitable access, quality and coverage to comprehensive primary health care for Syrian refugee women, girls, boys and men in Jordan by end of 2014. 7. Improve equitable access, quality and coverage to essential secondary and tertiary health care for Syrian refugee women, girls, boys and men in Jordan by end of 2014. 8. Support the capacity of the national health care system to provide services to Syrian women, girls, boys and men and vulnerable Jordanians in the most affected governorates. 9. Improve coverage of comprehensive health and rehabilitation services to Syrian refugees through integrated community level health and rehabilitation interventions by end of 2014. 		
Requirements from January to June 2014	US\$72,652,177		
Prioritized requirements (Jan-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$37,330,099	US\$31,299,682	US\$4,022,396
Total 2014 indicative financial requirements	US\$120,981,008		
Contact Information	Ann Burton, burton@unhcr.org Sabri Gmach, gmachs@who.int Shible Sahbani, Sahbani@unfpa.org Zein Ayoub, ayoubz@who.int Mary Jo Baca, mjBaca@InternationalMedicalCorps.org		
Gender Marker	2A		

1. ACHIEVEMENTS AND CHALLENGES

Much has been achieved from January to September 2013. The Ministry of Health (MoH) has maintained its policy of free access to primary and secondary care in their facilities for registered Syrians living outside of camps. Most refugees therefore have the right to access MoH services.

The strategic information base has improved and is guiding the Health Sector response both in camp and non-camp settings. In camps, UNHCR's health information system provides camp coordination groups and the MoH with timely information to respond to outbreaks as well as weekly health indicators to track coverage, health care utilization rates and select indicators for communicable diseases of concern. Outside camps, a number of key assessments have better determined the gaps in coverage and needs among both Syrian refugees and Jordanian host communities. For

instance, a joint rapid health facility assessment⁷⁸ was conducted in 313 MoH facilities in five northern governorates in June, revealing the impact of the Syrian influx. Coordination platforms at national and provincial levels have been strengthened by WHO and UNHCR, with increasing utilization of data and survey results to guide their work to ensure gaps and emerging needs are addressed. Direct support to MoH has been intensified in recognition of the massive burden on the national health care budget posed by the Syrian refugee presence. MoH immunization capacity was strengthened with over US\$4 million of in-kind support to cold chain equipment and vaccines provided by UNICEF and US\$5.52 million worth of essential medicines supported by WHO. The MoH has also supported Médecins Sans Frontiers to open a trauma surgery facility in Ramtha Public Hospital to support management of injured Syrians crossing the border, and has granted approval for ICRC to support Mafraq Hospital in war-wounded surgery. UNHCR delivered US\$1.6 million worth of equipment to strengthen inter alia blood bank services in Mafraq, and renal dialysis capacity and neonatal intensive care in the north.

A measles outbreak was successfully contained with two mass campaigns jointly conducted by MoH, UNICEF, WHO, UNHCR and UNRWA in Zaatari and Mafraq and Irbid Governorates led by MoH; as a result, 82 per cent of children aged between six months to 15 years in Zaatari and 86 per cent of Syrians in Irbid and Mafraq were vaccinated against measles. Recognizing the potential impact on the host community, 533,008 Jordanian children were also vaccinated. Through the collaborative efforts of MoH, IOM, UNHCR and WHO, the case detection and cure rates for tuberculosis cases are adequate and a Public Health Strategy for Tuberculosis among Syrian Refugees in Jordan was adopted by the MoH.⁷⁹ Following a reported polio outbreak in Syria, an immunization campaign was carried out in late October in Zaatari camp, with 94 per cent coverage of children aged 0-59 months achieved.

Primary health care and essential secondary care continued to be provided for unregistered Syrians through a network of NGO clinics, particularly through the Jordan Health Aid Society (JHAS). At least 2792 refugees (1670 females, 1122 males) received inpatient secondary care supported by UNHCR through JHAS and Caritas while 3451 (2041 females, 1410 males) received outpatient secondary care; and 744 refugees (370 in camps, 374 out of camp; 295 females, 449 males) received life-saving, essential tertiary care. Efforts to expand access to Reproductive Health (RH) services continued with 213 health workers trained on RH quality and standards of care, Minimum Initial Service Package and clinical management of sexual violence. In Zaatari, 88 per cent of the 1628 deliveries between January to August were attended by skilled personnel, neonatal mortality audit was introduced and maternal mortality remains at zero. To strengthen nutrition of infants and young children 29,238 mothers/caregivers received infant and young child feeding (IYCF) services by Save the Children Jordan and Medair, supported by UNICEF; and the MoH has adopted, for the first time, Protocols in the Inpatient and Community-Based Management of Acute Malnutrition.⁸⁰ Mental Health and Psycho-social (MHPSS) services were expanded with 600 service providers

78 MoH, WHO, UNHCR, UNICEF, UNFPA, Harvard/IAPS, JUST & MDM *Joint Rapid Health Facility Capacity & Utilization Assessment*, July 2013.

79 Hashemite Kingdom of Jordan National TB Program, UNHCR, IOM, WHO, CDC, *Public Health Strategy for Tuberculosis among Syrian Refugees in Jordan*, July 2013

80 Hashemite Kingdom of Jordan MoH, *Inpatient and Outpatient Management of Acute Malnutrition*, 2013.

trained in various aspects of MHPSS. In Azraq, IFRC established a 40-bed hospital and IMC established primary health care, mental health and reproductive health services ready to receive refugees.

Principle challenges and concerns for the sector include:

Coordination between humanitarian and development actors is already in place but needs to be developed further. A comprehensive overview of humanitarian and development support to the national health sector needs to be elaborated. Syrian community involvement in the health sector is insufficient, and a comprehensive picture of different actors and their interventions is still being developed, which has affected gap analysis. Syrian refugee providers remain outside of the mainstream coordination mechanisms and fragmentation of health services in Zaatari – while improving – remains problematic. There is insufficient quantitative information about the access and uptake of non-camp refugees to health care services and their health status. Restriction of movement for women and girls may limit their access to health services, while lack of female providers for reproductive health services is also a significant barrier.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	200,000
Non-camp refugees	600,000	600,000
Other affected population	700,000 ⁱⁱ	300,000

i Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs.

ii This total does not include the 3,850,000 individuals who will benefit from vaccinations.

With increasing numbers of Syrian refugees entering Jordan and the clearing of the registration backlog, demand on the public sector as well as NGO-supported clinics continues to grow. While demand for acute care is high, management of chronic non-communicable diseases (NCDs) and demand for prevention services is weak. The Syrian refugee health profile is that of a country in transition with a high burden of NCDs; 29 per cent of consultations in Zaatari in the first three months of 2013 were for chronic NCDs (diabetes constituted 17 per cent and hypertension 15 per cent). Communicable diseases also remain a public health concern with a measles outbreak in Jordan in 2013; 85 cases of tuberculosis diagnosed amongst Syrians since March 2012; and increasing numbers of both imported leishmaniasis and hepatitis A cases in areas hosting large numbers of Syrians. Of concern is the low routine immunization coverage in Zaatari and the patchy coverage of refugees outside of camps particularly in light of the polio outbreak with 13 confirmed cases in Syria as of mid-November. The last virologically-confirmed polio case in Jordan was reported on 3 March 1992.⁸¹

81 WHO, WHO EMRO: Jordan, 2013.

To support the continued provision of essential health services, major needs and priorities have been identified at community level, primary health care level, secondary and tertiary care and the national health system.

1. At community level, coverage of outreach and Syrian community involvement in the promotion or provision of health services is insufficient. This undermines Syrian access and coverage of key services, community capacity building, self-reliance and the ability to withstand future adversity. There is a need for greater access of refugees to information and enhanced refugee participation and engagement in identification of health and disability related needs, provision of information and linkages with health and rehabilitation services.
2. At primary health care level there is limited access for unregistered refugees, those with expired asylum seeker certificates and those with a Ministry of Interior Card that does not match their current place of residence. Assessments have demonstrated that these groups are very vulnerable and may incur significant out-of-pocket expenditures on health.⁸² Moreover, many refugees are not aware of available health services and how they can be accessed. In MoH facilities, there is currently less demand from refugees for preventive services such as immunization, antenatal, postnatal care and family planning compared to curative services. There is critical need to strengthen uptake of routine immunization (Jordan has 10 vaccines in its schedule) and support campaigns for both Syrian and Jordanian children to respond to the threat of polio. Chronic NCD management is not always satisfactory, with inadequate monitoring, lack of a multidisciplinary approach and treatment interruptions. There are inadequate services for children with specific disabilities, e.g. cerebral palsy, while rehabilitation services do not meet the needs of the large numbers of injured. IYCF practices are poor and there is a high rate of formula feeding. While services exist to clinically manage sexual and gender-based violence (SGBV), the geographical coverage is limited and quality is not always satisfactory; moreover community and provider knowledge of services is low. Mental health problems are expected to be exacerbated as most refugees spend their third year in Jordan; furthermore there is an over-emphasis on trauma and less focus on supporting natural coping strategies and family/community resiliency; the geographic coverage of services needs to be widened; and more attention is needed for chronic mental health conditions, cognitive impairment, and pervasive developmental disorder.
3. Secondary and tertiary care need a continued high level of funding to ensure access to essential care such as deliveries, caesarean sections, war injuries, congenital cardiac abnormalities and renal failure. Despite the high level of care available in Jordan, gaps in service delivery exist including long-term post-operative care – especially for injuries – and surgical management of certain complications such as pressure sores. Costly complex treatments such as certain types of cancer cannot be supported with available resources necessitating difficult choices relating to resource allocation. A Reproductive Health

82 UNHCR and WFP, *Joint Assessment Mission of Syrian Refugees in Jordan*, June 2013.

Assessment⁸³ identified access to delivery services for unregistered non-camp refugee women as problematic due to lack of awareness of available mechanisms to ensure coverage. Due to the security situation, Gynécologie Sans Frontières was forced to pull out of Zaatari in September, leaving a gap in delivery services.

4. The MoH's critical role in providing refugee health services needs to be recognized and supported. Facilities in areas hosting large numbers of refugees are often overburdened. The Health Facility Assessment in the five northern governorates of Irbid, Mafraq, Jerash, Ajloun and Zarqa demonstrated that over 9 per cent of total patient visits were by Syrians. This manifests in shortages of medications – especially those for chronic diseases – and beds, overworked staff and short consultation times. This also fosters resentment amongst the Jordanian population. National capacity to provide community-based management and inpatient management of acute malnutrition has not yet been developed. The health information system in urban settings needs to be integrated nationwide and to be able to routinely disaggregate Syrians and Jordanians in key areas.

3. RESPONSE STRATEGY

The overall aims are to reduce excess morbidity and mortality; minimize the impact on the host community in order to promote peaceful co-existence and continue development gains; support the MoH to continue to meet the needs of refugee women, girls, boys and men and those of its own population; and promote male and female refugee participation and engagement. In addition, there should be continued monitoring of refugee health status, coverage and access especially for the most vulnerable, disaggregated by gender and age.

The MoH leadership through the National Emergency Coordinating Committee in coordinating and responding to the influx should be supported by the international community. Furthermore, strong coordination and effective partnerships should exist between UN agencies, NGOs and the national Health Sector to utilize the comparative advantages of each, avoid duplication and ensure that resources are used in the most cost-efficient way and with maximum impact. A coordination structure is already in place and includes sub-sectors on Nutrition; MHPSS; and RH. Links with other sectors will also be strengthened, such as with Protection on the health response to SGBV. In order to do this activities within the Health Sector will:

1. Respond to immediate health needs of new arrivals including those with injuries, NCDs and specific needs.
2. Continue the provision and facilitation of access to comprehensive primary and essential secondary and tertiary health services both in and out of camps and strengthen the community health approach.

83 Boston University School of Public Health, UNHCR, UNFPA, CDC, Women's Refugee Commission, *Reproductive Health Services for Syrian Refugees in Zaatari Refugee Camp and Irbid City, Jordan. An Evaluation of the Minimum Initial Service Package*, 17–22 March 2013.

3. Strengthen the capacity of the national health system in most affected areas to respond to the current crisis, withstand future shocks and meet associated needs of the Jordanian population.

These three approaches will operate synergistically and as part of a continuum.

The response strategy in Zaatari and Azraq camps will be to ensure effective coordination to address gaps, including logistical and human resources support to MoH in order to strengthen their lead coordination role; continued monitoring of refugee health status, coverage and access especially for the most vulnerable; and promoting linkages with national health systems so that support will go to nearby MoH facilities where possible rather than creating high-level systems inside the camps.

For refugees in non-camp settings the national system will be supported through adequate human resources in areas most affected by Syrians, essential medicines, supplies, equipment and critical infrastructural improvements, and performance-based incentives for staff. Specific capacity gaps will be addressed through training, such as inpatient and outpatient management of acute malnutrition, clinical management of SGBV, integration of mental health into primary health care; or through staff secondment or human resource support, such as chronic disease management and specialized trauma surgery. The geographic focus on northern governorates is important, but attention will also be given to the acute health sector challenges faced in a number of middle and southern zone governorates.⁸⁴

In relation to SGBV, health care providers play an important role in identification of survivors and critical clinical management and referral. This will be strengthened through training and improved monitoring in coordination with the Protection Sector and Family Protection Department. Critical gaps outside the camps which are not able to be met by the MoH will be met through supporting NGO clinics and support for referrals. Continued support to NGOs to relieve the burden on MoH facilities is needed until the MoH facilities are able to manage the increased workload. A health information system will be introduced in NGO facilities in order to contribute to the available data on Syrians, including data disaggregated by gender and age.

In both camp and non-camp populations two additional approaches will be developed. Firstly, a strategy to strengthen refugee participation and engagement in provision of information and selected health services (e.g. diarrhoea management with oral rehydration solution, behaviour change communication, Measuring Mid-Upper Arm Circumference screening, referral to Primary Health Centres), by training and supporting male and female community health volunteers, will be developed by agencies working in the Health Sector and resources sought for this. Secondly, vulnerability identification and scoring will be improved with the aim of better targeting and reaching those most vulnerable with essential services and assistance and monitoring of assistance against needs. This will build on a pilot project initiated in Zaatari in 2013 and expand to other sectors.

84 Such as Zarqa, Maadaba, Balqa, Maan, Karak and Tafilah.

In response to the polio outbreak in Syria the MoH, WHO, UNICEF and other actors in Jordan have developed a polio prevention and response strategy. This includes a total of four national immunization campaigns targeting all children under five including Syrians in camp and non-camp settings, strengthening active and passive surveillance for acute flaccid paralysis cases, introducing environmental surveillance, establishing three walk-in cold rooms and enhancing social mobilization for immunization.

The Health Sector will continue to conduct assessments in a coordinated manner of needs and capacities (including refugee women, girls, boys and men), coverage and impact (gender disaggregated), as well as ensure periodic monitoring and evaluation and the availability of the necessary information to inform strategic planning processes. In particular the observed gender differences in mental health consultations (more males than females), psychiatric admissions (more females than males) and injuries (more males than females) will be explored to determine if this represents a morbidity pattern or differential access.

In transitioning from humanitarian relief in the Syrian refugee context there is a need to link with the broader development initiatives in-country. This will entail stronger coordination both within and between the humanitarian and development sectors at all levels, Health Sector mapping of all development initiatives and the relationship between the humanitarian effort and development efforts, and development of longer-term plans to strengthen gaps highlighted by the humanitarian situation.

Certain gaps are beyond the capacity of the Health Sector to address, including the MoH staffing freeze which limits their ability to respond to the increased workload, or major infrastructure gaps such as the New Zarqa Hospital. Furthermore, humanitarian funding channels often preclude general budgetary support to the MoH but require funds to be channelled through humanitarian partners and in-kind support.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Improve equitable access, quality and coverage to comprehensive primary health care for Syrian refugee women, girls, boys and men in Jordan by end of 2014.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Management of communicable and non-communicable diseases, including EPI services in place	200.000	640.000	3.380.000	Country Wide (Ajlun, Al Balqa, Amman, Azraq, Irbid, Jarash, Karak, Ma'an, Mafraq, Zaatari Camp, Zarqa)	20.774.281	15.340.958	4.784.500	648.824	FRC, IMC, IOM, JHAS, RHAS, SC Jordan, UNHCR (JHAS, IMC, FRC, RHAS, IOM), UNICEF, WHO
Output 1.2 Comprehensive reproductive health services provided to Syrian refugees and affected Jordanian population	50.000	35.000	15.000	Country Wide (Ajlun, Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Karak, Ma'an, Mafraq, Tafileh, Zaatari Camp, Zarqa)	6.196.104	2.251.971	3.944.134		IMC, IOM, IRC, TDHI, UNICEF, UNFPA(JHAS, IMC, AMAN, IFH, UPP, JWU, JAFPP)
Output 1.3 Increased availability of safe and confidential GBV related medical services	5.412	11.700	2.500	Country Wide (Ajlun, Balqa, Amman, Azraq, Irbid, Karak, Ma'an, Mafraq, Zaatari and EJC Camp, Zarqa)	631.753	577.706	54.047		UNFPA (JHAS, IMC, AMAN, IFH, UPP, JWU, JAFPP), IOM, IRC, Mdm JHAS,

Output 1.4 Appropriate infant and young child feeding practices promoted	15.400	56.200	13.860	Country Wide (Ajlun, Al Balqa, Amman, Irbid, Karak, Ma'an, Mafraq, Zarqa)	2.281.554		2.276.330	5.225	IMC, MdM, IOM, UNICEF (SCJ, Medair)
Output 1.5 Improve access to mental health services at the primary health level	54.999	11.700	5.000	Country Wide (Amman, Aqaba, Azraq, Irbid, Karak, Ma'an, Mafraq, Tafileh, Zarqa)	2.570.549	18.016	2.528.513	24.021	CVT, IMC, IOM, NICCOD, TDHI, UNHCR (IMC), WHO
Objective 1					32.454.242	18.188.649	13.587.523	678.070	

Objective 2. Improve equitable access, quality and coverage to essential secondary and tertiary health care for Syrian refugee women, girls, boys and men in Jordan by end of 2014.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1. Referral system for secondary and tertiary care established	3.623	7.326	250	Country Wide (Balqa, Amman, Azraq, Irbid, Karak, Ma'an, Mafraq)	8.853.192	6.357.055	2.496.137		Caritas, IMC, IR, IRD, JHAS, MdM, UNFPA, UNHCR (JHAS, Caritas),
Output 2.2. Secondary mental health services provided	1.208	3.000	3.000	Country Wide	387.339	354.310	33.029		MdM, WHO, JHAS, UNHCR
Output 2.3. Access to emergency obstetric care provided	500	510	1.400	Country Wide	822.720	606.531	216.189		JHAS, UNFPA, UNHCR
Output 2.4. Physical rehabilitation for persons with injuries and/or disabilities provided	5.250	9.575	5.251	Country Wide (Amman , Mafraq)	4.714.125		4.714.125		Action Aid, HI, IMC, OPM, RI,
Objective 2					14.777.376	7.317.895	7.459.480		

Objective 3. Support the capacity of the national health care system to provide services to Syrian women, girls, boys and men and vulnerable Jordanians in the most affected s by the end of 2014.

Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Access to primary and essential secondary and tertiary health care supported	200.000	600.000	300.000	Country Wide (Aqaba, Azraq , Irbid , Mafraq, Tafileh, Zarqa and Zaatari)	14.839.254	8.190.375	5.582.946	1.065.933	ACTED, Caritas, IMC, IR, IRC, JHAS, TDHI, UNFPA, UNHCR (JHAS), UNOPS, UPP, WHO
Output 3.2 Capacity building developed	12.082	45.000	6.300	Country Wide(Ajloun, Balqa, Amman, Irbid, Jarash, Karak, Ma'an, Mafraq, Zarqa and camps (Zaatari and EJC))	1.932.923	240.210	803.935	888.778	JHAS, MDM, MEDAIR, UNFPA, UNHCR, UNICEF, WHO
Output 3.3 Essential chronic disease drugs available	12.082	5.000	5.000	Country Wide(Balqaa, Amman, Irbid, Karak, Madaba, Mafraq, Zarqa)	2.612.286	1.741.524	270.236	600.525	UNHCR, WHO, MDM, MEDAIR, JHAS
Objective 3					19.384.463	10.172.109	6.657.118	2.555.236	

Objective 4. Improve coverage of comprehensive health and rehabilitation services to Syrian refugees through integrated community level interventions by end of 2014.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 4.1 Community health volunteer teams in place	60.000	89.670	30.010	Country Wide(Ajlun, Balqa, Amman, Azraq, Irbid, Karak, Ma'an, Mafraq, Zarqa)	3.795.824	1.411.235	1.648.946	735.644	ActionAid, FRC, IMC, MdM, JHAS, MEDAIR, OPM, RI, UNHCR (IRD, FRC),
Output 4.2 Community level referral system in place	55.000	32.267	5.000	Country Wide (Balqa, Amman, Country Wide, Irbid, Karak, Ma'an, Mafraq, Tafileh, Zarqaa, Zaatari Camp	1.218.178		1.218.178		Action Aid, IRD, MEDAIR, OPM, TDHI, UNHCR (IRD, FRC)
Output 4.3 Community management of acute malnutrition programs implemented and monitored	43.200	129.600	45.200	Country Wide	845.540	240.210	605.330		Action Aid, JHAS, MEDAIR, UNHCR (JHAS), UNICEF (Sc Jordan, Medair)
Output 4.4 Community Level Rehabilitation provided					-				Activities planned. To be considered in next review
Output 4.5 Community level mental health provided	24.000	6.006	3.000	Country Wide (Ajlun, Amman, Azraq, Irbid, Mafraq, Zaatari Camp, Zarqa)	176.554		123.108	53.447	IMC, OPM, UNHCR (IMC), WHO
Objective 4					2.240.272	240.210	1.946.615		

Sector indicators*	Target
# of boys and girls receiving measles vaccine	380.960
# of women and girls (less than 18) who receive antenatal care	63.862
# of GBV survivor (women, girls, boys and men) who access medical care	22.650
# number of facilities providing mental health services	1.856
% of deliveries undergoing caesarean section	5
# of male and female health workers trained	1.530
# of health facilities equipped/ constructed/ rehabilitated	87
# of male and female community health volunteers trained and supported	1.130
* these are just a sample of the total indicators being monitored under the RRP6 Jordan	

Health - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	72.652.177	37.330.099	31.299.682	4.022.396	48.328.831

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Health in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	300,000	180,000	120,000
ActionAid	1,425,000	855,000	570,000
Caritas	6,800,000	4,080,000	2,720,000
CVT	2,500,000	1,500,000	1,000,000
FRC	3,000,000	1,800,000	1,200,000
HI	3,000,000	1,800,000	1,200,000
IMC	7,363,289	4,417,973	2,945,316
IOM	918,470	551,082	367,388
IRC	4,060,000	2,436,000	1,624,000
IRD	1,474,900	884,940	589,960
IRW	4,205,952	2,523,571	1,682,381
JHAS	9,770,000	5,862,000	3,908,000
MdM	4,150,000	2,490,000	1,660,000
Medair	1,518,000	910,800	607,200
NICCOD	177,500	106,500	71,000
OPM	140,000	84,000	56,000
RHAS	720,000	432,000	288,000
RI	5,475,000	3,285,000	2,190,000
SCJ	2,000,000	1,200,000	800,000
TDHI	255,000	153,000	102,000
UNFPA	10,046,051	6,027,631	4,018,420
UNHCR	24,552,858	14,731,715	9,821,143
UNICEF	11,501,057	6,900,634	4,600,423
UNOPS	1,900,000	1,140,000	760,000
UPP	158,931	158,931	-
WHO	13,569,000	8,141,400	5,427,600
Total	120,981,008	72,652,177	48,328,831

J. Shelter and Settlements response

Lead Agencies	UNHCR and NRC		
Participating Agencies	ACTED, ADRA, CARE, Caritas, DRC, Global Communities, ICMC, INTERSOS, IOM, IR, JHAS, LWF, Medair, Mercy Corps, NRC, PU-AMI, TGH, UNHABITAT, UNHCR, UNOPS		
Objectives	<ol style="list-style-type: none"> 1. Syrian refugee women, girls, boys and men settled in planned and developed camps with adequate shelter and access to basic facilities and services.ⁱ 2. Adequate shelter provided for vulnerable Syrian refugee women, girls, boys and men, and targeted members of the host community in urban/rural settings outside of camps. 		
Requirements from January to June 2014	US\$81,912,150		
Prioritized requirements (Jan-Dec)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$43,405,230	US\$35,269,920	US\$3,237,000
Total 2014 indicative financial requirements	US\$136,520,250		
Contact Information	Werner K. Schellenberg, schellen@unhcr.org Martin Suvatne, martin.suvatne@nrc.no		
Gender Marker	2A		
<p>ⁱ The human right to access adequate housing is the right of every woman, man, youth and child to gain and sustain a safe and secure home and community in which to live in peace and dignity. This definition is in line with the core elements of the right to adequate housing as defined the United Nations Committee on Economic, Social and Cultural Rights. (General Comment No. 4) The right to adequate housing includes therefore a) Legal security of tenure; b) availability of services, materials, facilities and infrastructure; c) affordability; d) habitability; e) accessibility; f) location; and g) Cultural adequacy.</p>			

1. ACHIEVEMENTS AND CHALLENGES

The Shelter and Settlement response for Syrian refugee women, girls, boys and men in Jordan is coordinated through the Shelter Sector in regularly scheduled meetings at camp level and in Amman under the lead of UNHCR, and co-chaired by NRC. Sector discussions are focused around major strategic and emergency response issues. These include the development of a Shelter and Settlement Strategy for Syrian refugees; the revision and updating of guiding principles for sector-specific standards and implementation approaches, including gender considerations in humanitarian programming, participation of Syrian refugee women, girls, boys and men in the design, implementation, monitoring and evaluation of shelter projects; the assessment and mapping of needs and capacities for coordinated gap-filling response; and the formulation of objectives, outputs, indicators, planned activities and estimated intervention costs as guidance for pledging initiatives such as the RRP6.

In 2013, the shelter and settlement achievements in the context of camp settings included the development and transformation of Zaatari camp from an emergency camp to an upgraded infrastructure and basic services camp, providing accommodation for approximately 110,000 people. This includes infrastructure-serviced contingency space for accommodation of an additional 35,000 people.

Shelter response and shelter upgrading achievements in Zaatari by the end of October 2013 include the distribution of 67,600 emergency tents; the porch winterization of 14,771 tents; and the replacement of a significant number of tents with 14,730 pre-fab container dwellings, which improved living conditions, and provided more privacy, dignity and protection. This is a priority in the Shelter Sector strategy for addressing the needs and concerns of women and girls, who consider their tent homes unsafe as tents cannot be locked.⁸⁵ However, with frequent movement of Syrian refugees out of Zaatari camp, and with an estimated current population of 75,000 people in the camp,⁸⁶ it is estimated that there are still some 3,500 families living in tents, which is of particular concern with the approaching winter and the slow delivery rate of additional pre-fab units.

The response improvement and stabilization of Zaatari camp also included various other initiatives, such as the creation of a strategic advisory group, tasked with defining a governance and development vision for Zaatari in 2014. Other response improvements included the coordinated handling and distribution of NFIs and other items under the umbrella of the NFI Sector.

Remaining issues of concern to be addressed include:

- The sale of caravans used for purposes other than shelter, both within and outside the camp, e.g. as vendor stalls/ shops.
- The uncontrolled movement and relocation of caravans between districts, module blocks and other locations close to services and extended family members.
- The possessing of multiple ration cards (generally purchased/received from people who have left the camp.)
- The continued perception among Syrian refugee women, girls, boys and men that they are not involved in the design, implementation, monitoring and evaluation of humanitarian programming, including shelter projects.
- Measures to adapt the existing shelter assistance for individuals and families with special needs.
- Limit direct access from multiple points.

85 Child Protection and Sexual and Gender-Based Violence Sub-Working Group in Jordan, *Findings from the Inter-agency Child Protection and Gender-Based Violence Assessment in the Zaatari Refugee Camp*, January 2013.

86 UNHCR Verification exercise, November 2013.

Shelter and settlement achievements also included the development of a new camp at Azraq, which is ready to receive refugees. The camp is planned for an initial population of 52,000 people. All essential infrastructure and basic service facilities are designed and implemented for this capacity. The camp Master Plan for Azraq was developed based upon a “lessons learned” reflection and with the aim of avoiding mistakes observed in Zaatari. This approach included the need to provide utmost transparency over the planning process, and in doing so to enhance a commitment of all stakeholder agencies to actively engage in all phases of planning and physical implementation. The approach was successfully implemented through regular interagency meetings and discussions of cross-cutting issues for all detailed planning issues and throughout all stages of the Master Plan. At the Government level, this included the participation and engagement of key ministries, such as Ministry of Planning and International Cooperation, Ministry of Public Works and Housing, the Office of the Governorate of Zarqa and other Government departments.

The identification of an appropriate shelter solution for Azraq camp required the development of a semi-permanent shelter structure to sufficiently mitigate the harsh weather conditions of Azraq’s desert location in addition to a shelter concept which was able to meet the criteria as envisaged in the shelter strategy. This included:

- Using locally-sourced materials; manufacturing shelter components as shelter kits for economical transportation and easy assembly/disassembly on site;
- Enabling beneficiaries to engage in finishing and maintenance works to encourage more ownership and sustainability (while also ensuring that persons with specific needs – female and child-headed households, persons with disabilities, elderly persons, etc. – obtain the support needed to complete the finishing and maintenance works);
- Ensuring it is more competitive in comparison to the durability and manufacturing and transport costs of pre-fab container units;
- Ensuring that refugee women, girls, boys and men identify the shelter as adequate, safe and culturally appropriate.

The result of this process is a T-shelter design which has been implemented and tested in three pilot stages. The design and review process of the sample shelters included the involvement of refugee women and men, Government officials, professional engineers and architects and other members of the Shelter Sector. During the pilot design phase refugee men and women advised on the suitability of five design options.

The needs for privacy for females have been considered when designing the T-shelter with the incorporation of privacy screens and entrance doors that do not expose private areas of the shelter. In addition, the T-shelters have been designed to maintain a low temperature to ensure comfort for women and girls who are often restricted from leaving the shelter.

The humanitarian response also included 5,300 refugees in the Emirates Jordan Camp (EJC), and in King Abdullah Park (KAP). All refugees in those camps are accommodated in pre-fab container units. A more durable shelter solution is provided for refugees in upgraded flats of a permanent building in the Cyber City (CC) Transit site.

The achievements in the Shelter Sector targeting refugees and host communities in urban / rural settings included the improvement and upgrading of 1,326 homes, while 300 dwelling units have been constructed in unfinished properties and made available on the rental market. In parallel, UNHCR and other agencies have also provided large scale “cash-for-rent” support which has been coordinated through the Cash Sector. Both interventions assisted in mitigating the shelter constraints faced by the most vulnerable refugee women, girls, boys and men in non-camp settings and benefited both Syrian and host Jordanian households.

Several challenges have hampered the implementation of the Shelter Sector strategy in 2013. The main challenge has been the steep rise in the price of rented accommodation which has impacted both the most vulnerable refugees who cannot afford to rent adequate shelter in non-camp settings in urban and rural areas, and also the level of support that agencies are able to give to these families. The rent increase in non-camp settings has also led to various other concerns including:

- Overcrowded conditions, with up to 20 individuals sharing two rooms;
- Families living in very poor quality structures or temporary shelters;
- Refugees moving from one governorate or district to another, making it difficult for humanitarian agencies to accurately track and support them;
- Rapid depletion of family savings, including dowries which are hard to replace;
- Increased risk of eviction of refugees, which has a host of associated protection concerns;
- Movement of urban refugees towards the camps due to high cost of living outside the camps
- Households in poverty may need to resort to harmful coping strategies, such as: sending children out to work (often worst forms); women, girls or boys engaging in survival sex; arranging early marriage prematurely; or crowding into shelters so that female-headed households can access the societal protection afforded from being accompanied by a man.

According to custom in Syria, married or single women should not rent or own houses as it is improper and considered unsafe to do so (irrespective of means).⁸⁷ In April 2013, a survey revealed that 18 per cent of Syrian refugees hosted in urban centres were female-headed households; in addition, a significant number of households were hosting additional female-led families, and including these women effectively brought the number of female-led families (both de-facto and de jure) to 31 per cent of the surveyed population.

In addition, outside of camps, refugees advised that 26.9 per cent of women leave the house daily, 31.5 per cent leave the house a few times a week, 23.7 per cent rarely leave and 17.5 per cent do not leave the house. In other words, just over half of the women (58.4%) leave the house regularly. Conversely, 41.2 per cent women frequently do not leave the home (one in five never leaves).⁸⁸

The steadily increase in demand and consequent rise in the price of rented accommodation has also impacted host communities. Especially in the neighboring governorates with Syria, this is also having a negative impact on the daily life of local populations, exacerbating tensions between host communities and Syrian households; and in addition, potentially distorting the perception host communities have of humanitarian intervention and implementing agencies. Other initiatives which provide refugees with access to additional dwelling units are supported by the shelter strategy.

Cross-cutting coordination and referral mechanisms for services and protection needs are to be enhanced and to be linked to the Host Community Platform with the Government of Jordan (GoJ), UNDP and UNHABITAT as the main actors as well as linkages to related intervention like school upgrading, spatial planning and communal infrastructure/service provision.

87 Sanja Kelly and Julia Brelin (eds.), *Women's Rights in the Middle East and North Africa*, Freedom House, Plymouth, 2010.

88 UN Women, *Inter-Agency Assessment of Gender-based Violence and Child Protection among Urban Syrian Refugees in Jordan, with a Focus on Early Marriage*, July 2013.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	200,000
Non-camp refugees	600,000	180,000
Other affected population	700,000	430,000

ⁱ Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs. The population figures in the above table take into consideration the fact that registration activities target all Syrian populations (camp and non-camp)

All refugees arriving in the camps are dependent on the provision of shelter and access to basic services. Emergency tents need to be replaced with more durable dwelling units in order to provide efficient protection from the extreme desert wind and climate conditions in both camp locations (EJC and KAP). The replacement of tents with pre-fab units in Zaatari camp needs to continue. Upgrading and maintenance of pre-fab caravans is needed to sufficiently mitigate thermal insulation deficits and rainwater leaking through roof sealing of containers.

Additional camp site planning interventions that involve the participation of women, girls, boys and men in the design, implementation, monitoring and evaluation of shelter interventions, as well as the development of an integrated spatial development plan will be needed in Zaatari camp. This will result in a more targeted decongestion of various camp locations, provide more living space, privacy, and safety from fire hazards, and enable more decentralized access to basic services for all women, girls, boys and men living in all sections of the camp.

More investment is needed to further support the concept of decentralized camp administration and service delivery to camp districts and villages in both camps.

With overcrowded use of some limited basic service facilities in Zaatari camp there is a need to facilitate upgrades and intensify maintenance services for such facilities and structures, and to complement such structures with improved infrastructure works, including increased attention towards interventions that increase privacy and security, such as lighting and privacy screens. In addition, more sustainable cost recovery and cost minimization systems should be installed, specifically for electricity and water supply.

Other aspects that should be observed when designing the layout of settlements focus on mainstreaming gender into programming and preventing gender-based violence include: ensuring entry points are gated and controlled to decrease risks of trafficking, sexual exploitation and abuse as well as providing adequate space to the Family Protection Department and police postings planned throughout the camp, but not within the villages.

With a current accommodation capacity for 176,000 Syrian refugees in the developed space and locations of all available camps (i.e. including the space available in Zaatari, Azraq, EJC, KAP, and CC) and with a target population of 200,000 Syrian refugees to be accommodated in camps

by December 2014, there will be a continued need to invest in additional camp extension works for some 4,740 households or approximately some 24,000 people. This would need to include investments in land development, infrastructure works, construction of new basic service facilities, as well as investments for additional shelter units; more specifically, investment for camp settings as follows:

- development of 1,213,440 m² of new camp space for construction of shelter and infrastructure services for 4,740 households;
- development, installation and maintenance of photovoltaic power systems with street lights placed strategically with special attention to areas around latrines and communal areas;
- equipping each camp section with child friendly spaces;
- upgrading and maintenance of existing camp roads, drainage systems, and community facilities;
- payment of utility costs for basic services, administrative centres, street lighting, and for utility services consumed by most vulnerable households;
- procurement, storage, distribution and pitching of emergency tents;
- procurement, delivery and installation of prefabricated container units;
- production, delivery and assembling of T-Shelter kits for Azraq camp;
- summerization of emergency tents and winterization of shelter units.

Access to affordable and adequate shelter is an ongoing and an increasing concern, with rental prices rising and availability of accommodation decreasing. Rent is consistently identified in numerous assessments as the primary need for refugees living in non-camp settings, with rent fully absorbing or exceeding income in many cases.⁸⁹ Reported rental costs vary according to location and quality, with most refugees paying between JOD 100–250 per month. The strain created by the increase in the population is evident in the reduction of available housing stock, and rental prices in northern Jordan have substantially risen since the start of the refugee influx, with reported average rental costs tripling or quadrupling in Mafraq town.

New arrivals are facing significant difficulties in finding affordable places to rent, owing to both availability and affordability of housing, and increases in overcrowding and in the use of substandard shelters are an ongoing concern.

⁸⁹ ACTED, *Shelter and Winterization Needs Assessment*, September 2013; OXFAM GB, Jordan, *Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection*, March 2013.

Rental price increases are also often cited as a cause of tensions between Syrians and Jordanians in communities, as Jordanian families also struggle to cope with the rising cost and limited availability of adequate accommodation. Discussions with Syrian refugees living in Amman confirmed that landlords are reluctant to rent to unaccompanied women because they are perceived as unlikely to be able to pay rent and as “socially problematic.”⁹⁰

There is also increasing evidence on poor quality or sub-standard dwelling space in housing rented out to refugees. Many dwelling units show signs of shelter damage and 80 per cent of respondents state that their shelter is not insulated or protected against moisture and wetness, making it unsuitable for winter conditions.

Priority needs and indicators identified by the Shelter Sector in the objectives table include therefore:

- Sub-standard dwelling units to be upgraded to adequate standard;
- Uncompleted buildings receive additional habitable space through construction of one to three new rooms / building;
- Conditional rent support paid per month per vulnerable household, with a particular focus on households headed by females, and/or persons with disabilities ;
- Cash grants or equivalent value of NFI material distributed per household;
- Information messaging launched on housing rights and obligations under the Jordanian Tenancy Law at help desks/ call centres / through workshops and other points of service to POCs;
- Continued consultation with Syrian women, girls, boys and men on their housing and shelter needs.

90 CARE Jordan, *Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees Living in Amman*, October 2012.

3. RESPONSE STRATEGY

Refugees are initially provided with an emergency shelter, normally in the form of a tent. The shelter sector is aware that tents are a last resort in order to cope with the influx. In Zaatari, refugees will move as quickly as possible from the tent to a pre-fab container, depending on delivery of those units. In Azraq, the plan is to accommodate refugees in a semi-permanent shelter due to the climatic conditions, as mentioned above. These longer-term solutions provide better protection from the elements, and are more suitable (in terms of the privacy and security concerns identified by women and girls) and adaptable than tents, especially over time.

Both semi-permanent shelter options can also be considered as potential repatriation support to facilitate initial shelter assistance to victims of war damage at places of return. However, pre-fab containers are bulky and difficult to transport or be dismantled for reassembling at places of return. T- Shelter units for Azraq, however, are designed as shelter kits, to allow for easier stockpiling in warehouses, facilitate rapid assembling and dismantling in camps, and enable beneficiaries to easily transport and reassemble the kit components for transitional shelter needs on land with war damaged houses at places of return.

More durable investments, e.g. the investments for camp infrastructure and other service facilities have been built in-line with GoJ standards, and will be utilized as potential urban settlements in the future to fill gaps in local services and accommodation. Investments in camp infrastructure works also have positive impacts on the local economy by providing job opportunities and stimulating local market transactions for goods and materials.

There are five key response strategies in providing adequate shelter support to refugees.

The primary aim for all of them is to ensure that Syrian refugee women, girls, boys and men can reside in housing that provides the necessary protection, is of adequate standard and with secure tenure.

1. The first response strategy aims at upgrading sub-standard housing units, in which Syrian refugees already live, to meet adequate standards; improve protection from the elements; and improve privacy, safety and security, as well as to adapt the unit as possible for women, girls, boys and men, and older people with disabilities.
2. The second response aims to increase the quantity of adequate housing that is available, affordable and accessible to refugees on the rental market by working with property owners to upgrade existing properties that are currently not for rent. Incentives for property improvements will allow landlords to bring new units onto the rental market specifically for Syrian refugees in return for a rent-free period. Construction works will bring shelters to an agreed standard before extra vulnerable refugee families are offered secure tenancy agreements for a period of up to two years. In order to support their move to the upgraded and secured units, beneficiary families will also receive a one-off unconditional removal grant.

3. A third response strategy supports vulnerable Syrian families who otherwise could not afford the increasing cost of rent, by providing conditional financial assistance to meet rental costs, and for ensuring security of tenure. Extreme care needs to be taken in order not to contribute to the increase in the rental prices.
4. The fourth intervention will adapt sub-standard dwelling units to overcome harsh weather conditions with “house adaptation kits” provided either in the form of NFI packages or a cash equivalent through conditional cash grants. This intervention has the potential to become a life-saving response especially to older people, people with disabilities and young children through the winter.
5. The fifth intervention will aim at enhanced awareness on tenure rights and obligations amongst women, girls, boys and men refugee tenants and target all refugees who reside in non-camp settings in order to empower refugees and vulnerable families to be as independent as possible and to understand their shelter rights and obligations under the Jordanian Tenancy Law.

The Sector will consult with women, girls, boys and men on whether the shelter within camps or accessible in the communities are sufficient to meet their basic needs for shelter and safety. The sector will respond to issues that are addressed through these consultations.

The local host communities and the property market will benefit from shelter interventions and are expected to have positive spill-over effects to the local construction industry through the engagement of local contractors, and through local market material purchases.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Provide adequate shelter for vulnerable SYRs (MWBG) and targeted members of the host community in urban / rural settings outside of camps.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Housing units upgraded to a minimum standard		13.370	750	Country Wide (Amman, Aqaba, Azraq, Irbid, Jarash, Karak, Mafraq, Tafileh)	8.986.770		8.986.770		Caritas, Global Communities, Intersos, IOM, JHAS, MEDAIR, Mercy Corps, UNHCR (NRC)
Output 1.2 Increased housing units available		25.900	3.500	Amman, Irbid, Mafraq	11.436.510		9.126.510	2.310.000	ACTED, IOM, NRC, UNHABITAT, UNHCR (NRC)
Output 1.3 Refugees enabled to pay rent on time		10.700	1.120	Country Wide (Amman, Aqaba, Azraq, Irbid, Jarash, Karak, Mafraq, Tafileh)	2.696.342	1.153.142	1.543.200		ADRA, Caritas, Global Communities, ICMC, IR, MEDAIR, TGH
Output 1.4 HH adapt housing to overcome harsh weather conditions		67.501	2.250	Country Wide (Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Karak, Mafraq, Zarqa)	5.069.486	4.142.246	927.240		ACTED, DRC, Intersos, LWF, PU-AMI, UNHCR (NRC)
Output 1.5 Increased awareness / knowledge about tenure obligations and rights		89.000	430.800	Irbid, Zarqa	1.731.000		804.000	927.000	ACTED, MEDAIR, NRC, UNHABITAT
Objective 1					29.920.108	5.295.388	21.387.720	3.237.000	

Objective 2. Accommodate refugees (MWBG) in adequate shelter in planned and developed camps with access to basic facilities and services.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Site planning and development	22.942			Azraq Camp	1.608.065	1.608.065			UNHCR (MoPW)
Output 2.2 Infrastructure development and maintenance	200.000	21.768		Azraq and Zaatari Camp	30.048.773	23.289.773	6.759.000		UNHCR (MoPW, NRC), NRC
Output 2.3 Emergency shelter provided	59.132			Azraq and Zaatari Camp	5.698.833	5.698.833			UNHCR, NRC
Output 2.4 Semi-permanent shelter provided				Zaatari Camp	1.680.000		1.680.000		UNOPS
Output 2.5 T-shelter units provided and maintained	24.155			Azraq Camp	7.513.171	7.513.171			UNHCR (MoPW, NRC)
Output 2.6 T- Shelter kits in stock and accessible for fast track assembling on site	17.501			Azraq Camp	5.443.200		5.443.200		UNHCR (MoPW, NRC)
Objective 2					51.992.042	38.109.842	13.882.200		

Sector indicators	Target
# of dwelling units upgraded to adequate standard	8.882
# of new dwelling units brought to the affordable housing market	11.384
# of HH (disaggregated by WGBM HH) receive rental support for 3 months	6.337
# of conditional cash grants / shelter kits distributed	21.292
# of people receiving information messaging on housing (HLP)	47.510
m2 of land planned and developed for settlement / # of Refugees	1.213.440
m2 of roads, stormwater drains, basic service and governance facilities constructed and maintained	23.558.510
# of emergency shelter units (tents) distributed and pitched on allocated plots	29.566
# of prefab container shelter units delivered & allocated	1.000
# of T-Shelter units constructed	4.831
# of T-Shelter kits produced and stockpiled for assembling	3.500

Shelter - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	81.912.150	43.405.230	35.269.920	3.237.000	54.608.100

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Shelter and Settlements in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	2,762,500	1,657,500	1,105,000
ADRA	750,000	450,000	300,000
Caritas	1,400,000	840,000	560,000
DRC	109,400	65,640	43,760
Global Communities	57,600	34,560	23,040
ICMC	700,000	420,000	280,000
INTERSOS	598,500	359,100	239,400
IOM	3,750,000	2,250,000	1,500,000
IRW	921,904	553,142	368,762
JHAS	3,000,000	1,800,000	1,200,000
LWF	141,243	84,746	56,497
Medair	1,763,000	1,057,800	705,200
Mercy Corps	2,175,000	1,305,000	870,000
NRC	9,840,000	5,904,000	3,936,000
PU-AMI	1,246,000	747,600	498,400
TGH TRIANGLE GH	630,000	378,000	252,000
UN-Habitat	4,350,000	2,610,000	1,740,000
UNHCR	99,525,103	59,715,062	39,810,041
UNOPS	2,800,000	1,680,000	1,120,000
Total	136,520,250	81,912,150	54,608,100

K. Non-Food Items (NFI) response

Lead Agencies	UNHCR and NRC		
Participating Agencies	ACTED, AVSI, CARE, Caritas Jordan, DRC, Global Communities, ICMC, IR, JEN, JHAS, LWF, MA, MPDL, Medair, Mercy Corps, NICCOD, NRC, OPM, PU-AMI, TDH, TGH, SCI, UNFPA, UNHCR, WarChild UK, WVI		
Objectives	10. Ensure that the basic household needs of women, girls, boys and men are met.		
Requirements from January to June 2014	US\$62,526,184		
Prioritized requirements (Jan-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$35,146,852	US\$26,149,331	US\$1,230,000
Total 2014 indicative financial requirements	US\$104,210,306		
Contact Information	Maurice Bisau, bisaum@unhcr.org Hugh Earp, hugh.earp@nrc.no		
Gender Marker	2A		

1. ACHIEVEMENTS AND CHALLENGES

The NFI Sector has collectively continued to provide for the basic household needs of Syrian refugee women, girls, boys and men living in Jordan.

In camp settings, meeting these household needs has happened in a variety of ways in parallel. Over 250,000 refugees arriving in Zaatari camp since 2012 have received NFIs such as blankets, mattresses, kitchen sets, jerry cans and hygiene items. The high turnover of residents in Zaatari camp has presented a logistical challenge that was successfully addressed.

For people who are already in Zaatari camp, there is now a distribution centre for NFIs with dedicated mechanisms to identify and prioritize access for the most vulnerable in the camp. Either through this site or through agencies' own distribution capacity, regular distribution of items such as soap, diapers, sanitary items, and other essential hygiene materials has taken place. At the same time, distribution of other items, including clothing or items meeting specific needs (such as solar lamps) continues. Various agencies have also set up formal and informal post-distribution monitoring systems that highlight the extent to which the distributed items are used and respond to the needs as identified by beneficiaries.

Taking into account lessons learned from early 2013, focus is now moving towards ensuring sufficient thermal comfort for winter, including thermal insulation, a heat source and fuel supply. In the first two months of 2013 over 15,000 households were provided with these winterization items. With the development of Azraq, similar structures and processes have been put in place to ensure that the needs of refugees arriving there are also catered for.

Outside of camps, refugees have easier access to local markets to purchase the household items. The needs remain high, but these can often be met by the provision of cash to allow refugees to decide what they need. The NFI sector has focused primarily on the camp, but has coordinated with the Cash Sector to strengthen coverage in urban areas. In parallel, agencies continue to provide NFIs in response to indications that any cash provided would not be used to meet these needs. Within these populations, it has been a challenge to ensure that targeting has been sensitive to the specific needs of women, girls, boys and men. The NFI Sector will be establishing mechanisms to better target and monitor the impact of NFI support in 2014.

From January to September 2013, refugees in camp and non-camp settings have received over 90,000 jerry cans; over 140,000 hygiene kits; 430,000 blankets; 75,000 kitchen sets; over 8,000 heating stoves; 263,000 mattresses; and 67,000 clothes sets.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	350,000 ⁱⁱ
Non-camp refugees	600,000	74,500
Other affected population	700,000	40,500

i Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs.

ii This figure represents those who are transported to the camps, where they receive an initial NFI package, rather than those who then continue to stay in Zaatari.

Refugees arrive in Jordan with only the goods they can carry, many of which will have been sold or lost during flight. To enable refugees to resume normal daily activities such as cooking, washing and cleaning as quickly as possible, basic household items need to be provided.

The other major need in the camps is for disposable and consumable items and particularly hygiene items such as toothbrushes and toothpaste, female sanitary items, and diapers for babies. In Zaatari, such items are available on the market but the supply is not regular, and not all camp inhabitants have sufficient income to be able to buy the necessary items. In other camps, markets either do not exist yet or are underdeveloped.

In over 48,000 home visits to refugees in urban areas in 2012 and 2013, refugees consistently cite basic household items among their greatest unmet needs. Refugees outside the camp have access to regular markets, but state that they lack the ability to purchase their basic requirements, especially with significant expenditures of other important priorities, including food, rent, health and education. For households who have arrived with nothing and are residing in unfurnished apartments, NFIs are an essential part of their ability to maintain a basic standard of living. Even for households where one or more family members are working, surveys⁹¹ have highlighted the extent to which NFI can supplement and augment cash from work and reduce the shortfall between income and necessary expenditure. In similar surveys, most of the families with small children complain about high prices of baby diapers and other baby care items (powder, milk).

One clear commonality between both camp and non-camp refugees is the need for materials and items to mitigate the effects of harsh weather. This is particularly the case in winter, with refugees requiring heating sources and fuel, blankets and suitable warm clothing, appropriate for the conditions and the needs of women, girls, boys and men. Likewise, harsh weather conditions affect the host community so comparable support for the most vulnerable Jordanians is included in the response.

One particular challenge highlighted by assessments is of sexual and physical harassment, particularly of women, at NFI distribution sites.⁹²

3. RESPONSE STRATEGY

The overarching objective of the NFI Sector in 2014 will be to ensure that the targeted population has access to the necessary items to fulfil their basic household needs.

In camps, this will be achieved through the ongoing provision of basic household items on arrival, for items such as blankets, mattresses, hygiene and water, sanitation and hygiene kits, and kitchen sets to accompany the welcome food package. In tandem, regular distribution of consumable items such as hygiene kits and sanitary materials will take place, as well as less frequent distribution of non-consumable NFIs to replace those worn out over time. For Zaatari, an assessment is currently being carried out to look at the differing needs and priorities of women, girls, boys and men, in terms of NFIs, to see where these correlate with the usage and availability of NFIs in the camp. This will improve the knowledge of the sector in terms of more detailed and specific needs. In addition, a team dedicated to ensuring access to distribution sites for those with specific vulnerabilities such as mobility has been recently developed in order to ensure access for all.

91 CARE International, *Syrian Refugees in Urban Jordan*, April 2013.

92 Child Protection and Gender-Based Violence Sub-Working Group Jordan, *Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Zaatari Refugee Camp*, March 2013.

To ensure that these items continue to match the differing needs and priorities of women, girls, boys and men, both as they arrive at the camp and for the duration of their stay, the sector will encourage distributing agencies to standardize and undertake regular and structured assessments of the usage and availability of various NFIs in the camp. This could be also used to move towards an approach that better supports the markets in the camp, such as the provision of vouchers that can be redeemed for NFIs according to the needs and specificities of each household.

In non-camp settings, agencies will continue to provide items adjusted to the needs of the target population. This will include material assistance where a clear preference for this is indicated by beneficiaries, for example when cash would not be used to meet the needs, as well as the provision of conditional cash or vouchers designed to facilitate the purchase of necessary items.

Both in camp and non-camp settings, a more coordinated monitoring of distributions will be put in place, again to make sure that the materials continue to meet the needs of women, girls, boys and men. Work also needs to take place on ensuring the manner of distribution is appropriate, and that women, girls, boys and men all have access to the materials and distribution sites. To this end, the NFI Sector will work with the Protection Sector and the Protection from Sexual Exploitation and Sexual Abuse Task Force on developing codes of conduct and strengthening complaints mechanisms and accountability systems, with explicit reference to NFI distribution sites.

A large collective effort will also be made on mitigating the harsh weather conditions, in camp and non-camp settings. This will be done both for summer to ensure vulnerable people do not suffer from the effects of heat, and for winter to provide households with the means to stay warm. The latter can be achieved either through the provision of cash supplements to cover heating bills and associated costs, through vouchers for fuel and other items, or through the direct provision of fuel and a heater, depending on which is the most appropriate.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Ensure that the basic HH needs of MWBG are met.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Provision of basic HH items (through material assistance or conditional cash support) for new arrivals and replenishment / replacement for longer-term populations	350.000	9.000	6.000	Country Wide (Amman, Zarqa, Irbid, Jarash, Mafraq, Zaatri and Azraq Camp)	17.261.535	10.225.023	5.806.512	1.230.000	Mercy Corps, NRC, OPM, PU-AMI, Save the Children International, TGH, UNHCR (NRC), ACTED, AVSI, CARE, Caritas
Output 1.2 Provision of basic HH items to mitigate harsh weather conditions	157.501	13.000	12.000	Country Wide (Ajlun, Amman, Aqaba, Azraq, Irbid, Karak, Ma'an, Madaba Mafraq, Tafileh, Zarqa, Zaatari, Cyber City Camp, and King Abdullah Park Camp)	27.162.553	21.645.829	5.516.724		ACTED, AVSI, CARE, Caritas, DRC, Global Communities, ICMC, IR, JEN, JHAS, LWF, MA, MEDAIR, MPDL, NICCOD, NRC, OPM, PU-AMI, TDHI, TGH, UNHCR (NRC), WarChild UK, WVI

Output 1.3 Essential sanitary items provided	201.500	52.500	22.500	Country Wide (Ajlun Amman, Aqaba, Azraq, Karak, Ma'an, Madaba, Mafraq, Tafileh,, Cyber City Camp, Irbid, King Abdullah Park CampZaatari Camp, Zarqa)	18.102.095	3.276.000	14.826.095		ACTED, CARE, Caritas, DRC, Global Communities, ICMC, LWF, MA, MPDL, OPM, TDHI, UNFPA, UNHCR (NRC), WVI
Objective 1					62.526.184	35.146.852	26.149.331	1.230.000	

Sector indicators	Target
# of HH receiving basic HH items (disaggregated by MWBG)	198.575
# of HH receiving items for harsh weather conditions (disaggregated by MWBG)	455.600
# of individuals receiving essential sanitary items	1.151.570

NFI - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	62.526.184	35.146.852	26.149.331	1.230.000	41.684.122

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Non-Food Items in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	5,790,000	3,474,000	2,316,000
AVSI	262,840	157,704	105,136
CARE International	2,500,000	1,500,000	1,000,000
Caritas	1,852,600	1,111,560	741,040
DRC	1,656,030	993,618	662,412
Global Communities	200,000	120,000	80,000
ICMC	580,000	348,000	232,000
IRW	250,000	150,000	100,000
JEN	1,500,000	900,000	600,000
JHAS	3,091,400	1,854,840	1,236,560
LWF	1,768,817	1,061,290	707,527
MA	330,000	198,000	132,000
Medair	1,528,000	916,800	611,200
Mercy Corps	3,750,000	2,250,000	1,500,000
MPDL	60,000	36,000	24,000
NICCOD	835,000	501,000	334,000
NRC	14,250,000	8,550,000	5,700,000
OPM	260,000	156,000	104,000
PU-AMI	434,000	260,400	173,600
SCI	2,050,000	1,230,000	820,000
TDHI	322,000	193,200	128,800
TGH TRIANGLE GH	869,000	521,400	347,600
UNFPA	2,400,000	1,440,000	960,000
UNHCR	53,987,389	32,392,433	21,594,956
WarChild UK	98,730	59,238	39,492
WVI	3,584,500	2,150,700	1,433,800
Total	104,210,306	62,526,184	41,684,122

L. Cash response

Lead Agencies	UNHCR and CARE		
Participating Agencies	ACF, ACTED, AVSI, CARE, Caritas, DRC, Global Communities, HI, ICMC, IRC, INTERSOS, JRC (IFRC, SRC, GRC), ⁱ Medair, Mercy Corps, OXFAM, PU-AMI, SCI, TGH, UNHCR, WVI.		
Objectives	<ol style="list-style-type: none"> 1. Ensure that the needs of extremely vulnerable Syrian refugees as well as Jordanians affected by the refugee crisis are covered across Jordan. 2. Ensure that coordination is continuously enhanced in order to deliver quality cash assistance in the most efficient and targeted manner possible to women, girls, boys and men. 		
Requirements from January to June 2014	US\$65,819,064		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$14,480,971	US\$51,338,093	
Total 2014 indicative financial requirements	US\$107,631,773		
Contact Information	Volker Schimmel, schimmel@unhcr.org Kate Washington, kate.washington@jo.care.org		
Gender Marker	2A		
<p>ⁱ The Jordanian Red Crescent in collaboration with International Red Cross and Red Crescent members are not part of the RRP 6 appeal as the IFRC has its own separate appeal for Syria Refugees. Nonetheless, they are active members of the Cash Sector and their activities are reported under RRP 6 for coordination and clarity.</p>			

1. ACHIEVEMENTS AND CHALLENGES

Cash Sector partners provide three types of cash assistance depending on the particular profile of the beneficiary family:

- Regular monthly cash assistance or time-bound monthly assistance;
- One-off or staggered urgent cash assistance to address a specific financial shock or need that is not covered by other forms of available assistance (medical, legal, protection, etc.);
- Seasonal or specific assistance including winterization support or support for new arrivals.⁹³

Cash Sector partners have shown that cash as a modality for providing assistance is the most flexible and responsive means to augment the work of other sectors and provide supplementary assistance to the most vulnerable, in order to address additional needs not covered by other forms of assistance/sectors. The Cash Sector has had significant influence on other sectors and has served as an important reference and critical advisory point on urban programming for all sectors. Additionally, Cash Sector members have contributed regularly to the updating of baseline data available on urban refugees and propelled the work on the standardization of a vulnerability and

⁹³ The Food Security Sector also provides cash for food vouchers the achievements in this area are discussed in the corresponding chapter.

eligibility criteria. Sector standards have been elaborated in 2013 vis-à-vis criteria for urgent – and separately for regular – cash assistance, for the levels of assistance. A referral system has been successfully tested and more integrated coordination – also with partners working on shelter and NFIs in relation to winterization – has been accomplished.

Ongoing monitoring and evaluation work consistently demonstrates that both Syrian male- and female-headed households consider cash assistance to be the most dignified form of assistance, one which allows them to make their own choices and address the specific needs of their families. Cash has also been shown to be one way to address or mitigate the threat of child labour.

By September 2013, in close collaboration with other sectors, partners of the Cash Sector have successfully:

- Accessed and assisted 24,930 families with regular cash assistance;
- Accessed and assisted 8,246 families with urgent cash assistance;
- Provided 9,268 families with seasonal assistance (during the first two months of 2013);
- Made significant progress in terms of aligning vulnerability and eligibility criteria as well as levels/standardization of assistance;
- Established a good working coordination mechanism to mitigate the threat of duplication in areas where multiple actors are providing assistance. Strong linkages have furthermore been developed with the Food Security Sector and WFP's voucher programme.
- Been able to intervene with cash assistance, in particular urgent cash assistance, to fill gaps in other service provision and address needs that others cannot.

While the influx of Syrian refugees did not reach the levels predicted in the RRP5, the need for cash assistance in non-camp settings still outpaced the collective ability of the humanitarian community to cover all the needs and needs assessments continue to demonstrate that the majority of Syrian households in non-camp settings (urban and rural areas) are still in need of ongoing livelihood support (cash assistance). Without other opportunities for legal means to secure livelihoods for their families, it is expected that by the end of 2013, cash transfer programmes will cover only 60 per cent of the comprehensive humanitarian needs of Syrian women, girls, boys and men living in urban/rural areas. The humanitarian needs are calculated in aggregating the October 2013 baseline vulnerability per governorate where it was established that, depending on the location, 30–55 per cent of the registered refugee population is vulnerable. Additionally, both male and female household heads who face mobility challenges or are housebound face considerable challenges in ensuring the wellbeing of their families and accessing services, in particular households headed by females, the elderly, and/or people with disabilities.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	N/A
Non-camp refugees	600,000	137,500
Other affected population	700,000	44,000

ⁱ Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs.

The humanitarian community in Jordan will continue to provide cash assistance only to families in non-camp settings. No Cash-for-Work initiatives following livelihoods support logic have been proposed for the camps under RRP6. The focus therefore is on the population outside the camps. Continued assessment by the UN and partners provides evidence that the vulnerability profiles and thus needs of Syrian women, girls, boys and men are very diverse depending on the area of operation within Jordan, the length of time in-country and the social and economic background of families.

The Cash Sector established a baseline at the beginning of October 2013, which differentiates the projected aggregate vulnerabilities by governorate. Applying a weighted average of these individual profiles, it can be assumed that given the current context there will be a vulnerability rate of at least 40 per cent of the refugee population nationwide applying the aforementioned baseline. Identified sub-groups will be exhibiting higher levels of vulnerability (as above female-headed households, households headed by people with disabilities and/or elderly people, etc.). This ratio is based on assessments based on aligned criteria of over 60,000 families conducted by UNHCR and corroborated by partners where assessments have been conducted in the same governorate. This means that 40 per cent of registered Syrian refugees will be in need of cash transfer, which can range from one-time cash support to a transitional time-bound monthly cash transfer or even open-ended monthly cash support depending on the particular profile of the beneficiary family.

At the same time, in the absence of readily available livelihood opportunities for Syrians in Jordan, and thus the difficult challenges for refugees outside camps to make ends meet, the resilience of each refugee household will continue to dwindle throughout 2014. Additionally, cash assistance is very important to reduce immediate risks of sexual and gender-based violence such as early marriage and transactional sex, particularly for women and girls.

Current predictions suggest this will cause an increase of vulnerabilities annually by at least 20 per cent, a rate that will continue to rise if external shocks to the household economies occur. A critical element in this is the continued close cooperation with the Food Security Sector in order to determine what kind of approach will be taken to refine the targeting of the most vulnerable Syrian refugee women, girls, boys and men in 2014.

In light of the needs and priorities outlined above the Cash Sector will move into 2014 with a strategy that connects humanitarian projects (i.e. short and medium-term) to projects related to self-generated income and the continued development activities of both the International Community

and the GoJ (i.e. longer-term development initiatives). The main obstacle in fully activating this is the lack of an enabling context when it comes to self-reliance initiatives.

Given that it cannot be readily assumed that self-reliance initiatives will be activated within the lifetime of the RRP6, the priority for Cash Sector partners remains the immediate (and if necessary sustained) provision of cash assistance to the most vulnerable Syrian families. Sector partners are in agreement that this requires the further consolidation of processes of identification, eligibility determination and monitoring and are committed to developing sector wide standards that will ensure equitable, targeted and efficient provision of cash assistance.

3. RESPONSE STRATEGY

In 2014, Cash Sector partners will provide the following types of targeted support on the basis of coordinated assessment and evidence-based needs: urgent cash assistance to mitigate financial shocks and any immediate critical needs; time bound/ongoing cash assistance; and seasonal or other one-off cash assistance to over 137,000 vulnerable Syrian individuals (through the head of household).

All other forms of conditional cash assistance will be provided through the specific sector of intervention, i.e. cash for rent by the Shelter Sector partners. Nonetheless, the Cash Sector will continue to act as an advisory body and resource-sharing forum for actors using cash as a modality to provide assistance.

The Cash Sector response strategy will emphasize the link between much-needed/immediate humanitarian assistance and more durable interventions informed by developmental approaches. All Cash Sector responses will seek to support the work of the Host Community Platform and other local development efforts.

Sector partners recognize and are committed to ensuring that all cash interventions are designed and implemented on the basis of the careful assessment of the Syrian population, changes over time and a thorough analysis of the specific needs of Syrian women, girls, boys and men.

The success of the sector response strategy (and its regular review) will therefore critically hinge on the contributions made under the second objective of coordination, where the sector will standardize modalities of work. These will include sector-wide:

- Collection of joint baseline data and a combination of humanitarian profiling (specific needs of households headed by males, females, people with disabilities, etc.);
- Assessment of family gender dynamics in access to and use of cash assistance;
- Vulnerability assessments and eligibility criteria which are gender-sensitive and will work to ensure that men and women have equitable access to cash and are able to use it;⁹⁴

⁹⁴ In specific cases where there is concern that women and girls may not be able to use cash assistance (access market space due to protection or cultural/religious reasons) Cash partners will refer cases to other sectors that may be better placed to address specific needs.

- Cash distribution methods;
- Post distribution monitoring and ongoing monitoring and evaluation of changing needs at the area and household level.

Standardized tools and assessments will be shared with other sectors and all cash assistance will be closely coordinated with both cash and non-cash assistance provided by other sectors in particular Food Security, Shelter, Protection, WASH and Health. The Cash Sector will commit under Objective 2 to furthering in particular the standardization of vulnerability, assessment and monitoring tools, which will also be available to related sectors where close coordination is a must. The challenge in 2014 will be using limited means to reply to humanitarian needs that out stretch the ability of any single actor to respond. The Cash Sector approach to targeting lends itself to cross-sectoral references, which if integrated fully, should turn cash transfers into either a short-term stop-gap measure as other assistance is being rolled out or into a cash complement that covers the remaining needs that cannot be covered by other types of assistance provided across other sectors.

Cross-sector partners provide clear evidence that there are and will always be families in need of cash transfers to support themselves in a situation of displacement and the Cash Sector is committed to addressing the needs of the majority of those families with priority given to the most vulnerable. At the same time, Syrian refugee women, girls, boys and men in Jordan enjoy access to many basic services, which, if strengthened appropriately, can respond to their needs. Therefore, it will be important to both:

- Observe and support the positive (formal and informal) coping strategies of Syrian women, girls, boys, and men, that continue to evolve and further develop them wherever possible;
- Support the local social security nets and infrastructure.

Finally, Cash Sector partners recognize that vulnerable women, girls, boys and men in displacement face specific challenges and protection issues and that household gender dynamics change and affect the equitable access of family members to assistance; therefore, Sector members will continue to monitor the impact of and access to cash assistance for all household members and changes over time.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Ensure that the needs of extremely vulnerable SYR as well as JOR affected by the refugee crisis are covered across Jordan.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Provision of equitable urgent cash assistance		45.000	13.500	Country Wide (Balqa, Amman, Aqaba, Azraq, Irbid, Jarash, Karak, Ma'an, Mafraq, Tafileh, Zarqa)	12.565.017	11.606.823	958.194		ACTED, CARE, DRC, Global Communities, ICMC Intersos, IRC, Mercy Corps, OXFAM, PU-AMI, TGH, UNHCR WVI
Output 1.2 Provision of equitable regular cash assistance		92.500	22.500	Country Wide (Balqa, Irbid, Karak, Ma'an, Mafraq, Zarqa)	38.408.968	2.140.323	36.268.645		ACF, ACTED, Caritas, DRC, HI, Intersos, IRC, MEDAIR, OXFAM, Save the Children International, UNHCR
Output 1.3 Provision of equitable seasonal assistance		92.500	8.000	Country Wide (Amman, Irbid, Madaba, Mafraq, Zarqa)	14.722.775	733.825	13.988.950		ACF, AVSI, CARE, HI, MEDAIR, UNHCR
Objective 1					65.696.760	14.480.971	51.215.789		

Objective 2. Ensure that coordination is continuously enhanced in order to deliver quality cash assistance in the most efficient and targeted manner possible to MWBG.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Standardized and gender-sensitive modalities and monitoring mechanisms developed				Amman Governorate	122.304		122.304		UNHCR
Objective 2					122.304		122.304		

Sector indicators	Target
# of individuals assisted (disaggregated by MWBG)	343.733
# of individuals assisted (disaggregated by MWBG)	262.148
# of individuals assisted (disaggregated by MWBG)	145.500
# of standards developed (i.e. criteria, PDM, levels of assistance, ...)	5

CASH - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	65.819.064	14.480.971	51.338.093		41.812.709

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Cash in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	3,720,000	2,232,000	1,488,000
ACTED	4,600,000	2,760,000	1,840,000
AVSI	300,758	180,455	120,303
CARE International	13,500,000	8,100,000	5,400,000
Caritas	635,593	381,356	254,237
DRC	3,629,500	2,177,700	1,451,800
Global Communities	28,000	16,800	11,200
HI	3,100,000	3,100,000	-
ICMC	375,000	225,000	150,000
INTERSOS	651,000	390,600	260,400
IRC	3,350,000	2,010,000	1,340,000
Medair	1,915,200	1,149,120	766,080
Mercy Corps	260,000	156,000	104,000
Oxfam	1,983,105	1,189,863	793,242
PU-AMI	1,880,000	1,128,000	752,000
SCI	10,000,000	6,000,000	4,000,000
TGH TRIANGLE GH	234,000	140,400	93,600
UNHCR	56,772,883	34,063,730	22,709,153
WVI	696,734	418,040	278,694
Total	107,631,773	65,819,064	41,812,709

M. Water Sanitation and Hygiene (WASH) response

Lead Agencies	UNICEF and UNHCR		
Participating Agencies	ACF, ACTED, GIZ, Global Communities, HI, JEN, JHAS, LWF, OXFAM, RI, Medair, Mercy Corps, MWI, THW, UNDP, UNHABITAT, UNICEF, UNHCR, WVI		
Objectives	<ol style="list-style-type: none"> 3. Affected populations are ensured with safe, equitable and sustainable access to sufficient quantity of water for drinking, cooking and personal and domestic hygiene. 4. Affected populations have access to safe and appropriate sanitation facilities. 5. Affected populations have reduced risk of WASH-related diseases through access to improved hygienic practices, hygiene promotion and delivery of hygiene products and services on a sustainable and equitable basis. 6. Establish and maintain effective mechanisms for WASH coordination at national and sub-national levels. 		
Requirements from January to June 2014	US\$92,276,167		
Prioritized requirements (Jan-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$55,696,080	US\$27,768,907	US\$8,811,180
Total 2014 indicative financial requirements	US\$153,793,612		
Contact Information	Syed Jamal Shah, jshah@unicef.org		
Gender Marker	2A		

1. ACHIEVEMENTS AND CHALLENGES

- a) Despite the sector being 74 per cent funded the operational costs remain consistently high. The main purpose of the RRP for the forthcoming year is to replace activities, initially established during the first phase of the emergency, with more sustainable measures and equitable services of the refugee population in both camps and host communities.
- b) Sector partners have been able to respond to the WASH needs of all refugee women, girls, boys and men in camps (over 100,000 individuals) including schools, youth/child friendly spaces and other public places.
- c) WASH Sector partners have been able to provide services within the host communities through equipment, operationalizing three boreholes, and rehabilitation of household-level water and sanitation infrastructures, benefitting more than 200,000 beneficiaries through increased availability of potable water. In addition, through improvement of WASH services in 170 schools, nearly 74,000 school children (37,148 girls; 36,852 boys) will have benefitted by December 2013.
- d) Successful sector coordination and partnership with over 17 INGOs/NGOs at the national and camp levels (Zaatari and Azraq) and establishment of WASH task force to engage on more developmental issues with the NGOs, donor community and Government counterparts.

- e) Several WASH assessments in camp/host communities with consolidation of information to enable more targeted planning and activities.

During this response the following major challenges are being faced:

- Water trucking remains a major expense in Zaatari camp. Recently two successful boreholes were drilled and a planned water network will substantially reduce the cost of water delivery.
- Refugees have installed more water-demanding appliances in the camp increasing water demand. To meet that demand, above the provision of water trucked by the humanitarian community, private water vendors now operate in Zaatari. These vendors, however, do not fall within the remit of water quality monitoring, which in turn means increased community sensitization and awareness of public health risks is required.
- Desludging throughout the camp and disposal of wastewater is an unavoidable and major expense. Provision of sewerage network and waste water treatment plants are being planned to increase efficiency of collection and disposal. These will reduce environmental risks to Jordanian groundwater reserves.
- Communal facilities remain a target for vandalism and have low utilization particularly in older parts of Zaatari camp. There is a trend towards privately installed household water and sanitation facilities, many of which are of sub-standard quality and inappropriately designed. Water and sewage network designs will need to accommodate this trend.
- Clear WASH needs have been identified in various host community assessments/surveys including specific needs of provision of female toilets within the households. The overwhelming needs in the camps have constrained scaling up of action elsewhere.
- Safe access of women, girls, boys and men, as well as elderly refugees, has been considered to ensure safety and privacy, but significant challenges still remain in terms of lighting provision around the communal WASH blocks. As of now WASH partners have been able to provide solar lighting to 109 WASH facilities while planning is in progress to cover the rest. In general hand-washing is still not widely practiced, especially by women, and therefore extra effort in hygiene promotion is required by the WASH partners working in the camp.
- Syrian refugee population movements, departure of refugees, arrival of new refugees in camp and non-camp settings and lack of capacity in the WASH sector among the national NGOs are major impediments to the implementation of WASH activities.

2. NEEDS AND PRIORITIES

Population group	Total Population	Targeted population ⁱ
Camp refugees	200,000	200,000
Non-camp refugees	600,000	300,000
Other affected population	700,000	315,000

ⁱ Further details on populations to be targeted can be found in sector objective and output table below. Information on target population at activity level is available through UNHCR Jordan or the Sector Chairs. The population figures in the above table take into consideration the fact that registration activities target all Syrian populations (camp and non-camp)

WASH response forms part of life-saving action in most humanitarian emergencies and, due to the dynamic nature of the Syrian refugee emergency, WASH interventions are expected to remain a priority area of response throughout 2014. Around 800,000 refugees are expected to continue to reside or arrive in camps or hosting governorates through the upcoming year.

In refugee camps, WASH facilities are essential and must be maintained throughout the camp's lifetime. Over 2014, approximately 200,000 individuals are expected to reside in a minimum of five refugee camps, in which WASH services need to be provided with minimum agreed standards.

Where Jordanian populations are hosting – or expecting to host – Syrian refugees, WASH coverage is often already below the national standard. The increased population numbers add to the burden on drinking water supplies and sanitation infrastructure, and will continue to do so, resulting in increased WASH-related diseases. The most likely 2014 scenario implies approximately 600,000 refugees and 180,000 host community members may require WASH assistance.

Several assessments of WASH needs in refugee-hosting communities have been undertaken by WASH sector partners and Government line ministries. Through these assessments gender focus groups were framed to ensure female concerns are included. Most of the surveys were carried out with at least 50 per cent female participation. Based on consolidated data derived from an interagency assessment, Knowledge Attitude and Practices (KAP) surveys, REACH/ACTED and Emergency Market Mapping and Analysis (EMMA) and a recent Interagency WASH assessment, the following data provides a picture of needs:

1. The percentage of refugees in the affected areas of Irbid, Mafraq, Ajloun, Jerash and Balqa receiving water less than one day per week are 53, 51, 68, 76 and 35, respectively.⁹⁵
2. Water quality is adequate by Jordanian standards, but approximately 7–20 per cent of respondents rated it as bad/fair in certain areas, and these households buy more water which is more expensive than piped water.

⁹⁵ REACH/ACTED, *Findings of Household Assessment of Syrian Households in Host Communities in the Northern Governorates*, 2013.

3. As mentioned in the challenges above, significant improvements in terms of lighting and privacy in the WASH services are required. A high proportion of Syrian women and children in Zaatari camp do not feel safe using WASH facilities in the camp at night; 82 per cent of women, 28 per cent of teenage girls, and 39 per cent of boys and girls under the age of 12 fear harassment on the way to and from the facilities.
4. Water delivery varies by season, from a few times a week in winter, to once every ten days in summer – or even once every 25 days, as documented. It also varies by location, with water being delivered less than one day a week for 70 per cent of refugees in Jerash, whereas in Balqa, 70 per cent of the population receives water at least 1–2 days a week.⁹⁶ In all of the refugee-affected areas more than 90 per cent of the population (Syrian and Jordanian) reported buying drinking water from water tankers and/or shops.⁹⁷
5. Refugees are utilizing 6–16 m³ of water per person per month, averaging a monthly cost of JOD 24–55 in winter, increasing to JOD 33–80 in the summer.⁹⁸
6. More than 90 per cent of the households in the refugee-affected areas have toilets. The sewerage network coverage is around 35 per cent. Most households (Syrians and Jordanians) pay around JOD 25–30 per month for desludging, while 20 per cent of the Syrians living in tents and on farms have no access to septic tanks or a sewage network.
7. Nearly 40 per cent of hosted refugees report bathing constraints due to cost of soap (19 per cent) and lack of water (19 per cent).

96 WASH Sector in Jordan, *Inter-agency Water, Sanitation and Hygiene Assessment in Jordan*, October 2013.

97 REACH/ACTED, *Findings of Household Assessment of Syrian Households in Host Communities in the Northern Governorates*, 2013.

98 OXFAM GB-ECHO Emergency Market Mapping & Analysis, *Water Market System in Balqa & Zarqa Governorates*, August/September 2013.

3. RESPONSE STRATEGY

The implementation of the WASH response as defined above is guided by the following:

- Coordinate effective delivery of WASH response to the affected populations through the WASH Sector, including Government, key stakeholders within and external to the sector, and establishment of coordination mechanisms at the camp/field level.
- WASH interventions should, from the outset, be guided by, and ensure linkage to, longer term development efforts, including guidance from national WASH-related policies and strategies.
- Proactive commitment to ensuring cross-cutting issues of human rights, gender, accessibility, environment and refugees are addressed in immediate response and prioritization of projects; addressing WASH priorities with special emphasis on the needs of women, children, people with disabilities and the elderly. Organizing single gender focus group discussions, thus involving women, girls, boys and men equally in choosing the location and design of latrines and bathing facilities.
- Existing and any new camps efforts will be geared towards sustainable solutions and environmental protection of Jordanian water reserves.
- Ongoing assessments will continue to inform prioritization of activities in affected areas, including: installation/restoration of water supply to supplement existing systems; technical support and installation of sanitation facilities and wastewater treatment; intensive social mobilization/hygiene promotion for improved hygiene and sanitation coverage; distribution of WASH-related non-food items for safe household water storage and treatment; and support for water and sanitation facilities in schools and health centres. For an effective and efficient response aimed at reaching those identified as most vulnerable, these actions will be planned and prioritized, in coordination with Government counterparts and other sectors, including Camp Coordination, Health, Education and Protection Sectors with focus on vulnerable groups and gender concerns.
- Establishment of multi-faceted and robust monitoring and reporting mechanisms to measure the effectiveness and impact of the WASH response on targeted communities. Specific and dedicated efforts will be made to:
 - i) Ensure decision-making and responsibility for water and sanitation are being shared equally by beneficiary both women and men
 - ii) Ensure improvement in the safety of WASH facilities
 - iii) Emphasize routine hand-washing by women, girls, boys and men
 - iv) Work with implementing NGO teams, in both camps and host communities, increasing their capacity to integrate gender issues with WASH emergency response and preparedness.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Affected population are ensured with safe, equitable and sustainable access to sufficient quantity of water for drinking, cooking and personal and domestic hygiene.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 Ensure regular access to safe water as per the agreed minimum standard to the refugees living in camps	200.000	300.000	180.000	Country Wide	28.716.000	27.216.000		1.500.000	UNICEF (ACF, ACTED, GIZ, Global Communities, HI, JEN, JHAS, LWF, OXFAM, RI, Medair, Mercy Corps, MWI, THW, WVI)
Output 1.2 Ensure access to safe water as per agreed minimum standards and to Syrian boys and girls in schools, youth/child friendly spaces and in public places in camps.		15.000	15.000	Irbid, Zarqa	180.000		180.000		WVI
Output 1.3 Improve access to safe water to vulnerable Syrian refugees and Jordanians living in urban and rural host communities including schools and other public places		25.000	25.091	Country Wide (Ajloun, Balqa, Amman, Aqaba, Irbid, Jarash, Karak, Madaba, Ma'an, Mafraq, Tafileh, Zarqa)	9.495.539	661.200	6.315.539	2.518.800	ACF, ACTED, Global Communities, JEN, MEDAIR, Mercy Corps, OXFAM, RI, UNHCR (IRD, Mercy Corps), WVI
Output 1.4 Improvement/extension/rehabilitation of water systems in areas affected by refugee influx.		20.000	17.500	Balqa, Irbid, Karak, Mafraq, Zarqa)	5.382.000		5.382.000		Mercy Corps, OXFAM, RI, UNHCR (IRD, Mercy Corps), WVI
Objective 1					43.773.539	27.877.200	11.877.539	4.018.800	

Objective 2. Affected populations have access to safe and appropriate sanitation facilities.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Ensure regular access to secure, clean and culturally appropriate sanitation facilities to Syrian refugees in camps as per agreed minimum standards.	20.000		100.000	Country Wide (Irbid Zaatari)	30.790.080	24.190.080	6.600.000		HI, UNDP, UNICEF (ACF, ACTED, GIZ, Global Communities, HI, JEN, JHAS, LWF, OXFAM, RI, Medair, Mercy Corps, MWI, THW, WVI)
Output 2.2 Ensure access to gender appropriate safe sanitation, as per agreed minimum standards, to Syrian boys and girls in schools, youth/child friendly spaces and in public places in camps		600	600	Irbid, Zaatari	120.000		120.000		WVI
Output 2.3 Ensure appropriate solid waste management in the camps.									Activities included in other outputs.
Output 2.4 Improve access to sanitation facilities to vulnerable Syrian refugees and Jordanians living in urban and rural host communities including schools and other public places		25.000	25.001	Country Wide (Balqa, Azraq, Irbid, Jarash, Karak, Mafraq, Zarqa Zaatari)	5.433.930		2.386.950	3.046.980	ACF, ACTED, MEDAIR, OXFAM, RI, UNHCR (IRD, Mercy Corps), WVI

Output 2.5 Improvement/extension/ rehabilitation of Waste Water systems in areas affected by refugee influx	53.000	99.800	314.200	Country Wide (Balqa, Irbid, Mafraq Zarqa, Zaatari)	3.836.756		2.823.356	1.013.400	JHAS, LWF, MEDAIR, OXFAM, UNHABITAT, UNHCR (IRD, Mercy Corps), WVI
Objective 2					40.180.766	24.190.080	11.930.306	4.060.380	

Objective 3. Affected populations have reduced risk of WASH related diseases through access to improved hygienic practices, hygiene promotion and delivery of hygiene products and services on a sustainable and equitable basis.

Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 3.1 Ensure promotion of hygiene and water conservation among all refugees in camps.	55.000	6.000	0	Country Wide (Azraq, Irbid, Zaatari)	5.166.000	3.628.800	1.537.200	-	UNICEF (ACF, ACTED, GIZ, Global Communities, HI, JEN, JHAS, LWF, OXFAM, RI, Medair, Mercy Corps, MWI, THW, WVI), ACF, JEN, LWF, WVI
Output 3.2 Raise awareness on hygiene and water conservation among Syrian refugees and Jordanians in the host communities	196.400	35.000	66.000	Country Wide (Ajloun, Balqa, Amman, Irbid, Jarash, Karak, Ma'an, Mafraq, Zarqa and camps (Zaatari and EJC))	2.605.830	-	1.915.830	690.000	ACTED, Global Communities, MEDAIR, OXFAM, RI, UNHCR (IRD, Mercy Corps), WVI
Objective 3					7.771.830	3.628.800	3.453.030	690.000	

Objective 4. Establish and maintain effective mechanisms for WASH coordination at national and sub-national levels.									
Output	Targeted population by type (individuals) in 2014			Location (s)	Detailed requirements from January - June 2014				Partners
	SYR in camps	SYR in urban	Other affected pop		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 4.1 Effective regular group coordination meetings and development of an information management system producing regular products.		2.500	2.000	Country Wide (Azraq, Irbid, Zaatari)	550.032		508.032	42.000	UNICEF (ACF, ACTED, GIZ, Global Communities, HI, JEN, JHAS, LWF, OXFAM, RI, Medair, Mercy Corps, MWI, THW, WVI), RI
Objective 4					550.032		508.032	42.000	

Sector indicators	Target
# of Syrian boys and girls having access to safe water in schools, youth/child friendly spaces and in public places in the camps.	60.000
# of Syrian refugees and affected Jordanians having improved access to safe water in the host communities.	234.590
# of school children benefitting from improved access to safe water in schools in the host communities.	44.500
# of Syrians Refugees and Jordanians getting benefit from improvement/extension/rehabilitation of water systems in the refugee affected areas.	120.000
# of MWBG with access to secure, clean and culturally appropriate sanitation facilities in the camps.	2.400
# of women and girls express satisfaction with the safety and privacy of latrines and bathing facilities.	63.306
# of MWBG benefitting from improvements/extension/rehabilitation of waste water systems in the areas affected by refugee influx.	517.500
Absence of solid waste dumps in camps.	1
# of MWBG Syrian refugees and Jordanians reached through hygiene messages and demonstrate knowledge of key hygiene practices in host communities	489.500
# of MWBG can participate in Hygiene promotion activities and demonstrate knowledge of key hygiene practices in camps.	200.000
# of agencies working in a coordinated manner resulting in gaps filling, avoidance of duplication and adaptation of agreed standards.	195

WASH - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	92.276.167	55.696.080	27.768.907	8.811.180	61.517.445

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

WASH in Jordan (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	208,250	124,950	83,300
ACTED	5,542,000	3,325,200	2,216,800
Global Communities	114,500	68,700	45,800
HI	400,000	240,000	160,000
JEN	3,500,000	2,100,000	1,400,000
JHAS	1,000,000	600,000	400,000
LWF	670,593	402,356	268,237
Medair	1,680,000	1,008,000	672,000
Mercy Corps	5,348,899	3,209,339	2,139,560
Oxfam	597,550	358,530	239,020
RI	8,270,000	4,962,000	3,308,000
UNDP	11,000,000	6,600,000	4,400,000
UN-Habitat	1,235,000	741,000	494,000
UNHCR	19,470,300	11,682,180	7,788,120
UNICEF	92,171,520	55,302,912	36,868,608
WVI	2,585,000	1,551,000	1,034,000
Total	153,793,612	92,276,167	61,517,445

N. Jordan Financial Requirements Summary

Table 1: Country Financial Requirements per Agency

Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	6,358,250	3,814,950	2,543,300
ACTED	21,674,500	13,004,700	8,669,800
ActionAid	1,425,000	855,000	570,000
ADRA	827,500	496,500	331,000
AVSI	1,579,798	947,879	631,919
CARE International	21,250,000	12,750,000	8,500,000
Caritas	16,056,837	9,634,102	6,422,735
CVT	2,500,000	1,500,000	1,000,000
DRC	13,890,810	8,334,486	5,556,324
FAO Food & Agricultural Organization	6,500,000	4,400,000	2,100,000
FCA	3,000,000	1,800,000	1,200,000
FPSC	1,536,680	922,008	614,672
FRC	3,000,000	1,800,000	1,200,000
Global Communities	10,790,100	6,474,060	4,316,040
HI	10,000,000	7,240,000	2,760,000
ICMC	2,055,000	1,233,000	822,000
ILO	2,880,000	1,728,000	1,152,000
IMC	11,458,369	6,875,021	4,583,348
Internews	630,000	378,000	252,000
INTERSOS	1,899,500	1,139,700	759,800
IOCC	30,000	18,000	12,000
IOM	12,204,596	7,322,758	4,881,838
IRC	17,560,000	10,536,000	7,024,000
IRD	1,974,900	1,184,940	789,960
IRW	5,377,856	3,226,714	2,151,143
JEN	6,500,000	3,900,000	2,600,000
JHAS	17,061,400	10,236,840	6,824,560
JHCO	4,012,500	2,407,500	1,605,000
JRS	667,000	400,200	266,800
KnK	300,000	180,000	120,000
LWF	4,839,093	2,903,456	1,935,637
MA	620,000	372,000	248,000
Madrasati Initiative	2,525,900	1,515,540	1,010,360
MdM	4,150,000	2,490,000	1,660,000

Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
Medair	8,404,200	5,042,520	3,361,680
Mercy Corps	18,733,899	11,240,339	7,493,560
MPDL	193,000	115,800	77,200
NICCOD	1,354,500	812,700	541,800
NRC	33,735,000	20,241,000	13,494,000
OPM	400,000	240,000	160,000
Oxfam	2,580,655	1,548,393	1,032,262
PU-AMI	3,560,000	2,136,000	1,424,000
Questscope	267,500	160,500	107,000
RHAS	720,000	432,000	288,000
RI	16,445,000	9,867,000	6,578,000
SCI	18,989,000	11,393,400	7,595,600
SCJ	3,915,000	2,349,000	1,566,000
Taghyeer	220,000	132,000	88,000
TDH	1,282,160	769,296	512,864
TDH I	1,442,000	865,200	576,800
TGH TRIANGLE GH	2,545,000	1,527,000	1,018,000
UN Women	1,130,000	678,000	452,000
UNDP	19,700,000	11,820,000	7,880,000
UNESCO	3,201,571	1,920,943	1,280,628
UNFPA	18,595,231	11,157,139	7,438,092
UN-Habitat	5,585,000	3,351,000	2,234,000
UNHCR	316,211,320	189,726,792	126,484,528
UNICEF	170,517,372	102,310,423	68,206,949
UNOPS	4,700,000	2,820,000	1,880,000
UPP	376,892	376,892	-
WarChild UK	756,788	454,073	302,715
WFP	305,050,000	141,848,250	163,201,750
WHO	13,569,000	8,141,400	5,427,600
WVI	9,334,914	5,600,948	3,733,966
Total	1,200,650,591	681,099,361	519,551,230

Government of Jordan	413,787,018	206,893,509	206,893,509
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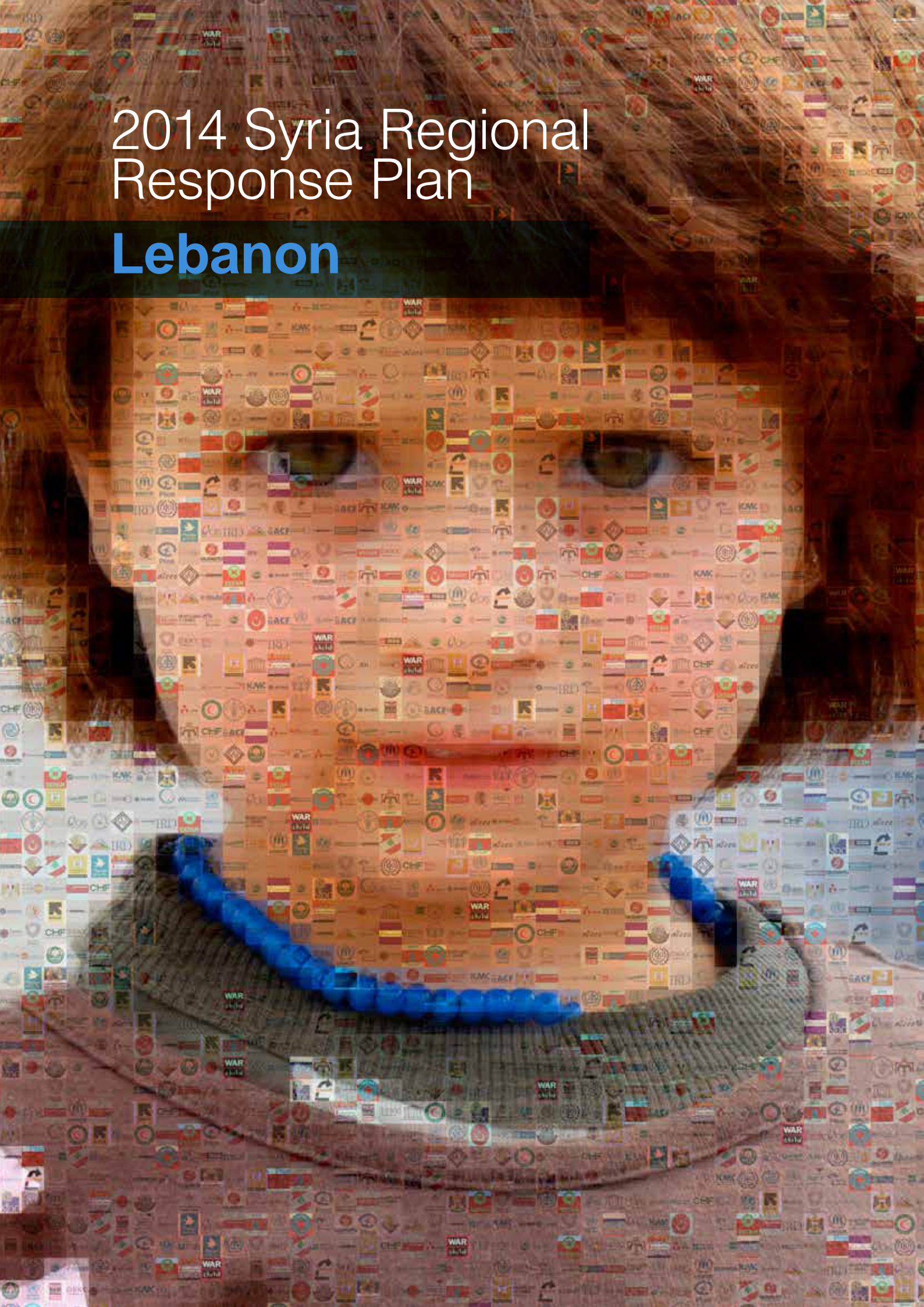
Table 2: Country Financial Requirements per Sector

Sector (US\$)	Total 2014	January-June 2014	July-December 2014
Protection	169,076,190	101,532,898	67,543,292
Food security	322,120,343	152,590,456	169,529,887
Education	86,317,109	51,790,265	34,526,844
Health	120,981,008	72,652,177	48,328,831
Shelter and Settlements	136,520,250	81,912,150	54,608,100
Non-Food Item (NFI)	104,210,306	62,526,184	41,684,122
Cash	107,631,773	65,819,064	41,812,709
Water Sanitation and Hygiene (WASH)	153,793,612	92,276,167	61,517,445
Grand total	1,200,650,591	681,099,361	519,551,230

Government requirements (US\$)	Total 2014	Jan-Jun 2014	Jul-Dec 2014
Education - Government of Jordan	129,936,151	64,968,076	64,968,075
Health - Government of Jordan	47,400,000	23,700,000	23,700,000
Municipal support - Government of Jordan	97,000,000	48,500,000	48,500,000
WASH - Government of Jordan	139,450,867	69,725,433	69,725,434
Total GoJ	413,787,018	206,893,509	206,893,509

2014 Syria Regional Response Plan

Lebanon





2014 Syria Regional Response Plan

Lebanon

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Lebanon Response Plan

OVERVIEW

A. Executive Summary

Lebanon, a country of four million people, has demonstrated unfaltering solidarity towards displaced populations by receiving 36% of the Syrian refugees in the region. Already severely economically impacted by the conflict, it now hosts over 880,000¹ refugees from Syria, adding to a pre-existing Palestine refugee population of 280,000. Refugees make up over one fifth of the population. The cumulative economic, social and security consequences are profound and enduring.

This appeal presents humanitarian needs and requirements for 2014, for the following projected populations:

- **1.5 million Syrian refugees,**
- **100,000 Palestine refugees from Syria,**
- **50,000 Lebanese returnees, and**
- **1.5 million affected Lebanese.**

The total appeal is for US\$1.7 billion for the inter-agency response (including 80 million presented by the Government of Lebanon (GoL) with UNDP and WFP) and US\$165 million presented by the Government. These plans have been developed collaboratively by the GoL, 11 UN agencies, 54 national and international NGO partners as well as refugees and host communities, under the overall leadership of the Ministry of Social Affairs (MoSA) and UNHCR, and in close coordination with the donor community.

Key features of the response include: prioritization and targeted assistance across all sectors; attention to the specific needs of women and children; and new programming efficiencies, such as the expansion of cash assistance and central and common procurement. Partners also have placed significant emphasis on enhancing capacity to government institutions impacted the most by the refugee influx and support to hosting communities – prioritizing areas with both high concentrations of Lebanese poor and high numbers of Syrian refugees. Institutional and community support interventions are designed for immediate impact corresponding to Track 1 interventions outlined in the National Stabilization Roadmap².

1 As of 30 November 2013, 833,685 Syrian refugees had approached UNHCR: 762,242 had been registered and a further 71,443 were awaiting registration. At 29 November 2013, some 50,940 Palestine Refugees from Syria had been recorded by UNRWA.

2 *Lebanon Roadmap of Priority Interventions for Stabilization from the Syrian Conflict*, 12 October 2013.

The Ministry of Social Affairs is the overall Government entity in charge of the coordination of the refugee response in Lebanon. To support host communities and address the negative socio-economic impact of the refugee crisis, the MoSA has identified interventions related to primary health care protection of vulnerable groups and poverty reduction. The GoL supports the response plan and relies on the international community to assist Lebanon in coping with the humanitarian dimension of the refugee influx and its impact on the Lebanese population. While a number of Track 1 interventions outlined in the Government's National Stabilization Roadmap are addressed in this response, the additional funding and strategies required to reinstate the access to, and quality of, public services to their pre-Syrian conflict level are outside this appeal.

B. Context

Lebanon now hosts some 880,000 refugees from Syria, including some 50,000 Palestine Refugees from Syria (PRS). This is the largest population of refugees from Syria in the region. The pace and scale of displacement to Lebanon has been overwhelming: growing from under 150,000 registered refugees from Syria in January 2013 to over 760,000 today³. This represents an increase of over 500 per cent. Almost one in five residents in Lebanon is now a refugee. In addition, the Lebanese Government estimates that a further 230,000 Syrians are residing in the country. While refugee arrivals have slowed in neighbouring countries, Lebanon's rate has been relatively consistent with projections made in the previous response plan.⁴

The Syrian crisis and refugee influx has had many destabilizing consequences for Lebanon. A recent World Bank (WB)/UN assessment⁵ points to a reduction in GDP growth by 2.85% each year since the crisis began and estimates that the total cost of the crisis to Lebanon will reach US\$7.5 billion by end 2014. Spending on education and health has increased significantly while the quality of public services has reportedly deteriorated, especially for vulnerable Lebanese citizens.⁶ Competition in the informal job market has driven wages down, while prices for basic necessities, such as fuel or rental accommodation, have increased. Whilst refugees are dispersed throughout the country, the majority (86%) are living in communities where most of the vulnerable Lebanese (66%) also reside.

Despite these challenges, the current caretaker Government (GoL) has kept borders open to Syrian refugees and allowed them to settle across the country. Although the vast majority of persons seeking protection and assistance have been permitted to enter in 2013, some individuals, in particular among PRS, have faced difficulties⁷. Moreover, the Government continues to allow

3 An additional 71,000 refugees are awaiting registration

4 The Regional Response Plan 5 (RRP5) projected that some 1,000,000 refugees would be registered or in the process of registration by end 2013. Current trends indicate that the end year figure will be 1,020,000.

5 *Lebanon - Economic and social impact assessment of the Syrian conflict (ESIA)*, World Bank, 20 September 2013.

6 The ESIA projects a loss in Government revenue of US\$1.6 billion and an increase in Government expenditure of US\$1.2 billion. Lebanon's fiscal deficit is expected to increase by US\$2.7 billion over the period 2012-2014.

7 Since August 2013, UNHCR and UNRWA have observed changes in border practices which have resulted in a number of persons not being able to enter Lebanon.

Syrians access to public services, although the latter are increasingly being overwhelmed by rising demand. PRS, like other Palestine refugees in Lebanon, are unable to access public services and continue to rely on UNRWA for support.

Shortages in water and electricity, as well as shortcomings in solid waste management have become more commonplace. Pressure on water supply and waste management is leading to rising tensions, destabilizing already fragile settings. Highly privatized healthcare and education systems make the expansion of these services for refugees extremely costly. The number of refugee children has largely overstretched the capacity of public schools. Health providers report mounting unpaid bills from refugees. With limited livelihood opportunities, the vulnerability of refugees is increasing over time, which may lead them to resort to negative coping mechanisms, such as a child labour, child marriage or survival sex.

Refugees have been permitted to settle throughout the country and are found across 1,500 localities. Some 67% of refugees rent basic apartments or homes, half of which are overcrowded with several refugee families sharing limited space. Over 30% live in substandard and insecure conditions in makeshift shelters, tents, unfinished buildings, garages, warehouses and worksites⁸. Access to clean water and sanitation, and protection from the elements, in particular flooding, are constant challenges. PRS must mainly find shelter in overcrowded Palestine refugee camps or their surroundings.

As the country grapples with its own political and internal divisions, the additional pressures brought on by a massive refugee influx are fraying nerves. There is a growing sense that the Lebanese are being asked to accommodate a seemingly endless stream of refugees, without commensurate support. Curfews imposed on refugees in local villages and recent evictions of refugees from apartments and land used for informal settlements are testament to growing tensions between Lebanese and refugee communities in some areas. Additional threats to the security of Lebanon range from missiles from Syria landing in local villages, to engagement by Lebanese in the fighting in Syria, or sporadic internal clashes which have posed risks for Lebanese and refugees and disrupted humanitarian access.

The RRP5 is just 51% funded for the inter-agency response, which has meant that an already prioritized response plan had to be further cut and streamlined.⁹ The funds available have enabled the most critical interventions to be carried out, including the doubling of registration capacity to over 4,000 refugees per day. By the end of October, almost 1,109,000 individual food vouchers were distributed¹⁰ and over 440,000 persons were assisted with primary health services. 53,000 children were enrolled in formal education and 7,000 PRS in UNRWA schools. 194,000 persons received shelter assistance, and a further 450,000 persons are to receive fuels, stoves, clothes and blankets to ensure warmth throughout the winter months. 80 community support projects were implemented and a further 111 are planned or ongoing. These interventions have saved countless lives, and helped to ensure the basic needs of hundreds of thousands of refugees were met.

8 *UNHCR Shelter Survey*, August 2013.

9 *UNHCR Inter-agency Funding Update*, 28 October 2013, includes funding of requirements put forward by the Lebanese Government and Humanitarian Agencies.

10 This figure includes people who have received a food voucher every months and those that have received vouchers for shorter periods in a variety of different projects.

Funding shortfalls, coupled with the continuous stream of refugees and the stretched capacity of the GoL and communities, mean that many thousands of refugees continue to face extreme hardship and burdens on hosting communities continue to mount. Partners have made significant efforts to ensure that available resources reach the most vulnerable in 2014. This includes the introduction of targeting across all sectors; reinforced coordination and new programming efficiencies such as the introduction of cash assistance and centralised procurement. Even with these measures, early and increased international support will be needed in 2014 to avoid the disruption of basic and life-saving interventions.

Based on the impact and needs identified and quantified in the WB/UN Economic and Social Impact Assessment (ESIA), the GoL, with the support of ESIA partners, aims at addressing the adverse consequences of the Syrian conflict on Lebanon and its population. The National Stabilisation Roadmap includes four tracks of interventions to bring about: 1) rapid immediate impact; 2) short to medium term delivery and impact; 3) longer-term delivery and impact and 4) private sector engagement¹¹. In a complementary way, a number of immediate measures corresponding to track 1 interventions, designed to provide direct support to government institutions and communities most impacted by the refugee influx, are included in this appeal and will serve to ensure continued social cohesion and receptivity towards refugees.

11 Ibid at note 1

C. Needs, vulnerabilities and capacities

The vast majority (99%) of refugees in Lebanon are propelled to come by violence in Syria, with a large proportion having already been displaced within Syria¹². Many arrive in Lebanon with nothing but the clothes on their backs. Those who arrive with more resources see these diminish quickly as their situation becomes more protracted.

A recent vulnerability assessment conducted by WFP, UNHCR and UNICEF¹³ indicates that at least 72% of refugees will require continuing international assistance in 2014. Some 39% of newcomers are identified as having specific needs¹⁴. For the 49% of refugees who arrived in Lebanon before 2013, a second or third year in exile will bring entrenched hardship and deprivation. PRS and Lebanese returnees face similar challenges.

Children comprise over half the refugee population. They are among the most tragic casualties of the war, with many severely shaken by their experiences and most having been out of school for one to two years. Public school capacity is overstretched, making the need to find alternative schooling acute. Outside of school, distress lingers, risks of exploitation increase and prospects for a better future diminish. Because of deepening poverty, many families must rely on the contribution of children, who are often out-of-school and sometimes subject to the most exploitative working conditions. Field monitoring suggests that early marriages as a coping mechanism are becoming more prevalent.

Close to 25% of households are headed by women¹⁵, with a large number of women having lost their husbands or fathers in the conflict in Syria. Many are exposed to harassment, and some have resorted to survival sex to provide for their families. Lack of privacy in overcrowded collective shelters and insufficient income or transferable skills, increase risks of sexual and gender based violence. A recent gender analysis revealed changes in gender roles amongst refugees: traditional norms have further limited the mobility and access to resources of women¹⁶.

The poor health status of new arrivals is worrisome. Public health institutions have reported an increase in communicable diseases¹⁷ with a real risk of spread of preventable diseases, including

12 UNHCR Registration data, 31 October 2013. 40% of refugee arrivals have been displaced already within Syria. 15% of these refugees were displaced more than once.

13 *Vulnerability Assessment for Syrian Refugees (VASyR)*, WFP, UNHCR, UNICEF; publication pending - due November 2013. The assessment used key food security indicators, such as household expenditure and dietary diversity, as well as health status, shelter condition, education and family conditions to survey 1,400 households. The 72% of persons found to be highly vulnerable translates into 68% of refugee households.

14 At 31 October 2013, over 280,000 refugees had been identified as having specific needs as part of the registration process, including children at risk, persons with disabilities, unaccompanied and separated children, older persons at risks, persons with specific medical conditions, single parent families, victims of torture and sexual and gender-based violence.

15 UNHCR Registration data, 31 October 2013

16 *Shifting Sands: Changing gender roles among refugees in Lebanon*, Oxfam, 02 September 2013

17 The Ministry of Public Health worked with partners to contain an outbreak of measles affecting some 1,700 children in 2013, of which 88% were Lebanese. Over 750 cases of Leishmaniasis were reported, a disease that was previously unknown among the Lebanese population. An increased number of cases of Hepatitis A and Leishmaniasis have also been reported in the course of 2013.

measles and polio, unless universal immunization of children and national health surveillance programmes are strengthened. In addition, based on recent experience, over 50,000 refugees are projected to need life-saving health interventions in 2014. The recent identification of cases of severe acute malnutrition amongst under-five children suggests declining health status, and the need for further information and action to prevent more widespread incidence. Capacities to comprehensively respond to mental illness are also sorely lacking. Poor sanitation networks and water supply, inadequate waste water and solid waste management, and limited access to fuel and electricity are similarly exposing refugees and host communities in many locations to further health and sanitation risks.

67% per cent of refugees rent apartments or houses, and over half of these are overcrowded. A growing proportion (some 30%) is resorting to extremely insecure shelters including tents, garages, empty buildings, and warehouses. These structures often lack adequate water, sanitation, drainage and are not secure against the elements. Land identified as appropriate for limited sized residential sites have not received Government approval, nor has the substitution of more sturdy structures for the makeshift ones currently in use. Given these conditions, over 500,000 refugees will be at risk in 2014 unless urgent measures are taken to finance and capacitate partners in their on-going efforts to weatherproof substandard dwellings, improve access to water and sanitation and to mitigate risks of flooding.

According to the WB/UN economic and social impact assessment, 170,000 Lebanese could be pushed into poverty, and up to 340,000 Lebanese, mainly youth and low-skilled workers, could become unemployed by end 2014 as a result of the Syrian conflict¹⁸. The economic and social impact is severe with an estimated loss of US\$7.5 billion in economic activity and the government deficit is estimated to widen by US\$2.6 billion over the 2012-14 period as a direct consequence of the crisis.¹⁹ The capacities of the Ministry of Social Affairs and its Social Development Centres, to address rising poverty among Lebanese require a critical investment to ensure continued social cohesion between Syrian and Lebanese communities.

18 The ESIA projects the supply of unskilled labour in the youth age group to increase by 120%.

19 WB/UN ESIA report

RESPONSE STRATEGY AND PRIORITIES

This response plan presents updated needs and requirements from January – December 2014 for:

- **1.5 million Syrian refugees,**
- **100,000 Palestine refugees from Syria,**
- **50,000 Lebanese returnees, and**
- **1.5 million affected Lebanese.**

These projections are informed by experience over the past year, as well as by planning of humanitarian agencies inside Syria and their projections of the evolving situation there. While the plan does not include projections for a rapid intensification of hostilities and consequent mass influx to Lebanon, readiness to respond to a sudden influx of 150,000 persons has been mainstreamed across sectors, in line with the inter-agency contingency plan for Lebanon.

The total appeal is for US\$1.7 billion for the inter-agency response across eight sectors. The Government is appealing for US\$245 million, of which US\$165 million is on its own for health, education, protection and social cohesion/livelihoods activities, and some US\$80 million in partnership with WFP and UNDP on projects related to food security and social cohesion/livelihoods. The response plan has been developed jointly by the Government of Lebanon, UN agencies and NGO partners so as to be fully consistent with complementary initiatives, such as the GOL's *National Roadmap for Stabilization* and the *No Lost Generation* Initiative.

The plan is also in line with regional priorities

Additional features of the response include: prioritization and targeted assistance across all sectors; the introduction of new programming efficiencies; enhanced capacity to government institutions impacted the most by the refugee influx and support to hosting communities, prioritizing areas with both high concentrations of Lebanese poor and high numbers of refugees from Syria.

In regard to prioritization and targeting, partners will continue to prioritize critical interventions to protect and meet basic and life-saving needs of the most vulnerable. Food assistance, for example, will be delivered to those who are determined to not be able to provide for themselves (some 80% of the refugee population)²⁰ while in other sectors partners will proceed from general vulnerability data to target specific groups most at risk and favour interventions with the greatest impact and cost-efficiency.

The requirements put forward in this appeal have been reviewed for cost efficiency, and represent a reduction in spending per capita from previous appeals. Programming efficiencies include the centralized procurement of medications; a focus on lower cost high impact non-formal education opportunities; the identification and development of additional shelter options by local authorities and a move to provision of assistance through cash transfer for food (via vouchers), core relief

²⁰ The 80% of refugees targeted for food assistance is based on the findings of the VASyR which found 72% of refugees to be vulnerable, as well as a safety net of as well as a safety net caseload of pregnant and lactating women, children under the age of two, elderly over the age of 60 and individuals identified as non-autonomous. The actual number assisted may differ based on the results of the verification and appeal process following the introduction of targeted.

items, hygiene kits and rent, as well as for newcomers. Partners will continue to pursue common advocacy, supported by donors, to reduce the high cost of delivery of essential services through the public system in some sectors, in particular health and education.

Partners will expand and harmonize cash assistance programmes, with the aim of delivering a multi-sectoral and comprehensive package of assistance through a single ATM card. Given the wide dispersal of the displaced population, the move from in-kind distribution to cash is expected to bring cost efficiencies. Partners will aim at providing different levels of assistance in each sector, as better information on the socio-economic status of refugees and affected populations becomes available. Cash will empower beneficiaries to use assistance in a way that best meets their needs, and will also inject resources into the local economy. Partners will monitor market and community impacts, and adjust programmes to mitigate any negative effects. This will include verifying that basic needs of beneficiaries remain covered and that women and girls control key resources of direct relevance to their well-being and protection. Some interventions in education, health and shelter that are not suitable for cash will continue to be directly delivered by partners.

Mapping will be used to regularly reassess the areas where the highest proportions of poor Lebanese and Syrian refugees co-exist, allowing partners to better geographically target their interventions to have maximal impact for all affected communities. Mapping data from October 2013 has revealed that 96 per cent of the registered refugee population and 66 per cent of vulnerable Lebanese live side-by-side in 225 locations²¹. Interventions aimed at maintaining social cohesion and address potential social tensions will target these communities.

Regardless of the method of delivering assistance, the need to ensure effective monitoring and outreach is recognised, both to ensure effective use of resources, but also as a critical safeguard to ensure that vulnerable refugees are identified and reached. This will be done through household visits; information provided by host communities, local authorities and front-line services providers; information gathered during registration verification exercises; and, through the expansion of refugee volunteers.

The current plan emphasizes the need to sustain significant support for public institutions and host communities to guarantee that Syrians and PRS will continue to be able to enter Lebanon and enjoy access to basic services. Vulnerabilities are expected to increase as conditions for refugees and other affected populations, including Lebanese communities, deteriorate. While the generosity of the Lebanese population remains unabated, community coping mechanisms are fraying. Partners will make a concerted effort to mainstream support to host communities across all programmes, and through community support projects implemented in close coordination with the GoL, both at national and local levels. Institutional and community support interventions are designed for immediate impact corresponding to track 1 interventions outlined in the national stabilization roadmap²².

21 *Equity in humanitarian action: Reaching the most vulnerable localities in Lebanon*, October 2013, UNICEF, UNHCR, Republic of Lebanon Presidency of the Council of Ministers.

22 Stabilisation priorities that have been included in this appeal include inter alia: strengthening public health systems and surveillance; rehabilitation of schools; strengthening national education systems; support to the National Poverty Targeting Program; enhancing the capacity of Social Development Centres; Host Community program; fostering peace-building mechanisms to mitigate tensions in areas hosting refugees; Meeting urgent water and sanitation needs and support to municipal waste management.

D. Partnerships and coordination

Partners will deliver the objectives and outputs agreed under this plan under the coordination structure established for the implementation of previous appeals, bringing together the Government, the United Nations, international and national NGOs, as well as Syrian refugees, PRS and Lebanese host communities in the following eight sectors of response: Protection; Food Security Non-food items (NFI); Shelter; Water and Sanitation (WASH); Public Health; Education and Social Cohesion.

The GoL has the primary responsibility to protect persons on its territory and for the humanitarian response reflected in this appeal. While overall accountability rests with the Prime Minister, he will continue to be supported by the Inter-Ministerial Committee established for the humanitarian response that is coordinated by the Minister of Social Affairs. The Minister ensures that the implementation of the response is in line with Government policies and humanitarian principles.

MoSA is the overall government entity in charge of the coordination of the refugee response in Lebanon. UNHCR, as the mandated agency for refugee protection, will, with the support of the Humanitarian Country Team (HCT), assist the coordination efforts of the Government by co-leading with MoSA the inter-agency coordination structure. UNHCR and MoSA will lead partners in the sectors of Shelter and Protection, including the SGBV Task Force. UNHCR will lead the sector of Non-Food items. WFP and MoSA will lead in the Food sector. UNICEF will co-lead with UNHCR in Education, Child Protection and WASH. WHO will co-lead with UNHCR for Public Health. MoSA and UNDP will co-lead in the Social Cohesion sector. UNRWA, as the mandated agency to assist Palestine refugees, will oversee and coordinate the implementation of projects relating to PRS across all sectors. IOM will lead the response for Lebanese returnees. In the regions, the GoL has deployed regional coordinators to support the coordination efforts.

51 national and international NGOs will participate in the response, bringing technical expertise and local experience in a broad range of areas. The Lebanon Humanitarian International NGO Forum (LHIF) will ensure consolidated representation of key international NGO partners at the highest level, while the overall coordination structure will seek to increase the participation of local and other international NGOs.

UNHCR will pursue improvements to coordination arrangements in partnership with other agencies in line with the findings of the Real-Time Evaluation conducted in July 2013²³. Dedicated coordination staff will continue to lead sector working groups. Inter-sectoral and inter-agency meetings, including with the donor community, will ensure a broader involvement of all stakeholders, in particular the non-governmental partners. In 2014, the coordination will be strengthened in decentralized locations by reinforcing the capacities of field sectoral working groups to lead in the implementation and monitoring of this response plan. This will also increase the engagement of local organizations and affected populations. NGOs have been encouraged to join as leads in coordinated efforts including co-leadership of field sectoral working groups. Capacities of coordination staff will be strengthened, in particular to ensure that partners receive timely and relevant information to inform their response, and to nurture the cooperation with national and international NGOs.

23 From slow boil to breaking point: A real-time evaluation of UNHCR's response to the Syrian refugee emergency, UNHCR Policy Development and Evaluation Service, July 2013

E. Protection response

Lead Agencies	UNHCR and MOSA		
Participating Agencies	MOSA ABAAD, ACH, AJEM, AMEL, Arc En Ciel, AVSI, Beyond, Caritas Lebanon, Migrant Centre (CMLC), Danish Refugee Council (DRC), Fundacion Promocion Social de la Cultura(FPSC), Handicap International (HI), Heartland Alliance, International Rescue Committee (IRC), Internews, Intersos, IOM,IRAP, IRD, KAFA, MADA, Makhzoumi Foundation, Medical Aid for Palestinians (MAP), Mercy Corps, Norwegian Refugee Council (NRC), Oxfam, Rassemblement Democratique des Femmes du Liban (RDFL), Refugee Education Trust (RET), Relief International, RESTART, Save the Children, SAWA, Seraphin Global, SHEILD, Terre Des Hommes Italy, Terre Des Hommes Lausanne, War Child Holland (WCH), World Rehabilitation Fund (WRF), World Vision International (WVI). UNFPA, UNHCR, UNICEF, UNRWA		
Objectives	<ol style="list-style-type: none"> 1. Refugees fleeing Syria are able to access the territory and their rights are respected. 2. Community empowerment and outreach are strengthened and assistance is provided to persons with specific needs. 3. Prevention of and response to sexual and gender-based violence (SGBV). 4. Protection of children from neglect, abuse and violence. 5. Durable and humanitarian solutions are made available to refugees from Syria. 		
Requirements from January to June 2014	US\$93,170,002		
Prioritized requirements (January-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$44,199,400	US\$43,207,352	US\$5,763,250
Total 2014 indicative financial requirements	US\$184,596,468		
Contact Information	Claudio J. Delfabro, Delfabro@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

By end September 2013, some 775,000²⁴ Syrian refugees had registered with UNHCR or were scheduled for registration. The majority of Syrian refugees were able to enter Lebanon for humanitarian reasons. UNHCR established a regular observation presence at land borders, and mobile registration teams – to the extent possible – reached refugees in remote locations, in order to enhance access to assistance and ensure freedom of movement.

47,700 Palestine refugees from Syria (PRS) have been confirmed as living in Lebanon and have been recorded by UNRWA. Since August 2013, UNRWA has intervened at the border and advocated for humanitarian cases of PRS to enter Lebanon. 557 PRS have been supported with legal counselling, assistance and representation.

²⁴ 773,281, - a number equivalent to over 75 % of the total projected population by the end of 2013.

Some 12% of registered refugees – and potentially more among unregistered refugees – entered Lebanon through unofficial border crossings. These refugees are not considered to be legally present by the authorities, placing them at risk of arrest and detention. They also face severe limitations on freedom of movement, limited access to livelihoods/employment, risks of labour exploitation and problematic access to essential services. In addition, refugees who entered officially risk being considered as irregular if they fail to renew before their 6-month residency coupon expires.

The numbers of refugees arrested for illegal entry remain low. Partners are aware of some 105 cases since the beginning of 2013. From 1 January to 30 September, 443 detention visits were undertaken to ensure that refugee rights are respected and almost 2,000 Syrians were supported with legal counselling, assistance and representation.

Refugees are dispersed in over 1,500 locations across Lebanon, and the shortage of adequate shelter options has led large numbers of refugees to settle on private or public empty land. This can place them at heightened risk of eviction and related protection incidents. From August to October, over 1,250 families reported having been affected by threat of eviction or actual eviction.

Women and children continued to make up some 78% of the registered refugee population. They are disproportionately affected by sexual and gender-based violence (SGBV), and survivors are reticent to seek assistance due to the social stigma and threats to personal security in case of disclosure. Mobility of women and girls is often restricted, and vulnerable women and girls remain the most difficult to reach.

30,350 dignity kits were distributed to Syrian women and girls, strengthening confidence in community outreach. Over 300 social workers were trained on SGBV programming in emergencies. The GBV Information Management System (GBVIMS) was rolled-out to foster ethical inter-agency data sharing and analysis. Coordination at sub-national level was strengthened through the development of local level referral pathways, training and support to health, SGBV, protection and child protection partners and Lebanese Women's organisations. However, many gaps remain as national capacities are limited and survivors do not always have access to support. In particular, there is a need for more safe spaces, mobile services and specialised SGBV partners to make services more accessible. Violence perpetrated against men and boys also needs to be better documented and addressed.

Partners delivered protection services and psycho-social support to over 200,000 boys and girls children, as well as over 40,000 parents and other caregivers. Mechanisms for identification and referral of children at risk/survivors of protection violations have been strengthened through training of key child protection actors, improved tools and strengthening of coordination at sub-national level. Family tracing for unaccompanied and separated children continues to be supported by ICRC and child protection partners. Mine risk education was also provided in targeted locations with high risk of UXOs and other remnants of war.

Partners facilitated access to birth registration through continued advocacy and awareness-raising and successfully reduced procedural barriers in registering the birth of refugee children with civil authorities. Refugees were informed of steps to register births through mass information, legal assistance and counselling.

Other groups of persons in need of specialized services included persons with disabilities, older persons and persons with serious medical conditions. Additional refugee outreach volunteers were identified to respond to community concerns. 22,500 individuals participated in community empowerment activities and 31 community centres were supported by humanitarian partners, providing services to vulnerable Lebanese and refugees alike.

Accurate, updated and timely mass information campaigns, formalized refugee committees and more targeted programming for adolescents, older persons and persons with disabilities remain limited due to a lack of technical capacities and the fact that these community-based activities are resource, time and labour-intensive. The lack of sufficient experienced protection partners in field locations continued to curtail implementation of priority interventions.

UNHCR has worked closely with States to facilitate resettlement or humanitarian admission to third countries as part of the broader protection response to refugees in the region. In a significant number of cases, individualized refugee status determination and solutions analysis is necessary, requiring significant case-management capacity.

Out of a target of 500 Syrians for regular resettlement and 5,000 for the humanitarian admission programme (HAP) for Lebanon, 127 and 1,180 individuals respectively have been submitted to resettlement/humanitarian admission countries for consideration.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	1,500,000	1,500,000
Palestine Refugees from Syria	100,000	100,000
Affected Lebanese	50,000	50,000
Lebanese Returnees	1,500,000	100,000

Overall, Syrian refugees and other persons that have been displaced from Syria have become more vulnerable over the course of 2013. A recent assessment by WFP, UNHCR and UNICEF indicated that some 72% of Syrian refugees are in need of international support. With the crisis in Syria in its third year, many refugees have depleted their savings putting them at increased risk of destitution or negative coping strategies, including begging, exploitative labour and survival sex.

The situation of PRS is equally precarious. Over 50 % of PRS reside in the 12 Palestine refugee camps in Lebanon with restricted access to employment and services. They are dependent on assistance by UNRWA to meet basic needs.

Given projections of up to 550,000 arrivals of refugees and PRS in 2014, continuous advocacy with the Government for open borders and access to the territory will be key priorities. Capacity to handle movements from Syria efficiently and in line with international principles needs reinforcement.

Timely registration or recording of refugees and other displaced groups will continue to be critical, especially for persons in remote locations and with limited mobility. This will require maintained registration capacity, as well as strengthened mobile registration and provision of transport to reach registration centres. There is also a need to verify the situation of refugees registered in previous years to inform programming and update information on vulnerabilities.

Given the scale and high levels of dispersal of the refugee population in some 1,500 locations across Lebanon, protection monitoring, protection interventions and up-scaled outreach will be needed at both the individual and community level to ensure that protection responses and services reach those most in need.

Lebanese communities have extended extraordinary generosity hosting the continued influx of civilians fleeing Syria. Tensions are, however, rising and low-income families have borne the brunt of over-stretched public services. Increased competition for low-skilled labour has pushed down salaries against rising costs of living contributing to heightened levels of vulnerability in the Lebanese community and reduced scope for self-reliance for refugees and PRS. The concerns of vulnerable Lebanese will also need to be addressed in the delivery of protection services, by ensuring, amongst others, that community centres are open to all and that the capacities of local frontline workers are strengthened.

Prevention of and response to SGBV will continue to be a priority of humanitarian partners. Risks for women and girls are exacerbated by overcrowding and lack of privacy in shared living spaces, community tensions, as well as by the limited opportunities of many households to meet high costs of living in Lebanon. Some families have resorted to negative coping mechanisms including survival sex and early marriage. Local capacities to address SGBV are limited, and in many locations medical services for survivors are inadequate or lacking. Reaching survivors and those at risk in remote and dispersed locations requires scale-up of community outreach.

A needs assessment conducted in February 2013 by the Child Protection in Emergencies Working Group in Lebanon highlighted the challenges facing children in Lebanon, including separation from families, child labour, exposure to physical and psychological violence including sexual violence and exploitation, and limited access to child protection services.

Although the Government made significant steps in reducing procedural barriers to birth registration in 2013, challenges remain putting refugee children at heightened risk of statelessness. Many parents face difficulties obtaining birth certificates for newborns as they do not have documents proving

identity, marriage and legal stay. Refugee parents are not always aware of the consequences of not registering newborns at birth, necessitating up-scaled awareness raising activities and individual counselling.

With the number of refugees, PRS and Lebanese returnees projected to reach 1,650,000 by end 2014, mass information will need to be significantly increased to ensure that refugees are aware of available services and assistance. The wide dispersal of the population, and the complex range of protection challenges they face has challenged partners in identifying and responding to critical protection risks. Further advocacy is required to encourage national and international protection partners to engage in the humanitarian response.

3. RESPONSE STRATEGY

Humanitarian partners will respond to protection risks and the specific needs of Syrian refugees, Palestine refugees from Syria (PRS), Lebanese returnees, as well as host communities:

- specialized assistance to the most vulnerable;
- community-based interventions; and
- community outreach, including mass information, counseling and legal assistance services.

UNHCR will work with the Government to support border processing and strengthen the capacity of the General Security Office (GSO) in managing movements to and from Syria, including through continued presence and protection interventions at border points.

Registration capacity will be further enhanced to minimize backlogs and enable expedient access to protection and assistance for refugees. UNHCR will introduce biometrics technology at its registration centres to further strengthen the integrity of the registration process. A verification exercise will also be undertaken to update information on registered refugees. The information gathered will be important in identifying individuals with specific needs and/or protection-related issues. It will also provide a solid basis for future programming for partners. UNHCR will implement verification progressively in line with the renewal of refugee documents²⁵.

Protection monitoring will be scaled up across Lebanon to improve identification, analysis and response to protection risks. This will be done through on-going community level monitoring, information dissemination in all areas where refugees are living, as well as through outreach and assistance for new arrivals and refugees with specific in hosting communities. Legal counselling and representation will be provided to refugees in detention, as well as on other issues related to civil documentation, housing, land and property (HLP), as well as cases of undocumented refugees and those at risk of statelessness.

²⁵ UNHCR will cover some 66% of registered refugees whose documents will expire prior to 30 June 2014.

Partners will continue to work together to prevent and respond to SGBV including through the scale-up of 'safe spaces' for women and girls, building of peer networks, strengthening of community-based initiatives, and engagement with men and boys. Timely referrals of survivors to life-saving services, as well as psycho-social and legal support will be improved through the capacity-strengthening of frontline workers in collaboration with the Ministry of Social Affairs, as well as the security and justice sectors.

In line with the child protection strategy, partners will prioritize interventions aimed at children at high risk of abuse and violence who require immediate assistance, including victims of violence; children suffering from psychological distress; children engaged in the worst form of child labour; street children; children formerly associated with armed groups and children without documentation, including birth registration. Interventions will mitigate and address the impact of the crisis on children through community based psychosocial support that restores a sense of normalcy and builds the resilience of children and their caregivers.

The Child Protection sector will prioritize interventions aimed at children at high risk of abuse and violence who require immediate assistance and access to specialised services, including unaccompanied and separated children; children suffering from psychological distress; children engaged in the worst form of child labour; children formerly associated with armed groups, child survivors of GBV, children with disabilities or injured by explosive weapons and remnants of war, and children without documentation, including birth registration. Through case management children at high risk will be identified, documented, supported, appropriate family reunification facilitated and where necessary placed in suitable family based care. Interventions will also mitigate and address the impact of the crisis on children through community based psychosocial support aimed at building the resilience of children and their caregivers. Another key component of the strategy will focus on systems strengthening, whereby existing child protection mechanisms and institutions such as social development centres (SDCs), but also schools, health centers, police services will be mobilized, their capacities to deliver, regulate, supervise and coordinate child protection prevention and response strengthened and improved as a result of the emergency response. Ensuring minimum quality standards during the provision of these services is essential and so partners will support their development and use throughout these interventions. The strategy also includes mainstreaming protection and psychosocial support in other sectors.

Partners will continue efforts to remove procedural barriers to birth registration, including through capacity development of the Ministry of Interior and municipalities, awareness-raising, legal counseling and mass information.

Partners will also work to deepen the engagement of the refugee and local communities in the response. Sustainable and cost-effective networks and services that empower refugee and hosting communities in the medium and longer term will be prioritized. This will include expanding the number of refugee outreach volunteers and refugees with specialized skills to 1 per 1,000 persons. The number of community centres will also be increased to 1 for 5,000-10,000 persons expanding the availability of community-based activities. Partners will increase efforts to target adolescents, LGBTI, older persons and persons with disabilities within existing activities.

Mass information interventions will be scaled up to ensure that both refugees and host communities are aware of services, changes in assistance, national campaigns and other key announcements that affect them. Partners will establish a multi-media humanitarian information service (print, audio, SMS, video and photos) providing information online, and via mobile and SMS channels to maximize scope for effective communication to different segments of the affected populations.

Partners will complement community-based interventions with individual support to extremely vulnerable persons with immediate or specific needs²⁶. Partners will provide one-off or monthly cash assistance to the most vulnerable, reducing the exposure of persons at high risk with limited means for self-reliance to destitution or negative coping mechanisms. Some 33,500 persons will be targeted in 2014 with home visits, outreach and monitoring. Partners will assess the socio-economic conditions and vulnerability of refugees at the household or individual level to better target their protection and assistance interventions.

Refugees whose vulnerabilities place them at risk in their host countries will be prioritized for resettlement/humanitarian admission programs and include women and girls at risk, survivors of violence and/or torture, older refugees at risk, refugees with physical protection needs, refugees with medical needs or disabilities, children and adolescents at risk, LGBTI persons, and refugees in need of family reunification. Significant additional resources will be required to carry out Refugee Status Determination (RSD) and resettlement. The joint resettlement/humanitarian admission planning figure for 2014 is 5,000 individuals for submission to interested resettlement countries.

²⁶ Persons with specific needs include but are not limited to persons with disabilities, single headed households, older persons at risk, unaccompanied and separated children, other children at risk, survivors of torture and SGBV, persons with serious medical conditions.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Refugees fleeing Syria are able to access the territory and their rights are respected.										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Access to territory is improved and risk of refoulement reduced	850.000	33.000			National	4.449.012	710.313	284.872	3.453.827	CLMC, IRD, Oxfam, UNHCR, UNRWA
Access to territory is improved and risk of refoulement reduced	560.000		39.000	5.600	National	2.800.000	2.800.000			MOSA
Output 1.2 Protection violations against refugees are prevented, monitored and addressed	310.000	79.000	41.000	12.000	National	5.242.287	341.306	4.900.981		AJEM, AMEL, Caritas, IRC, IRD, Mercy Corps, NRC, Oxfam, UNHCR, UNRWA
Output 1.3 Access to timely registration and adequate reception conditions improved	655.000	79.000		50.000	National	3.899.424	2.894.920	1.004.504		Oxfam, SHEILD, UNHCR, UNRWA, IOM
Output 1.4 Access to legal assistance and civil status documentation enhanced	322.000	79.000	43.000	12.000	National	3.150.858	886.498	1.948.323	316.036	CLMC, IRC, IRD, NRC, Oxfam, UNHCR, UNRWA
Objective 1						16.741.581	4.833.038	8.138.679	3.769.864	
GoL						2.800.000	2.800.000			

Objective 2. Community empowerment and outreach are strengthened and assistance is provided to persons with specific needs.										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Community empowered and benefiting from community-based services	80.000	80.000	30.000	12.000	National	10.117.459		10.117.459		UNHCR (Amel, Restart, SHIELD Internews, DRC), DRC, Intersos, IOM, Makhzoumi Foundation, Oxfam, UNRWA
Community empowered and benefiting from community-based services	72.000	9.000	90.000	9.000	National	2.100.000			2.100.000	MOSA
Output 2.2 Community self-management is strengthened and expanded	400.000	200.000	15.000	7.000	National	2.580.832		2.135.832	445.000	UNHCR (IRC, SHIELD, Internews), Intersos, IOM, UNRWA, WVI, WRF
Output 2.3 Persons with specific needs receive support and services	43.500	1.000	2.500	2.500	National	25.087.980	20.155.720	4.132.260	800.000	UNHCR (Restart, SHEILD, Arcenciel, Lebanese Physically Handicapped Union), CLMC, DRC, HI, WRF
Persons with specific needs receive support and services	1.290	90	1.500	90	National	11.625.600		11.625.600		MOSA
Objective 2						37.786.271	20.155.720	16.385.551	1.245.000	
GoL						13.725.600		11.625.600	2.100.000	

Objective 3. Prevention and response to Sexual and Gender-Based Violence (SGBV).										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 3.1 Refugees and Lebanese women and girls have an increased access to safe spaces	35.000	5.000	15.000		National	7.534.055	4.665.380	2.868.675		UNICEF (Heartland Alliance, IRC, ABAAD, Medical Aid for Palestinians), UNFPA (MOSA and partners), UNHCR (Interos, CMLC, Makhzoumi Foundation, Amel, DRC, IRD, RDFL), RET, IRC
Output 3.2 All survivors of SGBV and women at risk access immediate, safe and multi-sectoral services (psycho-social, health, justice and security) through ethical referrals and quality case management	3.500	500	1.000		National	3.225.152	1.988.471	1.190.412	46.270	UNICEF (IRC, ABAAD, Arcenciel, Interos, TdH Lausanne, DRC, Heartland Alliance, Medical Aid for Palestinians), UNFPA (and partners), UNHCR (Interos, CMLC, Makhzoumi Foundation, DRC, ABAAD,), RET, IRAP, CMLC

All survivors of SGBV and women at risk access immediate, safe and multi-sectoral services (psycho-social, health, justice and security) through ethical referrals and quality case management					National	5.160.400	5.110.000	50.400		MOSA
Output 3.3 Negative coping mechanisms and risks to SGBV are mitigated through community-based initiatives and increased capacity of frontline workers	20.000	2.000	5.000	500	National	1.572.346	324.899	1.036.204	211.243	UNICEF (IRC, Heartland Alliance, ABAAD, MAP, RI, Intersos, DRC, SCI, Mercy Corps, Terre des Hommes Lausanne, Arcenciel, KAFA,), UNFPA (KAFA and partners), UNHCR (Intersos, KAFA, CLMC, Makhzoumi Foundation), Refugee Education Trust -RET, IRAP, IRC
Objective 3						12.331.553	6.978.749	5.095.291	257.513	
GoL						5.160.400	5.110.000	50.400		

Objective 4. Child Protection response.										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 4.1 Vulnerabilities of children and care givers reduced and their resilience strengthened	170.000	5.000	60.000	1.200	National	9.633.852		9.573.852	60.000	DRC, SCI MC, IRC, TdH I, TdH L, WCH, Amel, Sawa, Avsi, Beyond, ACH, Arcenciel, Intersos, Seraphim Global, WVI, IRD, UNICEF, UNHCR
Vulnerabilities of children and care givers reduced and their resilience strengthened	23.000	2.600	28.000	2.600	National	1.350.000		1.350.000		MOSA
Output 4.2 Child Protection Violations are mitigated and addressed	120.000	4.600	45.000	1.400	National	12.330.943	11.562.291	768.652		DRC, SCI MC, IRC, TdH I, TdH L, WCH, Amel, Sawa, Avsi, Beyond, ACH, IRD, Arcenciel, Intersoc, UNICEF, UNHCR, IRD, UNICEF, UNHCR
Child Protection Violations are mitigated and addressed	700	90	875	80	National	9.100.000	7.700.000	1.400.000		MOSA

Output 4.3 Mainstreaming of child protection and capacity building of child protection actors/ sectors	10.000	350	7.000		National	997.785		566.912	430.873	SC, Seraphim Global, WVI, UNHCR, UNICEF
Objective 4						22.962.580	11.562.291	10.909.416	490.873	
GoL						10.450.000	7.700.000	2.750.000		

Objective 5. Durable and humanitarian solutions are made available to refugees from Syria.										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 5.1 Most vulnerable persons are identified through fair and transparent processes	7.500				National					CLMC, IRD, Oxfam, UNHCR
Output 5.2 Individuals have their status determined	3.500				National	1.017.624	203.524	814.100		AJEM, AMEL, Caritas, IRC, IRD, Mercy Corps, NRC, Oxfam, UNHCR
Output 5.3 Refugees benefit from resettlement and humanitarian admission	2.500				National	2.330.392	466.078	1.864.314		Oxfam, SHEILD, UNHCR
Objective 5						3.348.016	669.602	2.678.414		

Sector indicators	Target
# of persons monitored	850.000
# of protection concerns or violations reported and/or addressed	188.000
# of Syrian refugees registered / # of PRS recorded	716.650
# of persons provided with information, legal counselling or representation	107.700
% of SGBV survivors reporting violence who are assisted	100%
#of frontline workers trained on SGBV prevention and response	500
# of children (girls/boys) benefitting from psychosocial support according to minimum standards	300.000
# of children (boys and girls) at risk of being harmed and survivors of violence who have been individually assisted according to minimum standards	2.500
# of persons submitted for resettlement or humanitarian admission	2.500
# persons benefiting from empowerment activities- linked to community centers and other community-based activities	220.800
Extent of households reached through vulnerability assessments	50%

Protection - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
Humanitarian agencies	93.170.002	44.199.400	43.207.352	5.763.250	91.426.466
Government of Lebanon (GoL)	32.136.000	15.610.000	14.426.000	2.100.000	13.419.000

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Protection in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
CLMC	2,875,840	1,437,920	1,437,920
DRC	2,750,000	1,375,000	1,375,000
FPSC	1,400,000	800,000	600,000
HI	2,800,000	1,400,000	1,400,000
IOM	2,678,750	1,525,125	1,153,625
IRAP	167,000	68,500	98,500
IRC	3,294,750	1,555,000	1,739,750
IRD	885,444	427,444	458,000
MAKHZOUMI	267,000	133,500	133,500
MC	2,560,000	1,280,000	1,280,000
NRC	4,275,062	2,213,902	2,061,160
OXFAM	501,000	250,500	250,500
RET	410,000	215,000	195,000
S GLOBAL	763,000	429,500	333,500
SCI	5,373,460	3,224,076	2,149,384
UNFPA	3,650,000	1,530,000	2,120,000
UNHCR	105,817,470	53,032,617	52,784,853
UNICEF	35,486,000	18,261,517	17,224,483
UNRWA	1,776,192	890,601	885,591
WRF	3,041,300	1,207,700	1,833,600
WVI	3,824,200	1,912,100	1,912,100
Total	184,596,468	93,170,002	91,426,466
GoL	45,555,000	32,136,000	13,419,000

F. Food Security response

Lead Agency	World Food Programme		
Participating Agencies	HRC, MoSA, ACF, ACTED, DRC, FAO, GVC, Handicap International, International, InterSOS, International Rescue Committee, IOCC, Islamic Relief, Mercy-USA, OXFAM, PU-AMI, Save the Children, Solidarites International, SHEILD, UNRWA, World Vision		
Objectives	<ol style="list-style-type: none"> 1. Adequate food consumption for targeted affected population. 2. Agricultural livelihoods of Lebanese returnees and rural affected communities restored. 		
Requirements from January to June 2014	US\$239,635,116		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$211,073,148	US\$26,678,218	US\$1,883,750
Total 2014 indicative financial requirements	US\$550,332,352		
Contact Information	Ekram El-Huni, Ekram.elhuni@wfp.org		

1. ACHIEVEMENTS AND CHALLENGES

As of September 2013, more than 163,000 vulnerable individuals received food parcels; 1,105,000 individual food vouchers were distributed²⁷; 21,000 individuals received a weekly bag of bread; 57,800 PRS have received cash for food and close to 5,500 host community members received agricultural support.²⁸ Humanitarian aid increased food security, supporting vulnerable families struggling to provide food for their families and guarding against resort to negative coping mechanisms.

Thus far, WFP's food voucher programme and UNRWA's cash for food programme have injected over some US\$89 million into the Lebanese economy, particularly in some of the poorest areas of Lebanon where large concentrations of refugees are hosted. Food parcels are solely sourced locally, worth more than US\$130,000.

In addition to assisting registered Syrian refugees and Palestine refugees from Syria, the Food Security Sector Working Group has been providing food assistance to unregistered refugees (mostly afraid or unwilling to register) and new comers.

The number of refugees and other affected populations requiring food assistance has grown throughout 2013. To date, host communities and Lebanese returnees have received limited support,

²⁷ This figure includes people who have received a food voucher every month and those that have received vouchers for shorter periods in a variety of different projects

²⁸ Inter-agency Food Security Sector September Dashboard-<http://data.unhcr.org/syrianrefugees/admin/download.php?id=3184>

despite increasing levels of poverty linked to the Syrian crisis that are resulting in intercommunity tensions. Further, security constraints have obstructed access to beneficiaries, especially in Tripoli, Wadi-Khaled and the northern part of the Bekaa Valley.

By end August 2013, all Lebanese returnee dairy farmers in Akkar and North Baalbeck were supported to resume their dairy activities and incorporated into a programme for support with dairy equipment and material. Some 340 dairy farmers in communities in North Lebanon hosting large numbers of refugees received milking equipment and material (for storage, tanks, home processing, handling, transportation and hygiene) increasing local livelihood prospects and mitigating tensions. Technical follow-up and training was provided to farmers in partnership with the Ministry of Agriculture, focusing on women-headed households, to ensure the sustainability of activities. Special assistance was provided to newly established Dairy Cooperatives and Milk Collection Centres, allowing smallholder farmers the benefits of large-scale farming.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	1,500,000	1,125,000
Palestine Refugees from Syria	100,074	85,063
Vulnerable Lebanese	1,500,000	446,894
Lebanese Returnees	50,000	37,500

In May and June 2013, WFP, UNHCR and UNICEF conducted a vulnerability assessment of Syrian refugees (VASyR) in Lebanon to inform targeting of programming to the most vulnerable. Results indicate that 70% of Syrian refugees are food insecure. Nearly 45% of refugees relied on negative coping strategies to cover food needs (for example, 49% of adults restricted their food consumption so children in the household could eat). 61% of households borrowed regularly to cover meet the costs of food. The study also indicated that food insecurity decreases with length of stay in-country and access to food assistance.

Assessment results also showed that half of a household's expenditure was spent on food: on average, US\$52 was spent per capita each month. Households rely heavily on assistance, particularly WFP's food voucher, which is valued at US\$27 and covers over 50% of average food expenditure. Without continued assistance in 2014, vulnerable households will face increased risks of food insecurity, and greater numbers may resort to harmful strategies to meet basic household needs.

WFP and UNRWA are currently undertaking a joint needs assessment of PRS which will be used as a basis for the targeting of assistance for the PRS population. Ongoing joint needs assessments of Lebanese returnees expected to show similar levels of vulnerability to the Syrian refugees.

Poverty levels among Lebanese communities are expected to increase in 2014, with a recent World Bank/ UN survey indicating that some 170,000 Lebanese may be pushed into poverty in the coming months. The majority of refugees are now located in regions with high poverty rates and Palestine camps, deepening the vulnerability of the Lebanese communities in these areas. A FAO rapid assessment of the impact of the Syrian crisis on food security and agricultural livelihoods in neighbouring countries²⁹ indicates that the deterioration of bilateral trade between Syria and Lebanon and reduced trade through Syria to other markets has made it difficult for Lebanese farmers and workers in the agricultural/food sectors, to sustain a living. To address increasing poverty and risks to social cohesion linked to the Syrian crisis, more robust support to national food programmes and agricultural activity will be required.

Syrian veterinary services and animal vaccination programmes have collapsed over the past year causing significant risks of spread in animal diseases to the agriculture sector in the region and a threat to public health³⁰.

3. RESPONSE STRATEGY

Food partners will continue to upscale food assistance operations to meet the needs of vulnerable segments of projected refugee and other affected populations in 2014. In response to the rapid acceleration of new arrivals in 2013, the size of the WFP operation is 20 times larger than at the beginning of the operation in July 2012, and almost 5 times the size of its operation at the beginning of 2013. WFP will provide monthly assistance to 75% of registered refugees and Lebanese returnees in 2014 to maintain adequate food consumption and protect against resort to negative coping mechanisms. WFP and partners will explore means of fine-tuning targeting to ensure that all those in need of assistance continue to receive support. This will primarily be done through intensified monitoring and verification efforts.

WFP and other organizations will continue to provide monthly food parcels to vulnerable Syrians who have just arrived or who are pending registration. In addition, various actors will assist other vulnerable groups at risk of food insecurity, such refugees afraid or unwilling to register. UNWRA and WFP will also collaborate to assist PRS through an unconditional cash assistance programme.

To respond to rising poverty levels in communities hosting refugees and mitigate tensions surrounding aid, WFP will collaborate with the Ministry of Social Affairs (MoSA) to supplement the targeted social assistance package under the National Poverty Targeting Program (NPTP).

29 Full report available at www.neareast.fao.org

30 Significant numbers of cases of Blue Tongue, bovine tuberculosis, brucellosis, cutaneous leishmaniasis, FMD, HPAI, LSD, PPR and rabies, have already been identified along the Syrian border in Iraq, Jordan, Lebanon and/or Turkey at higher than normal levels. For more information, see FAO's Agricultural Livelihoods and Food Security Impact Assessment and Response Plan for the Syria Crisis in the Neighbouring Countries of Egypt, *Iraq, Jordan, Lebanon and Turkey* available at: <http://neareast.fao.org/Pages/NewsDetails.aspx?ID=2405645&Cat=2&lang=EN&I=0&DId=0&CId=0&CMSId=5000914>

Assistance to low-income Lebanese will start in the second quarter of 2014, in line with Track 1 of the Roadmap of Priority Interventions for Stabilization³¹ recently presented by the Government of Lebanon with the support of the World Bank and UN.

WFP, through its programmes in Lebanon, will continue to contribute directly and significantly to the local economy by injecting millions of dollars into some of the poorest areas of Lebanon. WFP has selected a national bank to carry-out the e-card programme thus benefiting from a substantial increase in its revenues in 2014.

FAO will also continue working with host communities to ensure that agricultural livelihoods of Lebanese returnees and rural affected communities are restored.

31 *Lebanon Roadmap of Priority Interventions for Stabilization from the Syrian Conflict*, 12 October 2013

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Adequate food consumption for targeted affected population										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Food assistance distributed in sufficient quantity and quality to target groups under secure conditions to maintain adequate food consumption and dietary diversity	1.083.000	72.500	268.600	32.000	National	236.738.616	211.073.148	25.665.468		WFP, UNWRA, IOCC, SCI, IRC, OXFAM, Mercy USA, DRC, PU-AMI, ACF, WVI, SHEILD, HI, Solidarites International, IRW, GVC, Intersos, HRC, MOSA
Objective 1						25.665.468		25.665.468		

Objective 2. Agricultural livelihoods of Lebanese returnees and rural affected communities restored										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Spread of trans-boundary animal and plant diseases and pests contained, and food safety control established	3.750	-	63.750	7.500	National	1.000.000		1.000.000		FAO
Output 2.2 Smallholder agricultural production restored	1.600	-	12.650	3.000	National	1.896.500		12.750	1.883.750	FAO, Mercy USA
Objective 2						2.896.500		1.012.750	1.883.750	

Sector indicators	Target
% of planned distribution to which benefit women, men, boys and girls	75% of the caseload
Total cash equivalent of e-card t/vouchers transfers or food distributed and redeemed	550.240.947
Dietary diversity and food consumption scores remain at acceptable levels for the majority of the target populations.	Food consumption score>35.5
# of animals vaccinated	400.000
# of affected farming households that will have improved food nutrition and food safety	18.000

Food security - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
SECTOR GRAND TOTAL	239.635.116	211.073.148	26.678.218	1.883.750	310.697.236

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Food security in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	996,000	498,000	498,000
CLMC	1,624,260	812,130	812,130
FAO	5,767,500	2,883,750	2,883,750
IOCC	1,692,000	846,000	846,000
IRC	3,720,000	1,920,000	1,800,000
MU	1,487,610	635,370	852,240
OXFAM	2,034,000	1,040,000	994,000
SCI	4,742,400	2,371,200	2,371,200
UNRWA	26,512,205	11,491,998	15,020,207
WFP	501,756,377	217,136,668	284,619,709
Total	550,332,352	239,635,116	310,697,236

G. Education response

Lead Agencies	UNHCR and UNICEF		
Participating Agencies	MEHE, MOSA, AVSI, British Council, FPSC, HWA, INTERSOS, IOCC, NRC, Relief International, RET, Save the Children, UNESCO, UNRWA, WCH, WVI		
Objectives	<p>3. Ensure that the right to education for all children (girls and boys) is fulfilled in a protective learning environment.</p> <p>4. Systems strengthened to deliver quality education to respond to the escalating Syrian crisis in a protective learning environment.</p>		
Requirements from January to June 2014	US\$91,445,351		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$74,029,718	US\$13,431,507	US\$3,909,126
	US\$182,815,702		
Contact Information	Kerstin Karlstrom, karlstro@unhcr.org Nathalie Hamoudi, nhamoudi@unicef.org		

1. ACHIEVEMENTS AND CHALLENGES

Concerted action by the Ministry for Education and Higher Education (MEHE) with humanitarian partners enabled some 30,000 Syrian children to enrol in the Lebanese public school system for the school year 2012/2013. Some 7,000 Palestine refugee children from Syria enrolled in schools managed by UNRWA in the 2013/2014 school year. A further 45,000 vulnerable children (Syrian, Lebanese returnees and vulnerable Lebanese populations) accessed non-formal education.

Despite these efforts, the continuing influx from Syria has overwhelmed the capacity of public school system to respond. As the 2013/2014 school year begins, there are approximately 280,000 Syrian 3-18 year old refugee children registered with UNHCR in Lebanon, and 20,000 Palestine children from Syria. Based on current projections, some 693,000 children (Syrians, Lebanese Returnees and Palestine children from Syria) will be in need of schooling by the end of 2014.

The Lebanese public school system currently caters for 300,000 children. MEHE has indicated that only an additional 90,000³² children can be accommodated in the public school system in 2013/2014 with capacity support from the international community. However, some 500,000 Syrian children will need to access education outside the formal public system, or face limited future prospects and increased exposure to protection risks.

The strain on the public school system has affected the quality of schooling for Lebanese children. Communities hosting the largest numbers of refugees are among the most vulnerable. In these locations the number of Lebanese children attending public schools is high. Most families do not have the means to send children to private schools in contrast to the norm in Lebanon where 70%

32 World Bank Assessment, 20 September 2013, "Lebanon – Economic and Social Impact Assessment of the Syrian Conflict"

of the children attend private schools. Prior to the Syrian crisis Lebanon had achieved considerable progress in moving towards the Education for All goals, including eradicating illiteracy. However, overcrowded classrooms and inadequate school facilities and supplies linked to displacement have led to deteriorations in the learning environment. Without up-scaled support to public schools, gaps in the equity and efficiency of the system risk widening significantly, with the most disadvantaged Lebanese citizens bearing a disproportionate burden.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	597,000	207,000
Palestine Refugees from Syria	35,000	25,000
Affected Lebanese	111,400	82,000
Lebanese returnees	33,000	17,000

In line with the inter-agency vulnerability assessment³³, the interventions in this appeal aim to provide learning opportunities to a targeted number of these children. The target population of some 331,000 will cover 43% of children identified as in need by the sector and 82% of the needs defined in the regional *No Lost Generation* strategy. The target has been agreed based on partner capacities to deliver quality programmes as well as the need to take availability of funds into consideration as the costs of formal education rise. Partners will identify children through community outreach activities, including refugee outreach volunteers, and will prioritize those living in informal settlements and other substandard temporary housing who have been out of school for an extended period of time. Partners will not be able to reach some 400,000 children, leaving a gap of almost 60% in the provision of education services.

Enrolment and school retention among Syrians are critically low. According to the Joint Education Needs assessment, 80% of refugee children do not attend school, while non-attendance among older children reaches above 90%. This contrasts with pre-conflict enrolment rates in Syria, which averaged over 95%.

The reasons why children and youth do not attend school vary. Common barriers include costs of transportation and tuition fees which can be excessive for refugee families with limited resources. Language barriers and safety concerns of Syrian parents contribute to a high drop-out rate among refugee children. More information is needed on specific barriers for girls. Activities currently target girls and boys equally however as the situation develops, anecdotal stories of girls being marginalized are arising. During 2014 greater efforts will be made to document and address gender disparities.

33 *Vulnerability Assessment for Syrian Refugees (VASyR)*, WFP, UNHCR, UNICEF

The destabilizing effects of the Syrian conflict also affect the education of Lebanese citizens. A recent World Bank assessment³⁴ estimates that an additional 170,000 Lebanese (70,000 children) will be pushed below the poverty line in 2014. These children will be at risk of dropping out of school as families struggle to cope with the financial situation. Continued support to help vulnerable families with the costs of education including under the National Poverty Targeting Programme is a key priority, and must be matched by increased efforts to support vulnerable children to integrate into the system.

The costs of integrating displaced children into the public system have increased significantly for 2014. Existing school capacity has been eclipsed by refugee numbers, resulting in a decision to create a second shift to cater for Syrian children. This requires significant investments in additional capacity. Whereas the humanitarian community previously covered a unit cost per child of US\$60, it is now necessary to pay US\$600 per child to cover running costs for the additional school shift.³⁵ Discussions on the modalities and costs of the second shift are ongoing, to enable more children to join the first shift and reduce the unit cost per child in the second shift, however it is anticipated that significantly increased international support will be needed to secure formal education for children.

Strengthening teacher and management capacity to manage growing class sizes and children facing trauma is a priority. The sector will work on a sustained package of measures to increase classroom capacity, expand the cadre of teaching staff and mitigate against the concerns of parents and communities on deteriorations in quality. Special consideration and support for children with specific needs is integrated into programme activities, including support through specific activities.

Providing children with formal education that will pass equivalency processes in other countries will remain the priority but given the overwhelming numbers of out of school children, partners will not be able to ensure formal education places for all children. Partners will deliver non-formal education interventions to ensure that out-of-school children access protective, safe environments where they are given an opportunity to learn and develop. These will range from structured programmes such as Accelerated learning to less structured community based literacy classes, and be organized to facilitate transition to more formal options in the future.

34 *Lebanon - Economic and social impact assessment of the Syrian conflict (ESIA)*, World Bank, 20 September 2013

35 According to the recent WB report the government cost of primary education averages US\$2,200 so the cost for second shifts is highly subsidized by the government.

3. RESPONSE STRATEGY

The response strategy seeks to ensure that every child's right to education is fulfilled. Current projections indicate that there will be 693,000 Syrian, Palestine children from Syria and Lebanese returnees between the ages of 3 and 18 in Lebanon by the end of 2014. An additional 630,000 Lebanese children in the same age-group will be affected by the increasing demand for education. Out of the 1,323,000 affected school aged children it is estimated that some 770,000 will be out of school by end 2014.

The sector will not target children based on age group. For the purpose of this appeal, the school-aged population is defined as the 3-18 years old based on every child's right to education and also responds to a demand among the Syrian and Lebanese populations to provide children with school readiness, protecting them from harm while also ensuring they do not fall behind in their education.

The Education strategy outlines two objectives:

- **The right to education is fulfilled for boys and girls in a protective learning environment** by responding to the immediate needs of children;
- **The education system is strengthened and quality standards are maintained**, including through linkages to stabilization initiatives;

The response will focus on:

- A) Enrolment in formal education** including community outreach for enrolment; support with tuition fees and the costs of transportation; improvement of school environments; winterization through fuel for schools; running second shifts and providing learning support to ensure school retention, including language instruction;
- B) Enrolment in non-formal education programmes** including through the introduction of a structured Accelerated Learning Program accredited by MEHE/CERD³⁶;
- C) Increased support to the quality of education** as well as measures to secure the well-being and healthy development of children through psycho-social support;
- D) Capacity building** of government officials and partners to strengthen national capacity to respond to the needs of Lebanese children and increasing numbers of refugees; and,
- E) Professional development** for teachers and educational personnel.

Palestine children arriving from Syria will be provided educational services through UNRWA managed schools.

In order to address increasing levels of poverty in communities hosting refugees as a result of the crisis, the Government's National Poverty Targeting Programme will be scaled up to ensure that eligible persons benefit from national assistance with education, in line with Track 1 of the Roadmap of Priority Interventions for Stabilization from the Syrian Conflict.

³⁶ The ALP curriculum for cycle one has been developed, cycle two is in process and cycle three is yet to be developed. A comprehensive package including training needs will be completed after the first year of piloting the program

Support with fees for children enrolling in formal schools is a strategic priority of the response but has not been included in RRP budgets due to on-going advocacy efforts to improve policies on inclusion of children in second shifts and reduce high unit costs. Detailed plans and requirements for formal education in 2014/2015 will be determined through the mid-year review process, to coincide with the new school year starting in October.

The sector is coordinated through the Education Working Group which is co-led between MEHE, UNHCR and UNICEF. A steering committee³⁷ provides direction on strategic ways forward and monitors progress towards sector targets. Partners coordinate closely with the Working Groups on Protection, Child Protection and SGBV, to ensure comprehensive follow-up to the needs of girls and boys.

37 Members – MEHE, UNHCR, UNICEF, UNRWA, UNESCO, WCH, SCI, British Council, WVI and NRC

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Ensure that the right to education for all children is fulfilled in a protective learning environment										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 School-aged children affected by the Syrian crisis have access to formal and nonformal education programs	182.000	50.000	82.000	17.000	National	53.860.051	47.312.741	6.547.310		UNHCR, UNICEF, UNRWA, UNESCO, SCI, HWA, RI, WCH, AVSI, TdH, NRC, Intersos, RET, FPSC, WVI
School-aged children affected by the Syrian crisis have access to formal and nonformal education programs			15.500		National	3.150.000		3.150.000		MOSA
Output 1.2 School-aged boys and girls are learning in a safe and protective environment	59.800	11.950	11.950	35.850	National	9.383.833	8.675.453	708.380		UNHCR, UNICEF, UNRWA, SCI, IOCC, HWA, RI, AVSI, TdH, NRC, Intersos
School-aged boys and girls are learning in a safe and protective environment					National					MEHE

Output 1.3 School/ learning space environment are improved and conducive to learning	63.301	12.660	12.660	37.981	National	12.982.980	9.018.609	3.964.371		UNHCR, UNICEF, UNRWA, SCI, HWA, TdH, Intersos, FPSC, WVI
School/learning space environment are improved and conducive to learning	31.250				National	16.337.500		16.337.500		MEHE
Output 1.4 Adolescents at risk have access to adequate learning opportunities and increased knowledge on life skills	18.475	3.695	3.695	11.085	National	9.900.001	8.322.915	1.372.086	205.000	UNHCR, UNICEF, UNESCO, SCI, WCH, NRC, RET, FPSC
Adolescents at risk have access to adequate learning opportunities and increased knowledge on life skills					National					MEHE
Objective 1						86.126.865	73.329.718	12.592.147	205.000	
GoL						19.487.500		19.487.500		

Objective 2. Systems strengthened to deliver quality education to respond to the escalating Syrian crisis in a protective learning environment										
Output	Targeted population by type (individuals)				Location(s)	Detailed requirements from January - June 2014				Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees		Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 Educational personnel and school teachers have increased knowledge and skills	51.150	10.250	30.700	10.250	National	3.388.411	650.000	737.260	2.001.151	UNHCR, UNICEF, UNRWA, UNESCO, SCI, IOCC, British Council, TdH, HWA, RI, AVSI, NRC
Educational personnel and school teachers have increased knowledge and skills	100.000				National	2.525.000	2.500.000	25.000		MEHE
Output 2.2 Institutional support is provided to MEHE departments and services	69.250	13.850	41.550	13.800	National	1.586.028			1.586.028	UNHCR, UNICEF, UNESCO, RI, NRC
Institutional support is provided to MEHE departments and services	100.000				National	625.000		625.000	0	MEHE
Output 2.3 Effective coordination and leadership is established	6.750	1.350	4.050	1.350	National	269.047	50.000	102.100	116.947	UNHCR, UNICEF, UNESCO, SCI

Effective coordination and leadership is established					National	100.000		100.000		MEHE
Objective 2						5.243.486	700.000	839.360	3.704.126	
GoL						3.250.000	2.500.000	750.000		

Sector indicators	Target
# of 6-15 year old children in basic education (girls and boys)	105.000
# of 3-18 year old children in non-formal learning opportunities (girls and boys)	225.000
# of children in psycho-social support (girls and boys)	94.700
# of schools rehabilitated including WASH facilities	1.200
# of teachers and education personnel who have strengthened their capacity through training sessions (men and women)	5.000

Education - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
Humanitarian agencies	91.370.351	74.029.718	13.431.507	3.909.126	91.445.351
Government of Lebanon	22.737.500	2.500.000	20.237.500		22.737.500

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Education in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
AVSI	174,000	87,000	87,000
BC	975,700	487,850	487,850
FPSC	645,000	322,500	322,500
HWA	485,000	242,500	242,500
INTERSOS	505,800	215,400	290,400
IOCC	5,416,000	2,708,000	2,708,000
NRC	2,845,000	1,422,500	1,422,500
RET	480,000	240,000	240,000
RI	2,168,568	1,084,284	1,084,284
SCI	5,350,000	2,675,000	2,675,000
UNESCO	6,054,000	3,027,000	3,027,000
UNHCR	53,728,494	26,864,247	26,864,247
UNICEF	87,852,274	43,926,137	43,926,137
UNRWA	12,241,813	6,120,907	6,120,906
WCH	2,801,803	1,400,901	1,400,902
WVI	1,092,250	546,125	546,125
Total	182,815,702	91,370,351	91,445,351
GoL	45,475,000	22,737,500	22,737,500

H. Health response

Lead Agencies	UNHCR, WHO, MoPH		
Participating Agencies	MoPH, MoSA AJEM, Amel Association, Armadilla SCS Onlus, Beyond, Caritas Lebanon Migrant Centre, Centre for Victims of Torture, Fundacion Promocion Social de la Cultura, Handicap International, Humedica, International Medical Corps, International Orthodox Christian Charities, International Organization for Migration, Makhzoumi Foundation, Medair, Medical Aid for Palestinians, Medecins du Monde, Première Urgence-Aide Médicale Internationale, Relief International, ReStart, Save the Children, Seraphim Global, Soins Infirmiers Development Communautaire, Young Man's Christian Association. UNHCR, UNFPA, UNICEF, WHO, UNRWA		
Objectives	5. Improve access, coverage, and quality of primary health care services 6. Improve access and quality of secondary and tertiary health care services 7. Strengthen national health care system		
Requirements from January to June 2014	US\$111,029,453		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$72,143,950	US\$25,685,750	US\$13,199,753
Total 2014 indicative financial requirements	US\$188,110,729		
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1. ACHIEVEMENTS AND CHALLENGES

The rapid increase in refugee population in the course of 2013 has put a significant strain on health services, and refugees have found themselves at increasing risk of deteriorating health status and distress. Poor shelter, lack of appropriate waste disposal, and poor hygiene are major contributing factors to health problems among refugees from Syria. The serious humanitarian situation in Syria coupled with poor living conditions of refugees in Lebanon has heightened risks of disease outbreaks, including measles and polio, and the introduction of new diseases to the host community.

Although Lebanon has a wide network of health care, affordability is increasingly becoming the main barrier to health for affected populations. Health services in Lebanon are largely privatized and based on user fees. Refugees are expected to cover the costs of treatment, which can reach significantly above their means. Humanitarian actors continued to assist refugees with treatment costs and supported the fragile network of public health providers with medicines, equipment and staff capacity to respond to increased demand and mitigate against deteriorations in services for Lebanese communities.

By end October 2013, humanitarian partners had supported some 317,000 primary healthcare interventions for refugees and other affected populations, including for 60,840 Palestine Refugees from Syria (PRS). Partners worked with the Ministry of Public Health (MoPH) to contain a measles outbreak affecting 1,745 children of which 88 per cent were Lebanese nationals. Some 730,000 children were vaccinated for measles and 231,057 children received oral polio vaccines and the routine immunization programme was strengthened with cold chain equipment, vaccines and staff training. 75,000 patients received chronic care medications and 769 cases of cutaneous leishmania were put on treatment. Reporting on communicable diseases was strengthened and health care providers were trained on epidemiological surveillance. Over 14,000 Syrians received psychosocial support however the limited number of mental health professionals at PHC centres hindered provision of mental health services. Anecdotal evidence also suggests that antenatal care was negatively impacted by user fees.

Providing secondary healthcare in Lebanon's fragmented and privatized health system is extremely costly. Faced with rising patient numbers and limited resources, humanitarian agencies had to restrict financial support to the most vulnerable refugees with life-threatening conditions and increase the refugee contribution from 15 per cent to 25 per cent. Within these tight targeting criteria, partners supported over 28,000 Syrian in accessing care for life-threatening conditions. Beneficiaries included nearly 1,500 new-borns and infants, and 7,500 pregnant women. UNRWA referred some 3,150 Palestine refugees for urgent secondary healthcare.

Reduced health assistance has placed a heavy burden on refugees and health providers. Some refugees skipped treatment or resorted to negative coping mechanisms to pay for care. At the same time, hospitals accumulated significant unpaid bills³⁸. Some hospitals resorted to unorthodox methods of collecting payment, such as detaining patients or bodies of the deceased, requesting upfront payment, and confiscating registration documentations. Without sustained humanitarian support in 2014, these incidents could escalate to outright denial of access to health care.

Partners have put in place a number of measures to rationalize costs and strengthen oversight of secondary health care programmes to ensure the most effective use of resources. These include daily patient visits, immediate medical and financial audit of files upon discharge and standard procedures for service delivery. Partners also visit hospitals regularly to follow up on various issues, such as inappropriate procedures, poly pharmacy, and quality of care.

Malnutrition is an increasing challenge. Since May 2013, 64 children suffering from acute malnutrition were identified. Partners trained staff in 25 PHC centres to identify malnutrition and treat moderate cases, while referring severe acute malnutrition (SAM) cases for specialized care in pre-identified hospitals. Results from a country-wide nutrition survey are expected in December and will provide insight on the magnitude and severity of the problem. UNRWA trained and recruited additional health staff in its 27 health centres across Lebanon.

38 As of October 2013, 4 government hospitals are owed over US\$269,000 in unpaid bills arising from the 25% refugee contribution.

Humanitarian and government agencies stepped up preparedness in relation to the use of chemical weapons in Syria. 17 frontline hospitals were identified and supported with personal protective equipment, antidotes and training. In addition, over 60 Lebanese Red Cross first responders were trained to identify and triage persons exposed to chemical weapons.

Recent confirmed cases of polio in north-eastern Syria are of significant concern and require immediate response. An outbreak risk assessment conducted by WHO in May 2013 indicates that Lebanon is at increased risk of reintroduction of polio³⁹. It is estimated that some 500,000 Syrian children have not been immunized, and vaccination coverage among displaced Syrians and host communities in border areas is suboptimal.

2. NEEDS AND PRIORITIES

The health status of refugees and affected populations is likely to deteriorate in 2014 without sustained humanitarian support. Based on current trends, it is estimated that vulnerable persons among affected populations will require a primary healthcare intervention at least once in 2014⁴⁰. Some groups, including pregnant and lactating women, children under five years of age, older persons⁴¹, persons with disabilities, and those with acute life threatening diseases have elevated needs for healthcare that will require priority attention. Persons exposed to critical health events such as disease outbreaks will also be prioritized.

Population group	Population in need	Targeted population
Syrian refugees	1,500,000	900,000
Palestine refugees from Syria	100,000	55,000 ⁱ
Affected Lebanese	1,500,000	900,000
Lebanese returnees	50,000	30,000

ⁱ Based on an estimate of three visits to health centres per year.

Some 20 per cent of projected refugees and the affected population are children under 5 years of age (573,000 persons). It is estimated that 5 per cent of new-borns will be premature and suffer from neonatal distress and congenital malformations, needing prolonged medical care. Partners project that a further 5,000 refugee children need specialized care for life-threatening conditions in 2014. Improving early detection of malnutrition, community awareness and infant and young child feeding practices are important priorities in light of recent reported cases. A nutritional survey is underway and will provide better population based data to fine-tune the nutritional response.

39 The last case of poliomyelitis due to wild poliovirus was reported in 1999 in Syria, and 2002 in Lebanon.

40 The *Vulnerability Assessment for Syrian Refugees (VASyR)*, WFP, UNHCR, UNICEF found 72% of refugees to be vulnerable. Pending the completion of similar assessments on PRS and Lebanese returnees, a similar proportion of these groups have been considered to be vulnerable for the purposes of planning.

41 Over 60 years of age.

Some 25 per cent of the projected population (775,000 persons) will be women of reproductive age and 124,000 will be pregnant women requiring essential pre-natal, delivery and post-natal services. Persons with disabilities and older persons will continue to need special attention with the particular health challenges they face given their lack of visibility and mobility within the community. In addition, some 20 per cent of the displaced population are expected to have mental health disorders in 2014, requiring specialised follow up and support.

Current trends suggest that some 50,000 Syrian refugees will require acute medical and surgical interventions in secondary and tertiary hospitals. With the cost of life-saving procedures averaging US\$565 per patient in 2013, significant international support will be required to ensure that the most vulnerable are not subjected to undue distress and an increased risk of mortality. Improved access to life-saving treatment for the most vulnerable among the Lebanese population through existing mechanisms including the NPTP⁴² is also a vital intervention to ensure continued social cohesion in communities hosting large numbers of refugees.

Health providers will continue to need support to be able to absorb the vast increase in patient numbers. A recent WB assessment found that US\$1.4-1.6 billion is needed until end 2014 to stabilize and restore access and quality of health, and other services to pre-conflict levels⁴³. The network of health centres and hospitals providing reduced-cost services to refugees must be expanded and training of health workers increased, to ensure access to treatment for refugees and diminish deteriorations in services for local populations. Additionally, health providers will need support replacing essential equipment and drugs that have come under strain because of continued increase in demand.

The capacity of GOL/MOPH in terms of preparedness and response to outbreaks must be rapidly reinforced, particularly in light of recent outbreaks of measles and polio. The expansion of the Government's early alert and response system is an urgent need. A synchronized sub-regional polio immunization campaign targeting the countries hosting most Syrian refugees is also of utmost urgency.

42 National Poverty Targeting Programme.

43 *Lebanon - Economic and social impact assessment of the Syrian conflict (ESIA)*, World Bank, 20 September 2013

3. RESPONSE STRATEGY

Humanitarian partners will work to maintain the health status of the affected population, reduce health risks and respond to potential disease outbreaks. They will also ensure treatment for those with life-threatening conditions. The strategy for 2014 seeks to:

- **Improve access, coverage, and quality of primary health care services.** Partners will target the most vulnerable with a minimum package of services based on the MOPH network package.⁴⁴ An expanded network of primary health care centres (PHCCs), including Ministry of Social Affairs' (MOSA) Social Development Centres (SDCs), shall be the first entry point for preventive, curative care, health promotion activities, and referral for secondary care⁴⁵. Additional mobile medical units will be established to reach vulnerable persons in remote locations. Partners will work on improved clinical management and treatment of mental health disorders, in addition to other psychosocial support activities and access to psychotropic medications.
- **Improve access and quality of health care services at the secondary and tertiary level.** Existing health facilities have the capacity to absorb increasing demand, however as health care is privatized and expensive, humanitarian actors will prioritize and target vulnerable refugees, specifically pregnant women, new-borns, persons with specific needs as well as emergency life-threatening medical and surgical interventions.
- **Support the national health system to respond to the increasing number of persons in need of health care in addition to supporting preparedness to respond to public health challenges.** Partners will work with MOPH and MOSA to improve access to and utilization of PHCCs and SDCs by reducing consultation fees, increasing availability of physicians, ensuring availability of essential drugs and supplies including reproductive health supplies, providing centres with essential equipment, and capacity building on various issues. The National Poverty Targeting Programme will be reinforced to assist with treatment costs for vulnerable Lebanese.

44 Groups considered to be vulnerable include children under 5, women of reproductive age, older persons and persons living with disabilities and mental health disorders.

45 Partners plan to expand the PHC network from 60 to 180 facilities.

Partners will work to improve efficiencies by centralizing procurement of essential drugs for acute and chronic conditions and making them available to targeted refugees and vulnerable Lebanese for a nominal fee⁴⁶. UNHCR will also use a Third Party Administrator (TPA) to administer and audit medical and financial services provided by contracted hospitals. This will reduce the burden on partners, enabling them to focus on case follow up and monitoring. It is hoped that this will also provide for better scrutiny of treatments prescribed to targeted groups, given reports of unnecessary medical procedures, poly-pharmacy, and the prescription of expensive therapeutic regimes. Despite efforts to reduce costs, partners will only be able to reach up to 72 per cent of the at-risk groups outlined in this response in line with overall assessments of vulnerability conducted by WFP, UNICEF and UNHCR. In the event of a funding shortfall, partners will be forced to further increase refugee contributions towards health costs reducing their access to basic care.

Health education and mass information activities will also be expanded across the country. Refugees will be encouraged to seek treatment in contracted hospitals where UNHCR and partners have negotiated preferential rates.

Palestine Refugees from Syria will continue to be supported by UNRWA through its health centres and by providing referrals and support for secondary and tertiary hospitalizations for life-threatening conditions. UNRWA will maximize available resources to provide primary health care and life saving secondary and partial tertiary health care services. UNRWA will also support the provision of life-saving emergency visits for PRS in Lebanon.

⁴⁶ Humanitarian partners will import drugs and distribute them to the network of PHC thereby lowering procurement of drugs locally which can be as much as 4-6 times more expensive.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Improve access, coverage and quality of primary health care services										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Treatment of acute and chronic conditions in PHC settings	420.000	28.080	400.000	6.680	National	25.113.664	23.548.080		1.565.584	Amel Association, Humedica, IMC, IOM, Makassed, Medair, PU-AMI, SCI, Seraphim Global, SIDC, UNHCR, (Amel, IMC, CMLC, PU-AMI, Makhzoumi Foundation, IOCC, Restart), UNICEF (MOPH, MOSA, Beyond, RI, IMC, PUAMI, IOM, HI, CLMC, MF, IOCC, Humedica, SG, Makassed), UNRWA, WHO
Treatment of acute and chronic conditions in PHC settings	33.600		140.000	7.000	National	3.004.267	3.004.267			MOSA

Output 1.2 Management of childhood illness	222.000	12.300	200.000	5.600	National	17.659.553	7.418.691	9.571.818	669.044	Amel Association, IMC, IOCC, IOM, Makassed, Makhzoumi Foundation, Armadilla S.c.s. Onlus, Medair, SCI, Seraphim Global, UNHCR (Amel, IMC, CMLC, PU-AMI, Makhzoumi Foundation, IOCC, Restart), UNICEF (MOPH, IOCC, Beyond, RI, MOSA, IMC, PUAMI, IOM, HI, CLMC, MF, IOCC, Humedica, SG, Makassed), UNRWA, WHO
Management of childhood illness	32.000	3.300	100.000	2.000	National	4.161.512	4.144.012		17.500	MOSA
Output 1.3 Reproductive health and family planning services provided	34.000	2.000	40.000	1.000	National	9.699.326	5.884.738	3.575.031	239.557	Amel Association, IMC, IOM, Makassed , Medical Aid for Palestinians, Medair, SCI, UNFPA, UNHCR (Amel, IMC, CMLC, PU-AMI, Makhzoumi Foundation, IOCC, Restart), UNICEF (MOPH, MOSA, Beyond, RI, IMC, PUAMI, IOM, SCF, HI, CLMC, MF, IOCC, Humedica, SG, Makassed), UNRWA, WHO

Reproductive health and family planning services provided	16.000	1.200	20.000	520	National	501.760	501.760			MOSA
Output 1.4 Mental health pshychosocial services and support persons with disability	15.500	2.800	10.000	900	National	3.765.841	106.000	3.487.593	172.248	CLMC, FPSC, HANDICAP INTERATIONAL, IMC, IOM, Makhzoumi Foundation, Armadilla S.c.s. Onlus, Medical Aid for Palestinians, Seraphim Global, UNHCR (Amel, IMC, CMLC, PU-AMI, Makhzoumi Foundation, IOCC, Restart), RESTART, UNICEF (Medical Aid for Palestinians)
Output 1.5 Health promotion and outreach and outbreak prevention	124.000	7.000	100.000	3.800	National	2.766.987	896.276	1.642.282	228.429	Amel Association, IMC, IOM, Makassed, Makhzoumi Foundation, Armadilla S.c.s. Onlus, Medical Aid for Palestinians, Medair, Seraphim Global, SIDC, UNFPA, UNHCR (Amel, IMC, IOCC, CMLC, PU-AMI, Makhzoumi Foundation, Save The Children), UNRWA

Health promotion and outreach and outbreak prevention	2.000		50.000	800	National	867.449		867.449		MOSA
Output 1.6 Polio Campaign					National	4.000.000		4.000.000		WHO (MOPH, Beyond), UNICEF (MOPH, Beyond)
Objective 1						63.005.370	37.853.785	22.276.724	2.874.861	
GoL						8.534.987	7.650.038	867.449	17.500	

Objective 2: Improve coverage and quality of secondary and tertiary health care										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Management on neonatal and congenital conditions	4.130	2.400			National	3.856.651	1.864.795	109.145	1.882.711	CLMC, UNHCR, UNRWA
Management on neonatal and congenital conditions	680				National	2.118.750	1.718.750	400.000		MOSA
Output 2.2 Management of obstetric and gynecological conditions	35.280	3.120			National	20.071.000	19.934.378	119.159	17.463	Amel Association, UNFPA, UNHCR (Globemed), UNRWA
Management of obstetric and gynecological conditions	34.000				National	10.500.000	9.750.000	750.000		MOSA

Output 2.3 Management surgical conditions	7.730	1.150			National	7.270.025	6.161.498	1.108.527		Amel Association, CLMC, HANDICAP INTERNATIONAL, Medical Aid for Palestinians, UNHCR, UNRWA
Management surgical conditions	6.950				National	8.416.250	3.916.250	4.500.000		MOSA
Output 2.4 In and out patent management of medical conditions	17.850	89.000			National	6.925.053	6.329.494	595.559		Center for Victims of Torture, Medical Aid for Palestinians, UNHCR, UNRWA
In and out patent management of medical conditions	5.450				National	4.730.000	3.230.000	1.500.000		MOSA
Objective 2						38.122.729	34.290.164	1.932.390	1.900.174	
GoL						25.765.000	18.615.000	7.150.000		

Objective 3: Strengthen national health systems										
Output	Targeted population by type (refer to individuals) from Jan-Jun 2014				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 3.1 Strengthen primary health care system	907.000	56.150	700.000	22.350	National	7.185.842		1.476.636	5.709.206	IMC, IOM, Makhzoumi Foundation, Armadilla S.c.s. Onlus, Medair, UNFPA, UNHCR (IOCC, Save The Children), UNICEF (MOPH, MOSA, Beyond, RI, IMC, PUAMI, IOM, HI, CLMC, MF, IOCC, Humedica, SG, Makassed), WHO (MOPH)
Strengthen primary health care system			408.000	5.000	National	282.650		14.000	268.650	MOSA
Output 3.2 Strengthen secondary/tertiary health care system	907.000	56.150	1.080.000	27.350	National	1.964.930			1.964.930	WHO (MOPH), UNHCR, MF, Save the children
Output 3.3 Surveillance of diseases of PH importance	907.000	56.150	1.080.000	26.350	National	750.582			750.582	WHO (MOPH), UNHCR, Save the Children, UNRWA
Surveillance of diseases of PH importance	907.000	56.150	1.080.000	26.350	National	8.000			8.000	MOSA
Objective 3						9.901.354		1.476.636	8.424.719	
GoL						290.650		14.000	276.650	

Sector indicators	Target
# of patients receiving PHC service by age and sex	1.051.350
# of pregnant women attending ANC visits at PHC Centers	344.160
# of children under 5 year old vaccinated by age and sex	575.230
# of children under 5 years age received oral polio vaccine	1.120.000
# of patients receiving inpatient care by age and sex	146.885
% of delivery by cesarean section	35%
# of health providers trained by cadre	1.860
# of structures equipped by category	600

Health - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
Humanitarian agencies	111.029.453	72.143.950	25.685.750	13.199.753	77.081.276
Government of Lebanon (GoL)	34.590.637	26.265.038	8.031.449	294.150	34.475.737

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Health in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
AMEL	752,802	456,476	296,326
CLMC	2,413,600	1,196,800	1,216,800
CVT	200,000	100,000	100,000
FPSC	822,000	434,750	387,250
HI	4,360,000	2,180,000	2,180,000
HUMEDICA	500,000	250,000	250,000
IMC	5,563,950	2,531,900	3,032,050
IOCC	376,000	188,000	188,000
IOM	2,516,001	1,410,001	1,106,000
MAKASSED	768,380	384,190	384,190
MAKHZOUMI	545,000	272,500	272,500
MAP	266,000	133,000	133,000
MEDAIR	2,819,040	1,409,520	1,409,520
PU-AMI	676,800	338,400	338,400
S GLOBAL	2,072,000	1,036,000	1,036,000
SCI	2,523,284	1,260,942	1,262,342
SIDC	107,400	53,700	53,700
UNFPA	8,682,500	4,882,500	3,800,000
UNHCR	93,051,811	53,816,405	39,235,406
UNICEF	31,577,787	17,648,030	13,929,757
UNRWA	12,398,701	9,745,022	2,653,679
WHO	15,117,673	11,301,317	3,816,356
Total	188,110,729	111,029,453	77,081,276
GoL	69,066,373	34,590,636	34,475,737

I. Shelter response

Lead Agencies	UNHCR, MOSA (Lebanese Ministry of Social Affairs)		
Participating Agencies	ACTED, CARE International, CONCERN, COOPI, CISP, CHF, CLMC, DRC, GVC, IOM, Medair, NRC, SCI, PU-AMI, PCPM, Shield, SIF, Solidar, Solidarites UNHCR, UN-Habitat, UNRWA		
Objectives	<ol style="list-style-type: none"> 1) Adequate settlement space to accommodate refugee families is available and maintained 2) Shelter conditions in settlements (including other options in urban/rural settings) are improved and maintained 		
Requirements from January to June 2014	US\$86,584,732		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$20,544,734	US\$37,061,774	US\$28,978,224
Total 2014 indicative financial requirements	US\$168,083,696		
Contact Information	Mohamad Mukalled, Mukalled@unhcr.org Ahmad Kassem, Kassema@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

Since the onset of the crisis, 300,000 persons received shelter assistance, comprising 220,000 Syrian refugees and 57,000 PRS, and 23,000 persons of vulnerable host families that received cash-for-host-families. Refugees and PRS benefited from shelter activities including cash-for-rent, weather proofing in informal settlements and unfinished houses, and rehabilitation of collective centres, unfinished buildings and temporary shelter settlements. Around 1,000 temporary shelter units were erected in privately owned sites. However, in view of their perceived permanence, these structures are no longer authorized for use.

Rising rental costs and the lack of large available buildings that could be rehabilitated for refugee use hamper shelter solutions. With the protracted crisis, more refugees are resorting to informal settlements (ITS). Currently, 420 such settlements exist in the country, primarily in the Beka'a and northern regions. They offer poor sanitation facilities, are mostly fire prone, and some are located in flood-planes thus endangering the life and health of refugees, especially during winter. There is often little possibility to establish dedicated areas for women, play areas for boys and girls, or access to adequate WASH facilities for the elderly and persons with disabilities. Moreover, since ITS are often established without authorization on public or private land, evictions are known to occur.

The worksites and unfinished houses pose similar hazards for refugees. PRS are primarily living within the 12 Palestine refugee camps and gatherings, which already face critical challenges of overcrowding, fragile housing, and inadequate water and sanitation infrastructure.

Within the more impoverished regions, the increasing numbers of refugees living on worksites and in informal settlements place additional burden on the overstretched infrastructure. In the absence

of a cost recovery mechanism for the use of basic utilities by refugees, and the protracted refugee situation, communities are becoming increasingly concerned and municipalities are becoming less collaborative on identification of shelter options for refugees.

In view of the lack of shelter options, and the substandard conditions in the majority of refugee shelters, UNHCR continues to advocate for the establishment of managed settlements. In the meantime, the government has authorized formal tented settlements to be set-up on public land comprising a maximum of 20 shelter units each. However, identifying adequate sites with the consent of host communities can be a slow process.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	765,000 ⁱ	694,000
Palestine Refugees from Syria	100,000 ⁱⁱ	100,000 ⁱⁱⁱ
Affected Lebanese	98,000	98,000 (indirectly through cash for rent, host families, and house rehab).
Lebanese Returnees	50,000	28,000
<p>i A UNHCR August 2013 Shelter Survey of 1,600 registered Syrian refugees/interviewees nationwide revealed that 50.9% of Syrian refugees are at shelter risk. Risks include: Eviction: 'owner call' or 'Exhaustion of resources'; Potential risk of Eviction: 'no job' or 'rent too high';</p> <p>ii As per UNRWA.</p> <p>iii UNRWA submission provides for 89,600 PRS including 4,600 in collective shelter rehabilitation and 85,000 in cash for rent, noting that this cash assistance is presumed to provide to all PRS needs, including shelter. Four NGOs will also target shelter assistance to around 10,000 PRS. Thus the entire PRS projected figure can be covered.</p>		

A survey conducted by UNHCR in August 2013, concluded that from the total number of registered refugees, around 67% live in apartments or houses, 14% live in substandard facilities such as garages, worksites and unfinished houses, 14% live in informal settlements, and 1.2% live in collective shelters.

A linear application of these refugee accommodation types implies that over one million Syrian refugees would be in apartments next year. Knowing that more than 500,000 refugees are in apartments today suggests a two-fold increase of available apartment space.

UNHCR will continue to advocate for large formal tented settlements to address emergencies, and the ongoing needs of more than one third of the refugees living within hazardous sub-standard conditions in informal settlements, garages and worksites. Moreover, the increasing demand on apartments for rent and the refugees' dwindling resources are expected to increase the demand on safe and managed collective shelters. In the absence of a structured real estate market to assess available empty dwellings, and the reluctance of some municipalities and communities to provide shelter options, the establishment of larger collective shelters and formal tented settlements is critically needed.

New ideas are also being explored to overcome the lack of shelter options, including raising the investment in buildings to rehabilitate those least completed, or in need of more repair. The ongoing assistance of Lebanese home owners to rehabilitate their houses for temporary refugee accommodation will be boosted through the direct involvement of, and in close collaboration with, municipalities in the process.

3. RESPONSE STRATEGY

The goal of the strategy will be to assist 920,000 persons of concern, including 694,000 Syrian refugees, 100,000 PRS, 28,000 Lebanese returnees and 98,000 members of host communities.

Interventions will target:

- Providing safe and dignified emergency shelter to newly arriving households;
- Improving substandard shelters and maintaining the shelter conditions of vulnerable households; and,
- Upgrading properties belonging to Lebanese host families, thus enabling them to benefit from structural improvements in the long-term.

Priority will be given to shelter interventions categorized as lifesaving, which will target approximately 31% of the targeted population. This will include assistance to refugees living in informal settlements and unfinished houses, cash for rent, and establishment of formal tented settlements.⁴⁷

The response will focus on

1. The **establishment of formal settlements**, including the option to rent private land for this purpose. The cooperation of municipalities and communities in accepting refugees will remain crucial. UNHCR and partners will continue to advocate with the Government to increase the authorized number of shelter units within a managed formal settlement.
2. Expand the initiative to **rehabilitate apartments and houses** to other areas, including increasing the ceiling/cost of repairs in order to entice more house owners to provide houses for shelter use.

⁴⁷ The 31.27 % of the total submissions amounts to around US\$52.5 million. Weather proofing of IS and unfinished houses estimated at US\$26 million, the remaining balance would be then divided between establishment of FTS, site improvement of IS, and cash assistance.

3. **Cash for rent and cash for host families** will offset the burden of rent payments on the vulnerable Syrian refugee and PRS households. However, attention will be paid to avoid adverse impact on rental markets and community hospitality, and the standpoint of regional disparities.
4. **Rehabilitation of public and private collective shelters.** In view of the dwindling number of public buildings for refugee use, a new push towards rehabilitating large privately owned buildings will be up scaled in 2014.
5. **Weather proofing of informal settlements and unfinished houses** to improve living conditions, in particular during the winter months. Rehabilitation work and shelter kits will source the local market for materials thereby enabling a cost effective design that would reach as many beneficiaries as possible. Weatherproofing of informal settlements and sealing off unfinished houses will be an integral part of winterization activities.
6. **Site improvement** of informal settlements includes decongestion and provision of fire breakers and drainage possibilities.
7. **Collective shelter management** will address the problems arising from issues such as solid waste management and electric power consumption and thus encourage communities to put large buildings at the disposal of the refugees.

Shelter projects will contain a considerable degree of direct beneficiary participation, thus empowering refugees to determine their own solutions. This will include specific consultations with women, especially female heads of households (24% of the refugee population). Shelter agencies will collaborate towards establishment of dedicated facilities and areas for women, boys and girls and towards improving access to the elderly and refugees with special needs. Shelter initiatives will also contribute to the development of the local economy by using local production and supply of materials and therefore, creating livelihood opportunities for host communities.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Settlement Space Available										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Refugees, and other displaced persons from Syria have access to increased number of adequate settlement space	163.700	61.800	36.350	5.450	National	72.320.996	10.757.337	33.060.436	28.503.223	ACTED, Care, Concern, CLMC, GVC, IOM, Medair, NRC, PCPM, SC Lebanon, SIF, Solidar Suisse, SI, UN-Habitat, UNRWA, UNHCR (ACTED, CHF, CISP, CONCER, COOPI, DRC, Intersos, IOM, IRW, Makhzoumi, PCPM, PU-AMI, SHEILD)
Objective 1						72.320.996	10.757.337	33.060.436	28.503.223	

Objective 2. Acceptable Living Conditions										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Refugees have access to settlement spaces with acceptable living conditions.	153.650	4.100	9.200	3.350	National	14.263.736	9.787.397	4.001.339	475.000	ACTED, Care, Concern, CLMC, GVC, IOM, Medair, NRC, PCPM, SC Lebanon, SIF, Solidar Suisse, SI, UN-Habitat, UNRWA, UNHCR (ACTED, CHF, CISP, CONCER, COOPI, DRC, Intersos, IOM, IRW, Makhzoumi, PCPM, PU-AMI, SHEILD)
Objective 2						14.263.736	9.787.397	4.001.339	475.000	

Sector indicators	Target
# of individuals provided with temporary emergency shelter (including formal tented settlements)	54,000 Refugee Population 230 PRS Population 700 Affected Lebanese Population 540 Lebanese Returnee Population
# of individuals received cash for rent and cash for host families.	54,680 Refugee Population 59,580 PRS Population 19,540 Affected Lebanese Population 3,260 Lebanese Returnee Population
# of individuals benefitting from the rehabilitation of private and public collective shelter and collective shelter management	12,570 Refugee Population 3,740 PRS Population 160 Affected Lebanese Population 170 Lebanese Returnee Population
# of individuals benefitting of rehabilitation of their apartment/house (including Syrian refugees and Lebanese owners)	40,950 Refugee Population 1,960 PRS Population 14,500 Affected Lebanese Population 1,480 Lebanese Returnee Population
# of individuals benefitting from weatherproofing of their shelter (informal settlement and unfinished houses)	100,770 Refugee Population 270 PRS Population 8,260 Affected Lebanese Population 1,880 Lebanese Returnee Population
# of individuals benefitting from site improvement of their informal settlement	33,420 Refugee Population 140 PRS Population 830 Affected Lebanese Population 1,480 Lebanese Returnee Population
# of individuals benefitting from collective shelter management	20,970 Refugee Population 1,580 Affected Lebanese Population

Shelter - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
SECTOR GRAND TOTAL	86.584.732	20.544.734	37.061.774	28.978.224	81.498.964

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Shelter in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	4,081,000	2,040,500	2,040,500
CARE	1,451,012	590,060	860,952
CLMC	3,732,800	1,866,400	1,866,400
CONCERN	121,000	121,000	
GVC	604,220	100,000	504,220
IOM	8,750,000	3,435,000	5,315,000
MEDAIR	6,470,000	2,235,000	4,235,000
NRC	11,250,000	5,625,000	5,625,000
OXFAM	1,870,000	935,000	935,000
PCPM	6,411,000	2,227,000	4,184,000
SCI	7,831,250	2,634,000	5,197,250
SI	1,680,000	840,000	840,000
SIF	610,000	610,000	-
SOLIDAR	420,000	150,000	270,000
UNHABITAT	6,544,400	3,264,200	3,280,200
UNHCR	75,427,796	45,263,722	30,164,074
UNRWA	30,829,218	14,647,850	16,181,368
Total	168,083,696	86,584,732	81,498,964

J. Basic Needs response

Lead Agencies	UNHCR, MoSA		
Participating Agencies	ACTED, AVSI, CARE, CHF, CLMC, DRC, GVC, HI, HWA, INTERSOS, IOCC, IOM, Medair, Mercy Corps, Mercy-USA, Oxfam, SCI, Solidar Suisse, Solidarités International, TdH-Italia, WVI UNHCR, UNICEF, UNRWA		
Objectives	<ol style="list-style-type: none"> 1. The necessary seasonal NFI and sufficient access to energy to survive winter is provided without adverse effects. 2. The provision of necessary seasonal NFI for the winter is targeting newcomers. 3. Sufficient basic and domestic items, including stocks for emergency needs, are targeting newcomers shortly after arrival. 		
Requirements from January to June 2014	US\$77,444,514		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$47,339,195	US\$30,105,319	
Total 2014 indicative financial requirements	US\$149,090,198		
Contact Information	Charles Higgins, Higgins@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

As of September 2013, partners delivered basic non-food items (NFI) to some 212,000 Syrian refugee men, women, boys and girls for cooking, eating, sleeping and living with dignity. The main assistance provided was the NFI kit for new arrivals consisting of one blanket per person, four mattresses per family, a kitchen set of pots, pans, plates and utensils, two water storage containers, a hygiene kit of consumables such as sanitary items and soap plus diapers and other items for baby-care (if needed). Some partners could add a cooking stove to a limited number of beneficiaries at the beginning of the operation, as well as a dignity kit to women and adolescent girls including items to maintain feminine hygiene, clothing and a flashlight for their safety. During the winter months of 2012/2013 partners reported distributing vouchers for heating fuel to 110,000 persons and heating stoves to cover some 12,000. Almost all the NFI and fuel provided to date was sourced within Lebanon, benefiting local companies.

Partners worked to keep pace with new arrivals, although maintaining a high volume of procurement, transportation, and distribution of relief items, proved challenging given Lebanon's limited warehouse capacity, poor transport infrastructure and lack of suitable public facilities for use as distribution sites. Severe weather conditions during the winter also delayed some deliveries and security problems led to suspension of NFI distributions in Tripoli and Bekaa at certain times.

With no reception facilities in Lebanon, refugees move around the country to find accommodation and livelihoods opportunities and, consequently, they can be widely dispersed. This increases the challenge of locating and assisting newcomers, adding to the logistic costs and meaning that

some of them have been missed. It has also made it difficult for agencies to conduct quality needs assessment and tailor assistance according to these needs and the gender and age composition of the family. In the absence of a common database on the unregistered, partners believe that some households could access assistance by presenting themselves as newcomers more than once in different locations. Post-distribution monitoring of NFI was also insufficient and the impact of the assistance provided needs to be consistently evaluated in 2014.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	1,500,000	540,228
Palestine Refugees from Syria	100,074	49,023
Affected Lebanese	1,500,000	14,713
Lebanese Returnees	50,000	21,137

Household surveys conducted by the agencies distributing NFI indicate that over 90 per cent of Syrians, PRS and Lebanese returnees arrive with almost no personal possessions, and most do not have the means to purchase them. To ensure a predictable response to their needs, the NFI Working Group has standardized a newcomer assistance package. Partners aim to provide any family found to be in need through assessment, with basic NFI assistance within two weeks of arrival.

Alleviating risks to health and hardship linked to harsh winter conditions is the most critical priority identified by partners. Conditions for those living in tents, tent-like structures, unfinished buildings or other poor shelter conditions, can be life-threatening. Providing for basic items including stoves, blankets and the means to buy heating fuel enables displaced persons to survive Lebanon's harsh winter without resorting to negative coping strategies such as taking exploitative work, survival sex or selling the few possessions they have.

It is projected that 524,000⁴⁸ refugees, PRS, Lebanese returnees and vulnerable host community men, women, boys and girls within the overall targeted population will be in need of assistance during the 2013/2014 winter. They have been targeted based on their vulnerability status, the severity of the weather in their locations, the quality of their shelters, or other special needs they may have. Resources are available to provide blankets, winter clothing, heating stoves or cash and fuel until end 2013, however targeted families will continue to need support to meet fuel costs until March 2014, and newcomers also need extra support through the winter.

As vulnerabilities are expected to increase in 2014, a larger proportion of men, women, boys and girls will need support for winter 2014/2015, and the plan presented in RRP6 will be reviewed mid-year to ensure that targets match the reality.

48 Including some 140,000 children who will receive winter clothing (in-kind and in vouchers).

The capacity to respond to a sudden increase in new arrivals will need to be maintained in 2014. Although a contingency stock of NFI already exists, supplies need to be regularly replenished, and more warehouse capacity is still needed, especially in Akkar and the North.

3. RESPONSE STRATEGY

In 2014 partners have agreed to focus efforts around three essential interventions:

1. Providing vulnerable men, women, boys and girls with the necessary seasonal NFI and sufficient access to energy to survive winter without adverse affects;
2. Ensuring that newcomers have the necessary seasonal NFI pending registration;
3. Ensuring that newcomers have sufficient basic and domestic items, shortly after arrival, and maintaining a reserve stock for emergency needs.

So far as is possible, partners will target assistance to ensure that available resources reach the most vulnerable and are appropriate for the different needs of men, women, boys and girls. Partners will strengthen efforts to reduce security risks for women and adolescent girls at distribution points, including by ensuring gender balance in distribution teams and their obligation to report sexual exploitation and abuse informing them of the appropriate behaviour towards refugees⁴⁹. Establishing help desks at distribution sites will also better inform refugees about complaints' mechanisms.

Under objective 1, partners will target those that are most affected by harsh winter conditions. UNHCR and its partners will cover all refugees living in areas above 500 metres in elevation, while other agencies will concentrate on those living in informal settlements (ITS), unfinished buildings and others in the worst shelters. Partners will also assist persons with special needs, including vulnerable older persons, female-headed households and those with high dependency ratios, as well as vulnerable host community families, who will be identified by municipalities and verified by MoSA. Targeted households will be supported with a high thermal blanket per person plus US\$100 per month to cover fuel costs for the five winter months in 2014 (January-March and November-December). Newcomers will also be provided with a heating stove per household or US\$50 cash in lieu. Fuel will be provided as a cash transfer mostly through ATM cards, to avoid problems encountered with fuel vouchers last year. Children are especially vulnerable to cold and UNICEF and its partners will assist at least 100,000 children with in-kind winter clothing and vouchers in ITS and other forms of shelter in the most vulnerable locations, as well as providing fuel for heating schools.

Under objective 2, partners will provide newcomers who arrive during either of the two winter periods, with a one-off distribution of US\$150 in cash or voucher, to cover special winter needs on top of the regular NFI newcomer package. This will help them to survive until they are able to register and receive assistance under the regular winterization programme.

49 Secretary General's Bulletin on Special Measures for Protection from Sexual Exploitation and Abuse (2003).

Assistance under objective 3 will target all projected Syrian, Palestine refugee, Lebanese and third country national newcomers with the basic in-kind NFI assistance package already outlined above, plus the WFP food parcel.

In 2014, a comprehensive monitoring and evaluation system will be set up for all programmes with significant cash components, starting with winterization (objective 1). Subsequently, if it proves feasible to extend the ATM cards to the unregistered refugee population once a central database to manage the system has been created, it may be possible to transform the entire newcomer assistance programme into cash through ATM transfers, achieving savings on logistics and enabling the initial assistance a newcomer receives to be tailored to their needs, based on gender and age.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Targeted population has the necessary seasonal NFI and sufficient access to energy to survive winter without adverse affects										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Sectoral cash grants or vouchers provided - all humanitarian agencies	540.250	196.550	14.700	13.700	All Lebanon (North, Bekaa, Beirut & Mt Lebanon, South)	41.701.790	41.701.790			ACTED, AVSI, CARE, CHF, CLMC, DRC, GVC, HI, IOCC, IOM, Medair, Mercy Corps, Mercy-USA, Oxfam, SCI, SIF, Solidar Suisse, Tdh-Italia, UNHCR, UNICEF, UNRWA, WVI
Objective 1						41.701.790	41.701.790			
Objective 2. Newcomer population has the necessary seasonal NFI for the winter										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Cash grants or vouchers (multi-purpose) provided - all humanitarian agencies	155.850	18.000	1.250	1.350	All Lebanon (North, Bekaa, Beirut & Mt Lebanon, South)	5.637.405	5.637.405			ACTED, CLMC, DRC, GVC, HI, Intersos, Medair, Mercy Corps, SCI, Solidarités International, Tdh-Italia, UNRWA
Objective 2						5.637.405	5.637.405			

Objective 3. Newcomer population has sufficient basic and domestic items, shortly after arrival										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 3.1 Core relief items (CRI) provided - all humanitarian agencies	490.900	49.000	7.450	21.150	All Lebanon (North, Bekaa, Beirut & Mt Lebanon, South)	30.105.319		30.105.319		ACTED, AVSI, CLMC, DRC, GVC, HI, HWA, Intersos, IOM, Medair, Mercy Corps, Mercy-USA, SCI, SIF, Solidar Suisse, Solidarités International, Tdh-Italia, UNHCR, UNRWA
Objective 3						30.105.319		30.105.319		

Sector indicators	Target
# of HH receiving winter cash grants or vouchers for fuel (per month)	118.350 Jan -Mar
# of newcomer HH receiving winter cash grants	35.290 Jan -Mar
# of HH receiving CRI	113.700 Jan - Jun

Basic Needs - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
GRAND TOTAL BASIC NEEDS SECTOR	77.444.514	47.339.195	30.105.319		71.645.684

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Basic Needs in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	5,860,300	2,624,200	3,236,100
AVSI	973,400	565,400	408,000
CARE	2,293,768	849,948	1,443,820
CHF	1,551,990	825,990	726,000
CLMC	2,997,696	1,633,696	1,364,000
DRC	29,565,000	16,734,000	12,831,000
GVC	1,322,500	701,100	621,400
HI	2,272,220	1,552,220	720,000
HWA	1,060,750	535,750	525,000
INTERSOS	1,168,000	600,800	567,200
IOCC	898,000	198,000	700,000
IOM	7,051,483	2,516,483	4,535,000
MC	867,000	594,000	273,000
MEDAIR	4,169,230	1,498,050	2,671,180
MU	1,360,000	680,000	680,000
OXFAM	3,904,800	1,952,400	1,952,400
SCI	7,032,776	3,658,026	3,374,750
SI	696,000	332,000	364,000
SIF	2,728,800	1,364,400	1,364,400
SOLIDAR	835,400	375,400	460,000
TDHI	1,535,700	384,000	1,151,700
UNHCR	61,215,489	30,920,489	30,295,000
UNICEF	5,000,000	5,000,000	-
UNRWA	2,471,396	1,282,162	1,189,234
WVI	258,500	66,000	192,500
Total	149,090,198	77,444,514	71,645,684

K. Social cohesion and Livelihoods response

Lead Agencies	UNDP, UNHCR, MoSA, PMO		
Participating Agencies	ACTED, Al Majmoua, Amel, BBC Media Action, DRC, FAO, GVC, ILO, International Alert, International Rescue Committee, INTERSOS, IOM, Mercy Corps, Oxfam, Relief International, RESCATE, RET, Safadi Foundation, SC Lebanon, SFCG, WRF UNDP, UNESCO, UNHCR, UNIDO		
Objectives	<ol style="list-style-type: none"> 1. Social cohesion in refugee-hosting communities promoted 2. Self-reliance and livelihoods improved 		
Requirements from January to June 2014	US\$48,352,828		
Prioritized requirements (January-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
		US\$44,848,023	US\$3,504,805
Total 2014 indicative financial requirements	US\$98,424,687		
Contact Information	Shombi Sharp, shombi.sharp@undp.org Anna Leer, leer@unhcr.org Carol El-Sayed, elsayed@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

The Syrian crisis and refugee influx has had many destabilizing consequences for Lebanon. A recent World Bank published assessment⁵⁰ points to a reduction in GDP growth by 2.85 per cent each year since the crisis began and estimates the total cost of the crisis to Lebanon will reach US\$7.5 billion by end 2014. Spending on education and health has increased significantly while the quality of public services has reportedly deteriorated, especially for the vulnerable Lebanese citizens.⁵¹ Competition in the informal job market has driven wages down, while prices for basic necessities, such as fuel or rents, have increased. The majority of refugees (86 per cent) are living in communities where the majority of vulnerable Lebanese (66 per cent) also reside. Both refugees and vulnerable Lebanese are severely affected by the poor quality of public services, hard-to-get-by job opportunities and inflation in the price of basic goods.

Efforts are increasingly being made to support Lebanese institutions and hosting communities cope with the refugee influx. To date, 154 projects have been completed or are in process of completion at the local level. These include projects to expand capacity of local medical facilities, to improve water treatment and supply and waste disposal, building or rehabilitating communal spaces and strengthen capacities of social development centres.

50 *Lebanon - Economic and social impact assessment of the Syrian conflict (ESIA)*, World Bank, 20 September 2013

51 The ESIA projects a loss in Government revenue of US\$1.6 billion and an increase in Government expenditure of US\$1.2 billion. Lebanon's fiscal deficit is expected to increase by US\$2.7 billion over the period 2012-2014.

More than 3,000 (40 per cent Lebanese) have enrolled in vocational training programmes, at least 20 per cent leading to gainful employment, and a number of agencies are now establishing more wide-ranging livelihood programmes with focus on women, youth and persons with specific needs.

In addition, assisting Lebanese institutions and providing support to vulnerable Lebanese has been mainstreamed across all sectoral interventions, and specifically in the areas of health, education, shelter and water and sanitation. Investments have also been made in strengthening the capacities of municipalities to cope with the crisis, as well as to strengthen the ability of national and local service providers to respond to those with specific needs (Lebanese and refugees).

Nonetheless, the significant lack of funding remains a major barrier to the work of the sector. Many actors received no financial support. More restrictive government policies regarding livelihood provisioning for Syrians in the face of growing public concerns about competition for jobs, and limited local market opportunities, present additional challenges.

The recent international recognition of the need to relieve pressure on Lebanese host communities may change things around for the sector funding-wise, most notably, by the UN Security Council Presidential Statement in July and the September formation of the International Support Group for Lebanon on the margins of the UN General Assembly.

Launched in early 2013, the Task Force on Support to Host Communities, co-chaired by UNDP, UNHCR, PMO and MOSA has facilitated the formulation of a strategic framework for the response, a significant entry of new partners and the development of a clear targeting methodology singling out 244 prioritised communities for social cohesion and livelihood activities.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	1,500,000	320,600
Palestine Refugees from Syria	100,000	700
Affected Lebanese	1,500,000	424,000
Lebanese Returnees	50,000	24,950

With a projected 1.5 million registered refugees by the end of 2014, one in four persons in Lebanon will be a Syrian refugee and an estimated 1.5 million Lebanese stands to be negatively affected by the crisis with poor Lebanese disproportionately affected⁵². As the country grapples with its own political and internal divisions, the additional pressures brought on by a massive refugee influx are fraying nerves. There is a growing sense that the Lebanese are being asked to continue to accommodate a seemingly endless stream of refugees, without commensurate support. Curfews

⁵² The ESIA estimates that in addition to the 1 million poor, another 170,000 Lebanese will be pushed into poverty and up to 320,000 will become employed.

imposed on refugees in local villages, recent evictions of refugees from apartments and land used for informal settlements, are testament to growing tensions between Lebanese and refugee communities in some areas.

A recent risk assessment identified 25 communities, mainly in the Bekaa and North Lebanon, as requiring most urgent interventions to help restore or maintain harmony between Lebanese and Syrian refugees.

In parallel to the host community needs, the majority of refugees face severe poverty and associated risk of resorting to negative coping mechanisms such as early marriage among girls, child labour, survival sex and other exploitative labour markets to subsist. This, taken together with the impact of the crisis on livelihoods of Lebanese and the associated discontent, illustrates the importance of self-reliance activities for both refugees and vulnerable Lebanese.

To comprehensively address the situation, the larger scale developmental interventions foreseen in the joint GOL/World Bank/UN Needs Assessment and Roadmap to a Stabilization Framework, are a critical supplement to the humanitarian response and its specific interventions addressing most immediate causes of tensions in Lebanese host communities.

3. RESPONSE STRATEGY

A comprehensive strategy supported by robust funding to promote social cohesion and self-reliance has to effectively tackle both the expression of conflict and causes of tension in refugee-hosting communities. This will be done through a four-pronged approach.

First, to expand local conflict mitigation mechanisms, social cohesion partners will bring local actors together in dialogue fora, support them with the tools to mediate conflicts and seek their commitment to respond jointly to rising tensions.

Second, local and national change agents like media, teachers, youth and local leaders will be called upon and prepared to actively combat the misperceptions fuelling hostilities.

Third, service provision will be reinforced through host community support projects (CSPs) defined by the community as sources of tension and/or priority. Reflecting the significant increase in pressures on municipal services in 2013, RRP6 features a more robust emphasis on promoting social cohesion through services-related CSPs guided by a set of core principles recognizing local and national ownership. To succeed, efforts will also be made to mainstream conflict sensitive programming and service provision across all sectors.

Fourth, conflict-sensitive and innovative livelihood activities mainly targeting women and youth and leading to self-reliance will be scaled up considerably. While refugees and vulnerable Lebanese desperately need jobs to meet their basic needs for self-reliance, promoting job-creation for refugees is highly sensitive due to the potential fuelling of further tensions. Assessments have also shown

job opportunities to be very limited within the principal sectors of agriculture, construction and services. Activities will therefore target both communities and the strategy will focus on innovation and market/business creation within two to maximum three areas not constituting competition to existing local markets. Handicraft is identified as an area with great potential for Syrian women's livelihoods considering existing skills and cultural barriers to participate in the traditional labour market. Otherwise, new markets will be explored based on analysis of opportunities in import substitution, procurement for the emergency and new exports and business will be created around Lebanese businesses and cooperatives.

In view of the massive stabilization needs, which can only be addressed by large scale developmental interventions, the majority of the activities of the sector are best categorised as preventing further deterioration of vulnerabilities.

To target the humanitarian response, pre-existing poverty profiles have been analysed against refugee data, to identify the 225 most affected and vulnerable communities in Lebanon. This has been overlaid with a preliminary conflict-map resulting in the identification of another 19 communities amounting to 244 priority locations for social cohesion and livelihood interventions. Reflecting this prioritization, the North and Bekaa have been allocated the most significant attention and resources in the sector, while the South and Mount Lebanon and Beirut have increased rapidly from a low base since the RRP5.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Social cohesion in refugee-hosting communities promoted										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Change agents capacitated to address misperceptions fuelling tensions	1.350	45	3.000		Lebanon	3.363.007		3.363.007		Al Majmoua, Amel, BBC Media Action, GVC, International Alert, IRC, RET, SFCG, UNDP, UNESCO, UNHCR, WCH, WRF
Output 1.2 Community Capacity for dispute resolution and conflict management strengthened	185.250		213.750		Lebanon	2.485.445		2.485.445		GVC , Intersos, Mercy Corps, RESCATE, UNDP, UNHCR (SFCG, LOST, WCH), WRF
Output 1.3 Service provision reinforced through community driven CSPs	270.750		277.850		Lebanon	12.877.813		12.877.813		ACTED, Amel, DRC, GVC, Intersos, IOM, RESCATE, SC Lebanon, UNDP, UNHCR (UNDP, DRC, ACTED, IRS, COOPI, AMEL, WCH, Right to Play, CHF, TdH, IRC, Intersos, PU-AMI, UN-Habitat), WRF

Service provision reinforced through community driven CSPs	49.850		423.950	24.950		2.500.000			2.500.000	MoSA
Output 1.4 Social Cohesion mainstreamed	150.000		150.000		Lebanon	1.761.800			1.761.800	International Alert, UNDP, UNHCR (International Alert, SFCG, UNDP)
Objective 1						20.488.065		18.726.265	1.761.800	
GoL						2.500.000			2.500.000	

Objective 2. Self-reliance and livelihood improved										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Income generation, employment and market creation opportunities increased	30.000	700	50.000	10.000	Lebanon	23.060.058		21.317.053	1.743.005	Amel, FAO, ILO, Intersos, IOM, Mercy Corps, Oxfam, Relief International, Safadi Foundation, SC Lebanon, UNDP, UNHCR (Al Majmoua, Intersos, Amel, LOST), UNIDO, WRF

Output 2.2 Vocational, life skills and entrepreneurship training opportunities increased	13.500	640	15.000	320	Lebanon	4.804.705		4.804.705		Amel, Intersos, IOM, RET, Safadi Foundation, SC Lebanon, UNDP, UNHCR, WRF
Objective 2						27.864.763		26.121.758	1.743.005	

Sector indicators	
# of CSPs and # of individuals benefitting from CSPs	69 CSPs and 598,500 host community members and refugees benefitting
# of communities with conflict mitigation mechanisms established and engaged (# of individuals trained)	46 communities (min. 920 stakeholders capacitated)
# of change agents (media reps, local/youth leaders, public figures, teachers etc.) trained and addressing misperceptions	4,400 change agents in action
# of individuals in response trained in conflict sensitive programming and assistance delivery	1,200 authorities, humanitarian planners and workers
# of persons receiving job preparation support	28.000
# of persons benefitting from market/job creation opportunities	80.000

Social Cohesion and Livelihoods - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
Humanitarian agencies	48.352.828		44.848.023	3.504.805	50.071.859
Government of Lebanon (GoL)	2.500.000			2.500.000	2.500.000

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Social cohesion and livelihoods in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACTED	1,500,000	750,000	750,000
Al Majmouaa	50,000	20,000	30,000
AMEL	644,002	347,001	297,001
BBC	1,000,000	500,000	500,000
DRC	400,000	240,000	160,000
FAO	6,000,000	2,500,000	3,500,000
GVC	2,070,000	685,000	1,385,000
IA	555,000	310,000	245,000
ILO	2,825,000	1,200,000	1,625,000
INTERSOS	2,569,800	1,333,400	1,236,400
IOM	5,999,999	3,225,714	2,774,285
IRC	172,000	86,000	86,000
LOST	84,520	40,020	44,500
MC	3,455,747	2,200,497	1,255,250
OXFAM	5,680,000	2,840,000	2,840,000
RESCATE	354,000	177,000	177,000
RET	1,880,000	940,000	940,000
SAFADI	1,150,000	575,000	575,000
SCI	12,390,300	6,195,150	6,195,150
UNDP	27,773,600	13,916,800	13,856,800
UNESCO	1,900,000	650,000	1,250,000
UNHCR	19,647,019	9,413,396	10,233,623
WRF	323,700	207,850	115,850
Total	98,424,687	48,352,828	50,071,859
GoL	5,000,000	2,500,000	2,500,000

L. Water Sanitation and Hygiene (WASH) response

Lead Agencies	UNHCR/UNICEF		
Participating Agencies	ACF, ACTED, AVSI, CARE, CARITAS Lebanon Migrant Center, CISP, Concern, GVC, INTERSOS, IOCC, IRD, Makhzoumi Foundation, Medair, MercyCorps, MercyUSA, Oxfam, PU-AMI, Relief International, Rescate, Save the children, SHIELD, Solidarités International, UN-Habitat, UNHCR, UNICEF, UNWRA, WWL		
Objectives	<p>1 Safe, equitable and sustainable access to a sufficient quantity and quality of potable water for drinking, cooking and personal and domestic hygiene is ensured.</p> <p>2 A safe, sanitary and hygienic living environment that protects affected populations from the spread of disease is promoted.</p> <p>3 Hygienic practices, effective community mobilisation to address harmful current practices, and delivery of hygiene products and services on a sustainable and equitable basis that reduce the risk of WASH-related diseases are improved.</p>		
Requirements from January to June 2014	US\$102,042,581		
Prioritized requirements (January-June)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or resilience
	US\$56,878,210	US\$39,733,833	US\$5,430,538
Total 2014 indicative financial requirements	US\$202,424,337		
Contact Information	Samuel Gonzaga, gonzagas@unhcr.org David Adams, dadams@unicef.org		

1. ACHIEVEMENTS AND CHALLENGES

Throughout 2013, access to an adequate quantity of safe water for affected populations was ensured through a number of activities including the distribution of 6,129 household water filters, water quality tests carried out at 126 sources, installation of 6,354 water tanks, and over 15,086 individuals benefit from on-going water-trucking.

Sanitation needs have been addressed by constructing or rehabilitating 3,453 latrines and establishing services for disposal of wastewater – provision of 1,086 solid waste collection bins, distribution of 1,704 toilet cleaning kits, and the installation of 1,340 hand washing facilities. Hygiene promotion activities benefited 59,531 individuals and, 664,817 family hygiene kits and 240,552 baby kits were distributed. At Masna'a border crossing, a waiting area was set up with WASH facilities to accommodate a large number of refugees if necessary.

Environmental health services were provided to 26,000 PRS from inside Palestine refugee camps. Sewage and water systems in all 12 Palestine refugee camps were maintained and repaired and 4,317 families were provided with hygiene kits.

The increase in refugee numbers has put significant pressure on national water and wastewater systems resulting in a deterioration of services for local communities. Partners worked with the government to develop community level projects that benefit Lebanese affected by the crisis. Some 203,000 affected Lebanese and 43,000 refugees have benefited from efforts to rehabilitate water systems. Wastewater projects have improved conditions for 25,000 affected Lebanese and 30,000 refugees, and ongoing solid waste assistance is benefiting 29,365 refugees and 172,900 Lebanese in host communities.

Capacities to address WASH needs remain stretched, compounded by limited funding and a complex environment. Refugees are dispersed in over 1,500 locations and many have found shelter in informal settlements or substandard dwellings with poor or non-existent WASH facilities. Partners must invest considerable time and resources to identify and deliver appropriate responses, including frequent short-term and emergency interventions. At the same time partners are developing non-conventional interventions to address longer-term challenges including increased crowding in refugee settlements, risks of flooding during winter and government restrictions to installing services. The WASH and Shelter sectors worked jointly in preparation for the winter to undertake site-improvement activities in informal settlements including flood-risk mitigation measures, reinforcing hygiene promotion and distribution of NFI kits.

Localized insecurity in certain locations deters access and delivery of necessary humanitarian services. Overcrowding in Palestine refugee camps is a pressing concern as fragile water and solid waste systems are further burdened by new arrivals.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Syrian Refugees	Water – 405,000 Sanitation – 435,000 Hygiene – 1,050,000	Water – 405,000 Sanitation – 281,000 Hygiene – 605,000
Palestine Refugees from Syria	Water – 50,000 Sanitation – 50,000 Hygiene – 70,000	Water – 45,000 Sanitation – 45,000 Hygiene – 30,000
Affected Lebanese	Water – 405,000 Sanitation – 435,000 Hygiene – 1,050,000	Water – 405,000 Sanitation – 165,000 Hygiene – 250,000
Lebanese Returnees	Water – 13,800 Sanitation – 14,800 Hygiene – 35,800	Water – 2,000 Sanitation – 1,000 Hygiene – 2,700

Over twenty WASH related assessments were conducted since May 2012 and emerging needs are continuously monitored as more refugees arrive and settle across Lebanon. Current trends estimate that 27 per cent require access to potable water (quality and quantity), 29 per cent require improved sanitation facilities (latrine and solid waste facilities) and 70 per cent need assistance adapting to hygienic conditions in displacement. The projected refugee figure in 2014 will put

enormous strain on already limited WASH services leading to public health risks and increasing tensions. Furthermore, latrine coverage in some settlements is below standards. The most intractable problems concerning solid waste management in Lebanon centre on the treatment and disposal of waste. It is estimated that around 51 per cent of all municipal solid is landfilled, 32 per cent is dumped, and the remaining 17 per cent is recovered through sorting and composting. The refugee caseload has grossly impacted on this delicate solid waste management system. Added to this mix are the limited facilities for wastewater collection and treatment. The containment, treatment and disposal of wastewater would reduce contamination of water sources. Water quality data reported by partners indicate high levels of microbiological contamination in water delivery points. Per capita costs vary between regions based on logistical, scope of work, security and other implementation capacities and challenges. For example, community water supplies are twice the cost in the North than in Mount Lebanon and Beirut.

Intervention is a critical where overall WASH conditions are below minimum standards or are particularly precarious, such as in informal settlements, collective centres and small shelters. Up-scaled support to community WASH services such as water and wastewater systems, solid waste collection and environmental management of wastewater is also needed to address increasing local tensions and ensure longer-term sustainability of the response. This gradual shift away from temporary interventions is most appropriate in vulnerable localities where there is a high concentration of refugees and poor Lebanese. The response to new arrivals will continue to require temporary intervention, particularly in locations with limited infrastructure.

Poor drainage coupled with inadequate (or lack of) solid waste management systems present a problem in many low-lying areas. Without continued action by partners, flood-prone areas could become breeding grounds for vectors and inadequate human excreta facilities will increase risks of contamination of ground water (e.g. enhanced vector control activities in Akkar). 6,000 persons are estimated to reside in flood-prone areas that are at risk of enteric diseases.

Despite good knowledge of general hygiene principles among refugees, hygiene practices remain rudimentary in many settlements. Installation of sanitation and hygiene facilities must be accompanied by promotion of best practices in hygiene to reduce prevalence of diarrheal diseases. More focus will be on strengthening the communication plans, development of Information, Education and Communication (IEC) materials and monitoring the implementation of hygiene promotion. There will be a reinforced assessment of hygiene promotion barriers to devise ways, with community-generated solutions, to overcome these barriers.

3. RESPONSE STRATEGY

The WASH strategy for 2014 prioritizes:

- meeting critical and life-saving needs with short-term emergency interventions;
- improving sustainability and cost-effectiveness through the adoption of longer-term solutions which add value to and extend existing service provision; and
- ensuring the ability to respond rapidly and adequately to significant changes in needs such as those arising from a mass influx of refugees or disease outbreak through continued preparedness activities.

Activities will target geographical locations with high numbers of refugees, vulnerable hosting populations and non-existent or insufficient water and wastewater services. Interventions will focus on informal settlements (starting with the largest and most poorly serviced locations), formal settlements, collective shelters, collective centres, and small and individual shelters. The proposed activities are designed based on existing gaps, expected caseload, actor capacity, lessons learned and anticipated needs. Vulnerable groups, households and individuals (i.e. newly arrived refugees, female/child headed households, elderly or disabled persons and minors) will be assisted first.

Short-term activities such as water trucking will be minimized in view of its expense and limited added-value to existing systems. Wherever possible, partners will focus on communal projects that have high impact and strengthen local capacities identified in partnership with Water Establishments and municipalities. While the start-up costs of communal projects can be considerable, they will provide more cost effective and sustainable delivery of services over the medium-term and serve to mitigate tensions between refugees and local communities. The development and management of water and sanitation facilities will ensure that water bodies are not contaminated and key environmental health concerns are addressed.

By June 2014, a move to cash-based implementation for the provision of hygiene and baby kits will be considered against in-kind distribution currently on the basis of cost efficiency and the flexibility for refugees to meet basic needs. The WASH methodology will include gender and child protection concerns in programming through, for example, active female participation in WASH community structures, training of stakeholders on gender roles and setting up WASH facilities in non-formal education centres and child friendly spaces. Female involvement in the design phase of WASH interventions will ensure their concerns are fully integrated, such as ensuring adequate lighting and the proximity to and gender separation of facilities.

Monitoring and coordination of all WASH actors will be strengthened, and will follow a decentralized structure to ensure that responses target local needs. Partners will review coverage of critical needs regularly, while recognising that continuity in implementation is critical to fostering better relationships with local authorities, communities and beneficiaries. In the event of a funding shortfall, coordination structures will encourage partners to prioritize life-saving activities, and reduce the broader package of support.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. WATER - Affected populations are ensured with safe, equitable and sustainable access to a sufficient quantity of water for drinking, cooking and personal and domestic hygiene										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 1.1 Supply	322.800	31.100	622.100	650	National	17.535.791	4.547.526	11.370.568	1.617.697	ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam (PARD, UTOPIA), OXFAM NOVIB, RESCATE, SC Lebanon, Solidarités International, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, SAWA, PU-AMI, CISP), UNRWA, WV
Output 1.2 Storage	226.500	11.300	37.500	1.000	National	6.942.586	4.763.807	1.953.779	225.000	ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam (PARD, UTOPIA), OXFAM NOVIB, RESCATE, SC Lebanon, Solidarités International, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, SAWA, PU-AMI, CISP), UNRWA, WV

Output 1.3 Quality	169.800	1.400	97.800	1.400	National	4.899.336	4.210.784	688.552		ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam (PAR, UTOPIA), OXFAM NOVIB, RESCATE, SC Lebanon, Solidarités International, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, SAWA, PU-AMI, CISP), UNRWA, WV
Output 1.4 Water Management	99.200	1.810	104.100	-	National	1.931.302			1.931.302	GVC, SHEILD, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, OXFAM, SAWA, PU-AMI, CISP)
Objective 1						31.309.016	13.522.117	14.012.900	3.773.999	

Objective 2. SANITATION - Affected populations are protected from the spread of disease, and promoted with a safe, sanitary and hygienic living environment										
Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 2.1 Facilities	279.250	7.200	44.850	900	National	30.664.924	19.575.145	11.089.778		ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam (PARD, UTOPIA), OXFAM NOVIB, RESCATE, SC Lebanon, Solidarités International, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, SAWA, PU-AMI, CISP), UNRWA, WV
Output 2.2 Drainage	57.850	7.050	11.900	250	National	797.643	68.750	578.893	150.000	IOCC, Medair, SC Lebanon, Solidarités International, UN-Habitat, UNHCR (ACF, Intersos, UNHCR, WV, Oxfam PU-AMI, ACTED, CONCERN, CISP, MC, PARD, SHEILD)
Output 2.3 Wastewater management	76.750	18.600	64.750	350	National	3.077.753	308.143	1.942.235	827.375	ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam (PARD, UTOPIA), OXFAM NOVIB, RESCATE, SC Lebanon, Solidarités International, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, SAWA, PU-AMI, CISP), UNRWA, WV

Output 2.4 Solid waste management	253.500	21.850	282.150	850	National	8.689.756	4.100.620	4.589.136		ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam (PARD, UTOPIA), OXFAM NOVIB, RESCATE, SC Lebanon, Solidarités International, UN-Habitat, UNDP, UNHCR (ACTED, CONCERN, M-USA, PU-AMI, AVSI, WV, ACF, SHEILD, Oxfam, UNICEF (ACF, SI, CONCERN, GVC, WVI, SAWA, PU-AMI, CISP), UNRWA, WV
Output 2.5 Vector Control	34.000	11.250	9.300	150	National	461.429	186.415	275.014		ACTED, IOCC, Medair, SC Lebanon, Solidarités International, UNHCR (ACF, Intersos, UNHCR, WV, Oxfam, PU-AMI, ACTED, CONCERN, CISP, MC, PARD, SHEILD), UNRWA
Objective 2						43.691.505	24.239.073	18.475.057	977.375	

Objective 3. HYGIENE - Affected populations have reduced risk of WASH-related diseases through access to improved hygienic practices, effective community mobilisation to address harmful current practices, hygiene promotion, and delivery of hygiene products and services on a sustainable and equitable basis

Output	Targeted population by type (individuals)				Location(s)	Total Requirements Jan - June (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Partners
	Syrian refugees	Palestine Refugees from Syria	Affected Lebanese	Lebanese returnees						
Output 3.1 Hygiene Items	258.450	47.800	32.550	1.500	National	15.277.234	8.551.905	6.511.729	213.600	ACF, AVSI, CARE, CISP, CLMC, GVC, IOCC, IRD, M-USA, MC, Medair, Oxfam (PARD, UTOPIA), Oxfam NOVIB, SC Lebanon, SHEILD, Solidarités International, UNHCR (ACF, Intersos, SHEILD, CISP, PU-AMI, MC, Oxfam, AVSI, WWL, CHF, ACTED, IRD, M- USA), UNICEF (GOL, ACF, SI, CONCERN, GVC, WVI, Oxfam, SAWA, PU-AMI, UN-Habitat, UNRWA, CISP), WWL
Output 3.2 Hygiene Promotion	346.550	26.400	217.350	1.200	National	11.764.827	10.565.115	734.148	465.564	ACF, ACTED, AVSI, Care, CISP, GVC, IOCC, M-USA, MC, Medair, Oxfam, Oxfam NOVIB, RESCATE, SC Lebanon, SHEILD, Solidarités International, UNHCR, UNICEF, UNRWA, WWL
Objective 3						27.042.061	19.117.020	7.245.877	679.164	

Sector indicators	Target
# of individuals with necessary/standard storage containers	251.000
# of individuals with improved water supply at an adequate level of service	1.280.000
# of individuals with access to improved sanitation facilities	354.000
# of individuals living in IS (Informal Settlement) benefitting from reduced risk of flooding	65.000
# of individuals who have experienced an HP session	203.000

WASH - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total Requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	(US\$)
SECTOR GRAND TOTAL	102.042.581	56.878.210	39.733.833	5.430.538	100.381.756

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Education in Lebanon (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	3,076,400	2,585,000	491,400
ACTED	2,179,000	1,057,500	1,121,500
AVSI	59,000	29,500	29,500
CARE	3,936,338	1,968,169	1,968,169
CISP	641,000	320,500	320,500
CLMC	884,400	442,200	442,200
GVC	826,063	100,794	725,269
IOCC	2,272,350	1,136,175	1,136,175
IRD	390,000	200,000	190,000
MC	1,420,000	951,300	468,700
MEDAIR	5,343,585	2,283,685	3,059,900
MU	1,017,900	432,950	584,950
OXFAM	3,927,900	2,174,200	1,753,700
PU-AMI	1,748,866	874,433	874,433
RESCATE	587,500	362,500	225,000
SCI	3,395,300	1,697,650	1,697,650
SHEILD	1,214,000	744,000	470,000
SI	1,780,000	890,000	890,000
UNDP	7,000,000	2,300,000	4,700,000
UNHABITAT	3,245,000	1,535,000	1,710,000
UNHCR	58,927,973	30,516,808	28,411,165
UNICEF	90,104,520	45,052,260	45,052,260
UNRWA	4,202,242	2,265,457	1,936,785
WVI	4,245,000	2,122,500	2,122,500
Total	202,424,337	102,042,581	100,381,756

M. Lebanon Financial Requirements Summary

Table 1: Country Financial Requirements per Agency

Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
ACF	3,076,400	2,585,000	491,400
ACTED	14,616,300	6,970,200	7,646,100
Al Majmouaa	50,000	20,000	30,000
AMEL	1,396,804	803,477	593,327
AVSI	1,206,400	681,900	524,500
BBC	1,000,000	500,000	500,000
BC	975,700	487,850	487,850
CARE	7,681,118	3,408,177	4,272,941
CHF	1,551,990	825,990	726,000
CISP	641,000	320,500	320,500
CLMC	14,528,596	7,389,146	7,139,450
CONCERN	121,000	121,000	
CVT	200,000	100,000	100,000
DRC	32,715,000	18,349,000	14,366,000
FAO	11,767,500	5,383,750	6,383,750
FPSC	2,867,000	1,557,250	1,309,750
GVC	4,822,783	1,586,894	3,235,889
HI	9,432,220	5,132,220	4,300,000
HUMEDICA	500,000	250,000	250,000
HWA	1,545,750	778,250	767,500
IA	555,000	310,000	245,000
ILO	2,825,000	1,200,000	1,625,000
IMC	5,563,950	2,531,900	3,032,050
INTERSOS	4,243,600	2,149,600	2,094,000
IOCC	10,654,350	5,076,175	5,578,175
IOM	26,996,233	12,112,323	14,883,910
IRAP	167,000	68,500	98,500
IRC	7,186,750	3,561,000	3,625,750
IRD	1,275,444	627,444	648,000
LOST	84,520	40,020	44,500
MAKASSED	768,380	384,190	384,190
MAKHZOUMI	812,000	406,000	406,000
MAP	266,000	133,000	133,000
MC	8,302,747	5,025,797	3,276,950

Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
MEDAIR	18,801,855	7,426,255	11,375,600
MU	3,865,510	1,748,320	2,117,190
NRC	18,370,062	9,261,402	9,108,660
OXFAM	17,917,700	9,192,100	8,725,600
PCPM	6,411,000	2,227,000	4,184,000
PU-AMI	2,425,666	1,212,833	1,212,833
RESCATE	941,500	539,500	402,000
RET	2,770,000	1,395,000	1,375,000
RI	2,168,568	1,084,284	1,084,284
S GLOBAL	2,835,000	1,465,500	1,369,500
SAFADI	1,150,000	575,000	575,000
SCI	48,638,770	23,716,044	24,922,726
SHEILD	1,214,000	744,000	470,000
SI	4,156,000	2,062,000	2,094,000
SIDC	107,400	53,700	53,700
SIF	3,338,800	1,974,400	1,364,400
SOLIDAR	1,255,400	525,400	730,000
TDHI	1,535,700	384,000	1,151,700
UNDP	34,773,600	16,216,800	18,556,800
UNESCO	7,954,000	3,677,000	4,277,000
UNFPA	12,332,500	6,412,500	5,920,000
UNHABITAT	9,789,400	4,799,200	4,990,200
UNHCR	467,816,052	249,827,684	217,988,368
UNICEF	250,020,581	129,887,944	120,132,637
UNRWA	90,431,767	46,443,997	43,987,770
WCH	2,801,803	1,400,901	1,400,902
WFP	501,756,377	217,136,668	284,619,709
WHO	15,117,673	11,301,317	3,816,356
WRF	3,365,000	1,415,550	1,949,450
WVI	9,419,950	4,646,725	4,773,225
Total	1,723,878,169	849,629,577	874,248,592

Government requirements	Total 2014	Jan-Jun 2014	Jul-Dec 2014
MEHE	39,175,000	19,587,500	19,587,500
MoSA	125,921,373	72,376,636	53,544,737
Total GoL	165,096,373	91,964,136	73,132,237

Table 2: Country Financial Requirements per Sector

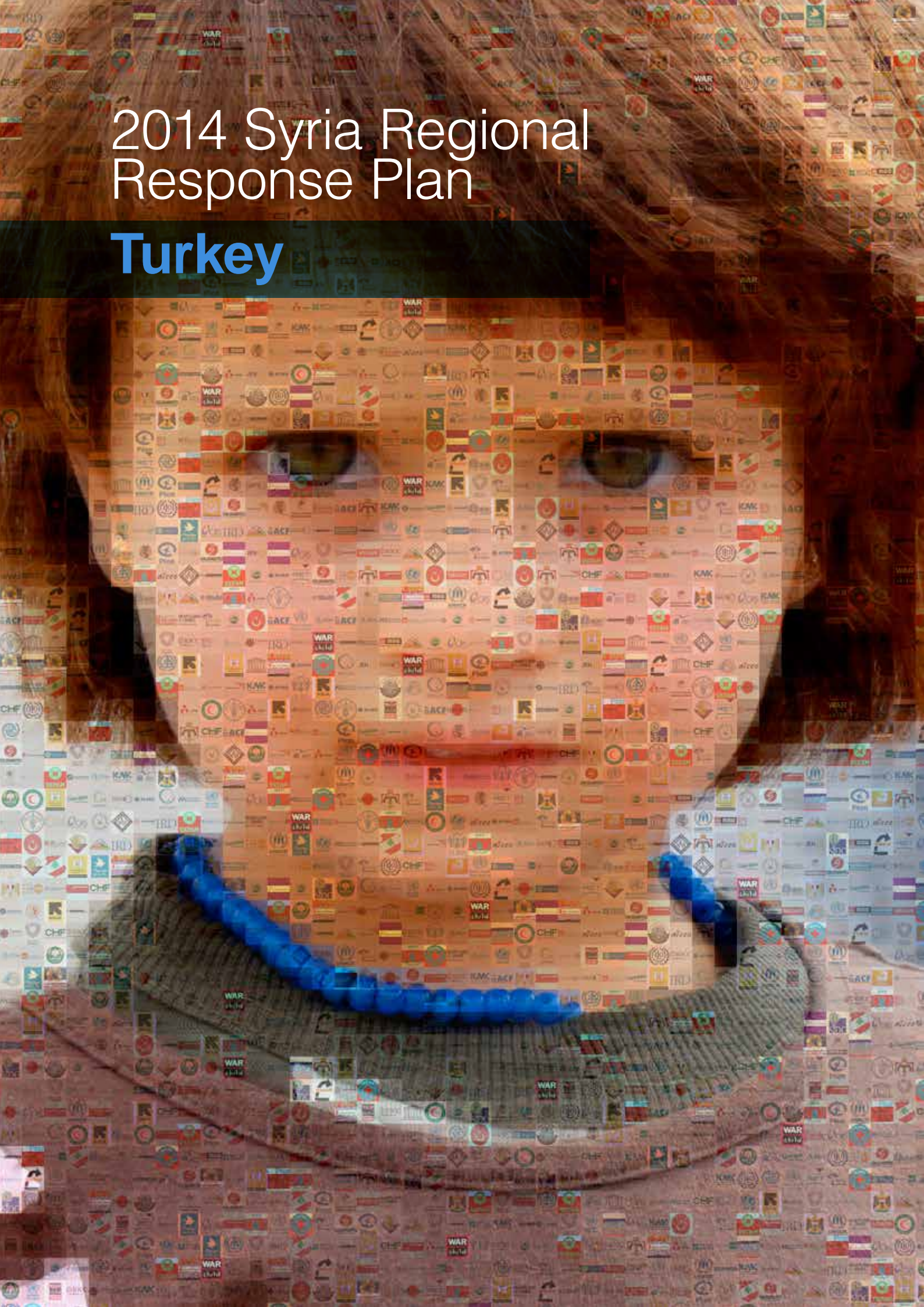
Sector	Total 2014	Jan-Jun 2014	Jul-Dec 2014
Basic Needs	149,090,198	77,444,514	71,645,684
Education	182,815,702	91,370,351	91,445,351
Food	550,332,352	239,635,116	310,697,236
Health	188,110,729	111,029,453	77,081,276
Protection	184,596,468	93,170,002	91,426,466
Shelter	168,083,696	86,584,732	81,498,964
Social cohesion and livelihood	98,424,687	48,352,828	50,071,859
WASH	202,424,337	102,042,581	100,381,756
Grand Total	1,723,878,169	849,629,577	874,248,592
Government requirements	Total 2014	Jan-Jun 2014	Jul-Dec 2014
Education	45,475,000	22,737,500	22,737,500
Health	69,066,373	34,590,636	34,475,737
Protection	45,555,000	32,136,000	13,419,000
Social cohesion and livelihoods	5,000,000	2,500,000	2,500,000
Total GoL	165,096,373	91,964,136	73,132,237

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2014 Syria Regional Response Plan

Turkey





2014 Syria Regional Response Plan

Turkey

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Turkey Response Plan

OVERVIEW

A. Executive Summary

The influx of Syrian refugees into Turkey has far surpassed initial projections. According to a recent survey conducted by the Disaster and Emergency Management Presidency (AFAD), the main Governmental agency responsible for the Syria operation, about 36 per cent of Syrian refugees in Turkey are accommodated in camps in 10 provinces located in the South and South East of Turkey, while the remaining 64 per cent are residing in various cities across the country¹. The number of Syrian refugees in camps stands at over 202,000². To date over 313,000 non-camp refugees have been registered, although the Government of Turkey (GoT) estimates that this number is significantly higher. Refugees living outside the camps face enormous challenges in accessing essential services and very often their living conditions are sub-standard. The GoT conducts registration and extends Temporary Protection to all Syrian arrivals.

Refugees residing in camps managed by AFAD are provided with food, shelter, education, basic services and medical assistance. Significant efforts are also being made at local levels to address the needs of the increasing numbers of the urban population through registration activities.

Arrivals of new refugees are expected to continue throughout 2014. Maintaining the same level of assistance in the camps and ensuring that those residing outside the camps are registered and have access to essential services, will pose major challenges to both the Turkish authorities and UN agencies. Additionally, this will also increase the economic and social burden on the host communities.

Turkey's asylum system will be undergoing a significant transition period in 2014 when the newly established General Directorate of Migration Management (GDMM) will be taking over all proceedings related to foreigners in the country as foreseen in the Law on Foreigners and International Protection. This transition taking effect in April 2014 will make the GDMM sole authority in the asylum field. Like other refugees granted protection in Turkey, Syrians under the Temporary Protection (TP) will be under the competency of the GDMM. In its protection related functions, the GDMM will be in charge of registration, status determination, access to rights, and establishment of effective coordination among the relevant institutions, civil society and international organizations in response to the Syrian emergency.

1 Source: Survey conducted by the Disaster and Emergency Management Presidency (AFAD), June-July 2013.

2 Data as of 12 November 2013. Source: the Disaster and Emergency Management Presidency (AFAD)

While the main foundations of the TP regime will be retained, e.g. open door policy and assurances for non-refoulement, the legal framework applicable to Syrians will be re-visited in 2014 through a generic Regulation on temporary protection to be adopted as the Council of Ministers Regulation.

This Regional Response Plan (RRP) envisages assistance to both camp and non-camp Syrian refugees as well as affected host communities in 2014. Based on arrival trends and as foreseen by the GoT, the number of Syrian refugees in Turkey is expected to reach 1,000,000 by the end of 2014, with 300,000 in camps and 700,000 outside camps. Arrival rates, however, are subject to considerable fluctuation as they greatly depend on the security situation in Syria.

In light of the above planning figures, the financial requirements within the Turkey chapter of the RRP from January to December 2014 will amount to US\$522,379,683. Costs related to the influx covered by the GoT have reached approximately US\$2 billion³.

UNHCR will continue to be the lead UN agency coordinating the response. The RRP highlights the planned activities of FAO, IOM, UNDP, UNFPA, UNHCR, UNICEF, and WFP in their respective areas of expertise and responsibility, with overall coordination support from the Office of the UN Resident Coordinator.

B. Context

In October 2011, the GoT declared a Temporary Protection (TP) regime for all Syrians, ensuring no forced return and no limit of duration of stay in Turkey. In April 2013, Turkey promulgated its first asylum law, the “Law on Foreigners and International Protection” regulating all proceedings for foreigners arriving in Turkey in need of international protection. It is foreseen that the TP regime will continue to be in force for all Syrians, including Palestine refugees and stateless persons ex-Syria in the country throughout 2014.

The rapid increase in the flow of new arrivals from Syria, especially during the second half of 2012, has not subsided. The majority of Syrian refugees are residing in host communities with Turkish relatives or independently in Turkish cities mostly in the provinces of Hatay, Gaziantep, Sanliurfa and Mardin. The remaining are in camps set up and run by AFAD where they receive protection and assistance. Women and children make up 75per cent of the refugee population, with 50per cent being children. About 17per cent of the head of households in camps and 22 per cent outside camps are women⁴. Since January 2013, the camps in Turkey have increased from 14 to 21 in 10 provinces hosting more than 202,000 Syrian refugees signifying a dramatic increase. It is expected that this number will increase to 300,000 by the end of 2014, with the possible creation of new camps or the expansion of current sites.

3 As indicated in the Survey conducted by the Disaster and Emergency Management Presidency (AFAD), June-July 2013.

4 Source: Survey conducted by the Disaster and Emergency Management Presidency (AFAD), July 2013.

In January 2013, the GoT started registering non-camp Syrians in coordination centres. The number of refugees registered living in urban areas has reached over 313,000. Estimates indicate that around 700,000 refugees will be living in urban areas by the end of 2014, with up to 20 per cent will be vulnerable and require assistance. As continued hosting by Turkish communities will increase during 2014, the already significant social and economic impact on Turkish host communities will also increase.

Most non-camp Syrians are not yet registered; hence important information on their vulnerabilities is lacking. The protracted nature of the displacement means that refugees are exhausting their resources and struggling to make ends meet, with some reportedly engaging in negative coping mechanisms. According to GoT figures, one out of four non-camp refugees lives in inadequate conditions or in an open area. About 62 per cent of Syrian refugees residing out-of-camp live together with at least seven people in sometimes very crowded conditions. These types of living conditions are facing Syrians in almost all provinces of Turkey. The GoT has provided free access to national health services, however, health demands are straining existing health structures. Children outside of the camps face obstacles in attending school, including the insufficient number of schools, teachers and lack of transportation. While Syrian refugees can access other national mechanisms, including child protection institutions and women shelters, the capacity of these services need to be strengthened to meet anticipated needs. Language barriers and lack of awareness create further difficulties in accessing national services, including on SGBV issues. While information gathering on SGBV is still being developed, refugees and others raise concerns about early and forced marriages, domestic violence as well as other negative coping mechanisms.

With regard to basic assistance needs, some local institutions and NGOs have supported the most vulnerable in their communities through soup kitchens, cash assistance and other non-food items. However, basic assistance and shelter needs for the non-camp population continue to grow with ever-increasing signs of destitution. Assistance interventions are therefore being planned for 2014 to provide urgent support to non-camp Syrians.

UN staff are present on a regular basis in all refugee camps and support all functions pertaining to the protection and assistance of persons of concern. UN agencies involved in the response have set up bilateral arrangements to have access also to non-camp refugees, and are working closely with NGOs in consultation with relevant local authorities to provide assistance.

It should be also noted that Turkey has seen an unprecedented increase in the number of non-Syrian asylum applications over the past 24 months. The number of non-Syrian asylum-seekers and refugees has exceeded 45,000 individuals, adding to the already significant strain on the country's protection environment. Migration management has also been challenging with increasing numbers of movements across the borders including at sea borders. In 2014, UNHCR estimates an increase in the arrival rates of 40per cent for Iranians, 50per cent for Iraqis and 100per cent for Afghans. Based on these assumptions, it is expected that there will be over 100,000 people of concern to UNHCR in Turkey in 2014, not including Syrians.

C. Needs, vulnerabilities and capacities

In Turkey, the Syrian refugee response is managed by the Government through AFAD, in collaboration with UNHCR and other UN agencies. Due to this particularity, no joint inter-agency assessment has been carried out in Turkey. However, between June and July 2013, AFAD conducted a profiling survey aimed at assessing the needs of the Syrian refugees and identifying their profile and vulnerabilities. The survey results were consulted extensively in the preparation of this RRP. In addition, key information was also obtained through regular missions by UN agency staff to field locations, discussions with local authorities, and desk reviews of reports received from national and international NGOs working in several urban areas. Individual agencies also collect their own programme monitoring data which served as a basis for the design of specific projects.

The large number of Syrian refugees has overwhelmed national structures and affected their capacity to cope with the needs of the population. Continuous pressure on the existing refugee camps in Turkey will remain a challenge as the number of arrivals increases. As the number of Syrians living outside camps also increases, resources and facilities of host communities will continue to be stretched. As an example, half of the refugee population stated that they or their family members are in need of psychosocial support. Half of the refugee population are children, with an estimated 4.5 per cent of children married. In this context, protection priorities include ensuring access to territory, addressing the psychosocial needs of refugees both in camps and urban areas, addressing child protection issues, including violence against children, early marriages, low school enrolment for the non-camp population, continued access to the national child protection services for unaccompanied and other children at risk, preventing and responding to SGBV and negative coping mechanisms, including through the increased engagement of NGOs in provision of services, awareness-raising on issues and the response mechanisms available, and strengthening national referral pathways, as well as a strategy to prevent children from enrolling in armed groups. Self-reliance and life-skills activities are needed for adults and youth to ensure dignified living conditions and reduce negative coping mechanisms, including child labour, and early marriage.

Access to education is a major concern. About 60 per cent of refugee children in the camps and only 14 per cent outside camps are attending school. The low percentage of children attending school especially in the urban areas needs urgent attention. Sixty-one per cent of non-camp refugees and 54 per cent in camps have primary school education or less. Prefabricated schools would need to be established where appropriate, catch-up classes provided for children who have missed out on school, intensive language training provided, and teacher supply issues addressed to promote school enrolment, attendance and retention in camps as well as non-camp settings. Vocational training and extra-curricular activities will have to be expanded in parallel.

Most refugees settled in camps generally arrive with minimum basic items and are provided with NFIs and shelter including tents or containers. This assistance will continue in 2014 for the expected new arrivals. One out of four non-camp refugees lives in inadequate conditions or in an open area, whilst about 62 per cent of them live together with at least seven people. As such, some form of shelter support to cover the most vulnerable persons identified within this group is needed, and can be achieved through the provision of cash support to help them meet rent obligations, as well as through shelter improvement support.

While up to 95 per cent of refugees regularly utilize camp health services, outside the camps services are accessed only by 60 per cent of non-camp refugees. Health concerns related to refugees include increased numbers of communicable and non-communicable diseases, access to health structures, medicine shortages, maternal & child health (MCH) and reproductive health, as well as injuries sustained in war, particularly of children. Access to medicines remains one of the few challenges for both categories of refugees. One third of pregnant women (13 per cent of the total population of women refugees) are registered with complications and in need of reproductive health services. Reproductive health and MCH services will have to be supported through the current health structures and community facilities.

Syrians living in camps are considered to be food secure due to the humanitarian assistance provided by WFP, the Turkish Red Crescent (TRC) and AFAD. However, without this assistance the vast majority of Syrian families in camps would not be able to meet their daily food needs. Preliminary WFP monitoring findings show that in camps where WFP operates, close to 80 per cent of families rely on humanitarian assistance to meet their daily food needs. The food needs of non-camp Syrians are less clear; while some families are able to afford private accommodation and meet their other daily needs, many families are becoming increasingly destitute. A small proportion of the most vulnerable non-camp families is receiving ad hoc assistance through existing social security structures and from NGOs.

It is expected that in 2014 the demand for continued hosting by Turkish families as well as public services will increase. On the other hand, the host communities already face economic pressure with increased household size, job losses and reduced opportunities for employment due to the crisis. It is therefore essential to continue to advocate for support to host communities to ensure also continued community-based protection.

D. Response strategy and priorities

Arrivals into Turkey have continued throughout 2013. In June 2013, the Government indicated that it expects to be hosting 1,000,000 refugees in the country by the end of the year. Although over 500,000 refugees have already been registered, most Syrians living outside camps have yet to complete the process. More refugees are expected to come to Turkey during the winter season. The projected total by end of 2014 is 1,000,000 Syrians, with 300,000 in camps and 700,000 outside camps.⁵

The Government maintains an open border policy for persons fleeing the conflict. However, the admission of Syrians without passports at official border crossings is generally linked to the availability of places within the camps, with exceptions, e.g. for those requiring emergency medical treatment. In the course of 2013 sporadic security incidents such as in the province of Hatay, and at the border area of Reyhanlı, prompted authorities to temporarily close specific borders. Given the restrictions at the border, many Syrians without valid passports seek irregular entry into Turkey, some with the assistance of smugglers. Those who enter irregularly are later able to regularize their stay through registration at one of the AFAD coordination centres in southeastern Turkey or by the Foreigners Police. UNHCR continues to advocate with the Government for unrestricted access to territory, and also to draw the attention of authorities to the protection risks that Syrians face when forced to resort to irregular entry.

When capacity allows, new arrivals are accommodated in the 21 government-run camps where they receive assistance and protection. In the course of 2013 some refugees have settled in open areas and in parks prompting the Government to set up transit centres within these localities. Since the rate of arrivals will continue in 2014 the Government will need support to improve its reception capacity.

The protracted nature of the displacement means that non-camp refugees are struggling to make ends meet, as many have exhausted their resources. Therefore, in 2014, interventions have been targeted to provide urgent support to specific sectors in camps where the Government has requested assistance and to non-camp Syrians who so far have not received any structured assistance.

5 The Government of Turkey foresees 1.5 million Syrians by end-December 2014. An enhanced registration capacity for non-camp Syrians is planned by the Government of Turkey in 2014. The planning figure for Turkey will be adjusted at the mid-year point which will reflect changes in the registration environment as implemented in 2014.

The strategic objectives for response in 2014 will be as follows:

- Access to territory and international protection for refugees fleeing Syria; strengthening community empowerment and self-reliance; reduction in the risks and consequences of SGBV experienced by women, girls, boys and men affected by the Syrian crisis; and child protection interventions for affected boys and girls; and seeking durable and protection solutions for those with urgent protection needs.
- Ensure access to formal and non-formal education for Syrian refugee children in camps and non-camp settings; and increase the quality of education for Syrian refugee children in a safe and secure learning environment, in camps and non-camp settings.
- Provide adequate shelter solutions, domestic needs for refugees in camps and urban areas and satisfactory conditions of sanitation and hygiene.
- Improve the health conditions of camp and non-camp and host community populations with a focus on vulnerable groups, including pregnant /delivering/ lactating women, adolescents, girls and boys, persons with disabilities and elderly.
- Provision of food assistance in camps - and if requested by the Government to vulnerable Syrians outside of camps - is considered to be a priority objective, as it is life-saving and prevents immediate risk of harm to health.
- Improve access to the most vulnerable host communities to quality essential services and access to livelihood opportunities for Syrian refugees living in host communities.
- Provide a durable solution in the form of resettlement or relocation to third safe country for refugees having urgent protection needs and/or compelling vulnerabilities, both as a protection tool and as a means of responsibility sharing with the host Government.

In 2014, humanitarian partners will continue to support the Government's efforts in the ongoing TP regime.

UNHCR will continue to work closely with all relevant Governmental interlocutors, providing guidance and expertise on refugee protection standards, including on registration, camp management (including community participation), voluntary return, the identification and response to persons with special needs, child protection and the prevention and response to SGBV. UNHCR will also expand its partnerships with NGOs to provide community outreach for the non-camp caseload. UNHCR will support the authorities to expand registration facilities, and to increase registration capacity through training.

UNHCR will continue to support the newly established General Directorate of Migration Management in the design of protection policies and effective delivery of protection to Syrian refugees.

UNICEF will continue to focus on positive social change approaches, including enhanced community involvement and to support the efficacy of coordinated child protection networks involving authorities, community representatives and other UN agencies. UNICEF will also undertake awareness on landmines/ERW and weapons for children and at-risk populations. IOM will strengthen the capacity of service providers through provision of psychosocial support

and trainings and will support authorities and partners in awareness raising, identification, and assistance of victims of trafficking.

UNHCR, WHO, UNICEF, UNFPA, IOM will aim at improving the health conditions of camp and non-camp and host community populations with a focus on vulnerable groups, including pregnant /delivering/ lactating women, adolescents, girls and boys, people with disabilities and the elderly in the provinces where Syrian refugees reside through provision and maintenance of essential health services, and interventions to reduce morbidity and mortality.

WFP will continue to partner with the TRC to provide humanitarian assistance inside camps through an electronic food card programme in coordination with AFAD.

Livelihoods and social protection models such as cash-for-work, or conditional cash transfers as well as short-term grants to small and medium-sized enterprises (SMEs) will be designed to respond to the short-term needs of host communities directly impacted by hosting Syrian families. Larger scale livelihoods initiatives focusing on improved value chains as well as business development for SMEs with financing components will be critical to address the lost livelihoods and social/public service provision.

Unlike previous RRP which were implemented directly by participating UN agencies, an important feature of this RRP will be the partnering of both national and international NGOs to ensure rapid response to a significant number of beneficiaries. Since mid-2013 there has been an increase in the number of recognized and accredited NGOs providing assistance to refugees in urban areas. To date two international NGOs, Danish Refugee Council (DRC), International Medical Corps (IMC), are operational in various locations in the South East of Turkey to assist Syrian refugees. Another eight international NGOs have been registered in Turkey and are exploring possibilities to expand their activities to support the non-camp Syrian refugees as well as affected host communities. In 2014, UN agencies will work closely with these NGOs and others that are accredited to ensure a wider delivery of assistance to all refugees especially those in urban areas.

E. Partnerships and coordination

The GoT's emergency response has been of a consistently high standard for new arrivals accommodated in camps, where they receive protection and assistance. All camps are administered by AFAD. The local authorities are heavily involved in the delivery of services for urban refugees and UNHCR closely monitors implementation of the legislation regulating Syrian refugees' rights. Since they are dispersed widely in the country, UNHCR is carrying out a mapping exercise on the services available to Syrian refugees in the cities hosting Syrian and non-Syrian refugee populations. UNHCR continues its close coordination with the main Ministries in the identification of gaps and challenges and for improvement of protection safeguards. UNHCR supports the national institutions in expansion of the available services to address the increasing needs in various sectors.

Coordination among the national institutions presents a challenge given the size of the operation and the number of actors involved in the process. UNHCR supports AFAD in its coordinating role through organizing coordination meetings convening Ministry representatives, central and local authorities, and camp managers to review gaps and to identify areas where cooperation is needed. In various camps, coordination meetings are also held regularly between the camp management and the agencies operating in site. Additionally, the GoT is making significant efforts to coordinate assistance that has been provided to the non-camp population. A profiling exercise was undertaken between June and July 2013 to identify the needs of non-camp Syrians to serve as a base line in determining assistance interventions. The survey results have been extensively used in the preparation of this document.

During the course of implementation of projects under the RRP, agencies liaise with the concerned line ministries through the Ministry of Foreign Affairs (MoFA) and AFAD keeping the Office of the UN Resident Coordinator and UNHCR fully informed and involved in the main developments and challenges encountered.

UNHCR continues to coordinate UN efforts to provide support and assistance to the GoT. These efforts have been expanded to cover field locations where most agencies are now operational and therefore close to the point of delivery of services. Field task force coordination meetings aimed at obtaining information on where assistance is being provided, coordinating this assistance and mitigating duplication, are now being held regularly with NGOs in various locations.

Similar coordination meetings are also taking place at the field level between UNHCR and Government counterparts on implementation progress, challenges encountered and changes in the operational environment. Currently several international and national NGOs are providing assistance to non-camp refugees in various locations. UNHCR has also tried to reach out to these organizations to ensure maximum coverage and impact on beneficiaries in non-camp settings. In 2014, UNHCR envisages the engagement of more actors in the provision of assistance to non-camp refugees as a number of NGOs have been given accreditation to fully operate inside Turkey.

F. Protection response

Lead Agencies	UNHCR		
Participating Agencies	IOM, UNFPA, UNICEF		
Objectives	<ol style="list-style-type: none"> 1. Refugees fleeing Syria are able to access the territory and receive international protection under a legal framework, 2. Community empowerment, engagement, outreach and self-reliance is strengthened and expanded, including through the provision of psychosocial support to men, women, boys and girls. 3. The risks and consequences of SGBV experienced by women, girls, boys and men affected by the Syrian crisis are reduced and/or mitigated. 4. Child protection interventions for boys and girls affected by the Syrian crisis in Turkey are strengthened and harmonized. 5. Durable and protection solutions are made available to refugees and other affected persons of concern from Syria. 		
Requirements from January to June 2014	US\$59,059,314		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$29,256,600	US\$19,035,216	US\$10,767,498
Total 2014 indicative financial requirements	US\$118,118,627		
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1. ACHIEVEMENTS AND CHALLENGES

Syrian refugees continue to benefit from TP in Turkey, with the Government being the provider of first response. The need for capacity-building and awareness-raising among officials remains high. UNHCR trained 519 AFAD officials on international refugee protection, including the main principles of temporary protection (admission, non-refoulement, standards of reception), registration, voluntary repatriation, civilian character of asylum, groups with special needs, referral mechanisms under the national legislation, community services, SGBV, participatory approaches and community involvement in camp management, and the code of conduct. With the participation of an external expert engaged by UNHCR, AFAD staff also received an introduction to post traumatic stress disorder and secondary trauma. UNHCR has continued its advocacy with the relevant authorities on protection issues that can arise in refugee settings. Standard Operating Procedures (SOPs) based on the available national prevention and response mechanisms, including on SGBV and UASC, were shared with the authorities.

UNHCR, with the support of UN agencies, contributed to AFAD's profiling instrument, which was used to carry out a survey of the non-camp refugees in July 2013. UNHCR has supported the Government to expand registration of urban Syrians by funding 23 mobile registration centres. The GDMM will be taking over registration of Syrian refugees as of April 2014 when the registration data will be transferred to their database. Since the GDMM will resume registration of Syrian refugees, UNHCR will be funding 11 mobile registration centres to be used by GDMM to register

and document the refugees in camps and outside camps. Given the challenges of a new institution to cope with these high numbers, UNHCR will provide material support for the GDMM's efforts to establish a cadre of registration officers. The training of new registration staff will be coordinated with the GDMM to ensure compliance with the procedural standards. UNHCR's guidance and support to the Government on registration standards has incorporated measures for identification of persons with specific needs (PSNs) disaggregated data by age and gender. These topics will continue to be the main elements of the trainings. UNHCR field teams regularly present in camps and urban locations in order to conduct advocacy and advice on all relevant refugee protection issues, including on AGD principles and refugee participation. Registration officers inside camps have also been trained to ensure timely identification of PSNs.

In terms of child protection, Turkey has a developed national legal system, which is applicable to Syrian refugees. UNHCR is working closely with the national child protection services to ensure that unaccompanied children are referred to and provided with accommodation in State-run facilities, and promotes that appropriate assessments are undertaken for children-at-risk. To date, unaccompanied Syrian children who have been identified by UNHCR or the authorities have been referred for accommodation and support to the State child protection services. However, challenges remain in the early identification and registration of UASC and other children at risk. Alternative care arrangements have been made in the camps for identified separated children, usually with extended family members. UNHCR has provided guidance to the camp authorities, including to social workers, on BIDs and other appropriate assessments for such cases. Lack of awareness of existing national mechanisms, lack of public information and language barriers are obstacles for children-at-risk to access services.

Turkish national law forbids marriages of persons under 18 years of age. Nevertheless, refugees and others have reported that early marriages are taking place in Turkey. While the issue is considered sensitive, local authorities and camp managers have taken steps, including legal action, to prevent early marriages in some instances. UNHCR has been receiving feedback from field staff that the interventions by local authorities in such incidents have increased after trainings organized by UNHCR. The trainings include information about legal framework regulating civil matters in Turkey with the emphasis on the accountability of the authorities in the prevention of and response to these violations. UNHCR has facilitated structured discussions with refugee women's committees in some camps on this issue, but more engagement with refugee community is needed, as well as awareness raising activities on the health, psychological risks of early marriage.

A Working Group on SGBV was established, chaired by the MoFSP, with AFAD, UNFPA, UNICEF and UNHCR to support the authorities to develop prevention and response strategies. UNHCR has regularly raised the issue of early marriage in the working group, and in coordination with UNFPA and UNICEF will help AFAD and the MoFSP develop tools and awareness-raising material. UNHCR is also funding a MoFSP and AFAD-led project to produce information materials, manuals and SOPs for Syrian refugees to strengthen prevention and response mechanisms.

UNFPA has carried out a Gender Equity and GBV needs assessment in four camps. In one camp, UNFPA carried out a pilot community-based GBV prevention and intervention programme involving

extensive training for camp staff, community meetings, and psycho-social intervention for the camp population. UNHCR has provided SOPs on the prevention and response to SGBV to the national authorities, including camp managers, and has included an SGBV component in its training for camp managers. Mechanisms to prevent and respond to SGBV, including domestic violence, exist under the Turkish Law to Protect Family and Prevention of Violence against Women, and while some legal measures have been taken in some cases to respond to cases of domestic violence in the refugee camps, in general, a lack of awareness of existing national mechanisms and public information, and language barriers are obstacles for women-at-risk in both the camps and non-camp settings to access services.

UNICEF has established Child Friendly Spaces staffed by trained youth workers and volunteers, facilitating recreational, sports and educational activities with over 7,500 youth and children in 17 camps.

To further support the psychosocial needs of the refugee community, UNHCR has supported the development of a project with the MoFSP and AFAD to expand the number and capacity of social workers, child development experts, and psychologists for both the camp and non-camp refugees. As part of this project, UNHCR will also assist AFAD to strengthen the resilience of its staff to cope with post-secondary trauma and burnout. International NGOs have established medical clinics that provide Mental Health and Psychosocial Support (MHPSS) services in some urban areas, and have trained refugees volunteers who help in identifying cases and referring them to the PSS services.

UNHCR has advocated for and supported the establishment of refugee committees, including women and youth committees throughout the camps. Seven of the refugee camps have women's committees, while in another nine camps there are women representatives in mixed-gender committees. Youth committees have been established in five camps. UNHCR meets regularly with the refugee committees and women's committees, and also attends the regular camp management/committee meetings. Members of the committees seek UNHCR's advices on various issues from time to time. The committees raise the issues affecting them, including women and youth issues, and also assist in identifying persons with special needs in the camp. Based on the needs assessment for disabled persons conducted by some of the committees and social workers under the supervision of the Camp Management, UNHCR supported 518 disabled persons with wheelchairs.

UNHCR supported the existing vocational training centres inside the camps by providing some of the needed items to ensure continuity of the projects aiming at building the capacity of refugees and strengthen their self-reliance. UNHCR also advocated for including both men and women in such programmes and helped in establishing an activity targeting men in one of the camps.

IOM supported the authorities with transportation of 8431 refugees within Turkey and assisted 77 third country nationals to repatriate.

Regionally, UNHCR has been working closely with States to provide resettlement or humanitarian admission as part of the broader protection response to refugees who have fled Syria. Given the specific context in Turkey, the correct identification and processing of those in need of resettlement has been a challenge and resettlement has been limited to a few exceptional cases. Substantial efforts will therefore be made to ensure proper case identification, refugee status determination and resettlement case preparation in order to enhance the response and facilitate a durable solution outside of the region for the most vulnerable. UNHCR has facilitated family reunification requests, including by conducting BID assessments for unaccompanied children, and liaising with the authorities to arrange exit permissions.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	300,000	300,000
Non-camp	700,000	700,000
Total	1,000,000	1,000,000

Although the GoT has a robust legal system and national legislation in place to ensure protection is extended to persons of concern, the large number of Syrian refugees has overwhelmed national structures and affected their capacity to cope with the needs of the population. Continuous pressure on the existing refugee camps in Turkey will remain a challenge as numbers of arrivals increase. In parallel, as the number of Syrians living outside camps also increases, host community resources will continue to be overstretched. According to the AFAD profiling survey, half of the refugee population stated that they or their family members are in need of psychological support. Half of the refugee population are children, with an estimated 4.5 per cent of them married. Child protection and SGBV activities remain key priorities and areas of engagement with the Government and NGOs.

Protection priorities include ensuring access to territory, addressing the psychosocial needs of refugees in both camps and urban areas, addressing child protection issues, including violence against children, early marriages, and low school enrolment for the non-camp population. There will activities to engage the youth to reduce the risk of recruitment into armed groups. Efforts will be made to prevent and respond to family separation including family tracing and reunification. Awareness on the risks of landmines/ERW and weapons; and preventing and responding to SGBV and negative coping mechanisms, including through the increased engagement of NGOs in provisions of services would be strengthened.

On-going advocacy, awareness raising and capacity building will continue with the relevant authorities and communities of concern on the prevention and responses for a variety of protection risks faced by children and adults, including early and forced marriages, survival sex, domestic violence, counter-trafficking and child labour. Self-reliance and life-skills activities are needed for

adults and youth to ensure dignified living conditions and reduce such negative coping mechanisms. Community empowerment requires further support through on-going promotion and support for refugee committees, including women, youth and elderly committees, inside camps, and through increased outreach to non-camp refugees in partnership with NGOs and the authorities.

3. RESPONSE STRATEGY

Humanitarian partners will continue to support national structures and strengthen the Government's efforts to extend protection to Syrian refugees through the implementation of the on-going TP regime. UN agencies will work together to support the Government's capacity to enforce its own legal framework by empowering existing national structures, strengthening services and acquainting all actors at the local level who are working with Syrian refugees with the existing legislation and prevention and response mechanisms, ensuring uniform and consistent implementation.

UNHCR will continue to work closely with all relevant Governmental interlocutors, providing guidance, training and expertise on refugee protection standards, including on registration, camp management, voluntary return, the identification and response to persons with special needs, child protection, the prevention and response to SGBV, and AGD principles and community participation. UNHCR field teams will continue to regularly provide guidance on these issues, while UNHCR's community services team will support established refugee committees in camps and the further expansion of women and youth committees throughout all camps. UNHCR will assist camp management to employ AGD principles and ensure community participation in the assessment, design and implementation of programmes in the camps. For the non-camp caseload, UNHCR will partner with NGOs to expand community centres, where legal counselling services, psychosocial support and referrals, vocational and language training will be made available.

As access to information and counselling services are essential for effective protection mechanisms, UNHCR will support the GDMM in its outreach activities. Community outreach activities will be broadened beyond publishing and dissemination of information leaflets to expansion of UNHCR Implementing Partners to several provinces hosting Syrian refugees. The IPs will be cooperating with the GDMM's branch offices in counselling and referral of Syrian refugees to the relevant mechanisms. A hotline that will be operated by the GDMM will provide counselling services to all refugees including Syrians and provide guidance to the national authorities in programme design.

Recognizing the important role played by NGOs in supporting the GoT's efforts, UNHCR will also support GDMM's coordination activities in this sector through organizing meetings and regular field visits and information-sharing.

UNHCR, UNFPA, IOM and UNICEF will train and provide technical support for MoFSP social workers and other service providers on psychosocial support and on SGBV prevention and response. Through a project with AFAD and the MoFSP, UNHCR will provide financial support to the MoFSP to increase the number of social workers, child development specialists, psychologists and interpreters in the camps as well as in 11 provinces hosting Syrian refugees. This project will

support identification of and counseling to SGBV survivors with effective implementation of referral mechanisms including legal and physical protection measures. Under the project, information leaflets addressing the Syrian refugee population on their rights and obligations will be produced with particular emphasis on early marriages, SGBV related issues, complaint mechanisms, available legal protection and prevention measures. The project will include participatory assessments to enhance community involvement and accessibility to resources and services. Refugee men and women will be mobilized, as well as community leaders, to promote education, raise awareness and to take part in participatory assessments to identify risks, problems and solutions. UNHCR will also support NGOs to provide legal counseling, case management, medical and psychosocial support to survivors of SGBV, and ensure appropriate referral to national protection services.

UNICEF and UN agencies will continue to focus on positive social change approaches, including enhanced community involvement, especially in providing psychosocial support, and to support the efficacy of coordinated child protection networks involving authorities and community representatives. UNICEF will continue its life skills and social mobilization program for children and adolescents in the camps, including children with disabilities, and will expand to non-camp settings, including awareness-raising on landmines/ERW and weapons for at-risk populations.

Through its support to the MoFSP, the number of child development experts will be expanded for both the camp and non-camp caseloads. Also as part of this project, UNHCR will continue to support the authorities to identify and refer unaccompanied children to the Child Protection Agency for accommodation and support, both through training for staff and by directly referring such cases. For separated children, UNHCR will support the Child Protection Directorate of the MoFSP to assess and monitor temporary care arrangements and to determine steps to be taken for the child's best interest upon the completion of a social investigation. Child development experts and social workers will assist, with the participation of refugee boys, girls, women and men, in identifying educational needs and obstacles in accessing education, and will work with the refugee communities to raise awareness and responsibility on social and legal issues. UNHCR will support family tracing by providing information to persons of concern on the procedures in Turkey and by transmitting such request to the Turkish Red Crescent. UNHCR will further facilitate family reunification by conducting BIDs for unaccompanied children in FRU procedures, and facilitating such procedure with the relevant embassies and governmental authorities. UNHCR will partner with NGOs to expand Child Friendly Spaces outside of the camps in areas hosting refugee communities.

IOM will strengthen the capacity of service providers through provision of psychosocial support and trainings and direct psychosocial assistance for Syrian refugees and will support authorities and partners in awareness raising, identification, and assistance to victims of trafficking.

In coordination with AFAD and UNHCR, IOM will continue the provision of transportation for refugees from camps to identified areas.

Through expanded registration facilities, the GoT will be able to ensure that all refugees are documented and that persons-at-risk are promptly identified and referred to and supported by existing national protection mechanisms. UNHCR will continue to provide advice on the

implementation of the existing referral mechanisms under Turkish law with respect to refugees under the TP. UNHCR will assist the authorities to develop mass information tools so that Syrian refugees are able to access information on available services. UNHCR will also support and capacitate NGOs to establish hotlines and help desks to provide counselling to Syrian refugees on the temporary protection, referral pathways and available services.

IOM will provide technical support on counter-trafficking and migration management.

Resettlement will be pursued in cooperation with the Government as a durable solution for those refugees identified as having the most urgent protection needs. UNHCR Turkey aims to submit up to 10,000 persons for resettlement in 2014, resources allowing. This would entail setting up a strong case identification mechanism focusing on the identification of the most vulnerable, conducting RSD, and submitting cases for resettlement in line with the resettlement criteria of States outside the region.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Refugees fleeing Syria are able to access the territory and receive international protection									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Access to territory improved, protection space preserved and risk of refoulement reduced	300.000	700.000	-	South East region and all provinces hosting Syrian refugees	2.360.950	900.000	417.700	1.043.250	"UNHCR , IOM (with AFAD, DGMM, MoI and NGOs)"
Output 2 - Quality of registration and profiling improved	300.000	700.000	-	South East region and all provinces hosting Syrian refugees	9.862.997	4.012.500,00	3.394.847	2.455.650	"UNHCR , IOM (with AFAD, DGMM, MoI and NGOs)"
Output 3 - Reception conditions improved	-	500.000	-	South East region and all provinces hosting Syrian refugees	1.803.860	647.350	1.156.510	-	"UNHCR , IOM (with AFAD, DGMM, MoI and NGOs)"
Output 4 - Access to legal assistance improved	300.000	700.000	-	South East region and all provinces hosting Syrian refugees	791.800	-	486.850	304.950	"UNHCR , IOM (with AFAD, DGMM, MoI and NGOs)"
Output 5 - Persons with specific needs receive support and services	45.000	180.000	-	South East region and all provinces hosting Syrian refugees	20.843.600	19.260.000	1.316.100	267.500	"UNHCR , IOM (with AFAD, DGMM, MoI and NGOs)"
Total					35.663.207	24.819.850	6.772.007	4.071.350	

Objective 2. Community empowerment, engagement, outreach and self-reliance is strengthened and expanded, including through the provision of psychosocial support to men, women, boys and girls

Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Increased community-based protection in camps	300.000	-	-	South East region and all provinces hosting Syrian refugees	3.083.718	-	2.755.470	328.248,00	“UNHCR , UNICEF (with AFAD, MoFSP and TRCS)”
Output 2 - Increased community-based protection in urban areas	-	611.600	600 service providers	South East region and all provinces hosting Syrian refugees	6.398.970	300.000,00	4.395.570	1.703.400	“UNHCR , UNICEF (with AFAD, MoFSP and TRCS)”
Output 3 - Information dissemination and awareness raising improved	159.000	700.000	-	South East region and all provinces hosting Syrian refugees	724.100	-	697.350	26.750	“UNHCR , UNICEF (with AFAD, MoFSP and TRCS)”
Total					10.206.788	300.000	7.848.390	2.058.398	

Objective 3. The risks and consequences of SGBV experienced by women, girls, boys and men affected by the Syrian Crisis in Turkey are reduced and/or mitigated									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Capacity and collaboration with relevant stakeholders increased	-	-	2000 relevant stakeholders	South East region and all provinces hosting Syrian refugees	736.850	-	-	736.850	“UNHCR, UNFPA, IOM (with AFAD, DGMM and relevant stakeholders)”
Output 2 - Identification and reporting opportunities improved	-	-	600 interpreters	South East region and all provinces hosting Syrian refugees	648.810	-	520.410	128.400	“UNHCR, UNICEF (with AFAD, DGMM and NGOs)”
Output 3 - Referral mechanisms strengthened	30	120	400 staff	South East region and all provinces hosting Syrian refugees	490.450	25.000,00	379.850,00	85.600	“UNHCR, IOM (with AFAD, NGOs and local authorities)”
Output 4 - Multi-sectoral response improved	300.000	700.000	-	South East region and all provinces hosting Syrian refugees	406.600	-	-	406.600	“UNHCR (with AFAD, and other stakeholders)”
Total					2.282.710	25.000	900.260	1.357.450	

Objective 4. Child protection interventions for boys and girls affected by the Syrian crisis in Turkey are strengthened and harmonized									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Capacity of child protection services strengthened [including establishment of a BID mechanism]	159.000	381.600	-	South East region and all provinces hosting Syrian refugees	2.200.850	2.147.350	53.500,00	-	“UNHCR , UNICEF (with AFAD, DGMM, Mol)”
Output 2 - Identification and reporting opportunities improved	159.000	381.600	-	South East region and all provinces hosting Syrian refugees	779.850	779.850	-	-	“UNHCR , UNICEF (with AFAD, DGMM, Mol)”
Output 3 - Referral mechanisms strengthened	159.000	381.600	400 staff trained	South East region and all provinces hosting Syrian refugees	1.615.450	-	-	1.615.450	UNHCR, UNICEF
Output 4 - Multi-sectoral response improved	59.000	381.600	-	South East region and all provinces hosting Syrian refugees	2.530.410	-	1.726.910	803.500	“UNHCR , UNICEF (with AFAD, NGOs, national authorities)”
Output 5 - Children with special needs receive support and services	8.000	12.000	-	South East region and all provinces hosting Syrian refugees	950.850	-	950.850	-	“UNHCR , UNICEF (with AFAD and NGOs)”
Total					8.077.410	2.927.200	2.731.260	2.418.950	

Objective 5. Durable and protection solutions are made available to refugees and other affected persons of concern from Syria									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Improved registration data and outreach allows for identification of protection vulnerabilities	45.000	180.000	-	South East region and all provinces hosting Syrian refugees	1.021.850	379.850	642.000	-	“UNHCR (with AFAD and DGMM)”
Output 2 - Protection cases benefit from expedited interventions, including RST if necessary	45.000	180.000	-	South East region and all provinces hosting Syrian refugees	433.350	379.850	-	53.500	“UNHCR (with AFAD and DGMM)”
Output 3 - Potential for voluntary return realized	90.000	360.000	-	South East region and all provinces hosting Syrian refugees	476.150	379.850	96.300	-	“UNHCR (with AFAD and DGMM)”
Output 4 - TCNs displaced from Syria receive humanitarian support	-	-	150 TCNs fleeing Syria	South East region and all provinces hosting Syrian refugees	90.000	45.000,00	45.000,00	-	“IOM (with AFAD)”
Output 5 - Public attitude towards Syrians improved, donor relations and coordination for the protection of Syrian refugees strengthened	300.000	700.000	-	South East region and all provinces hosting Syrian refugees	807.850	-	-	807.850	UNHCR
Total					2.829.200	1.184.550	783.300	861.350	

Sector indicators	Target
# of Syrians whose voluntary return interviews were observed	41.300
# of Syrians registered by the Government of Turkey	1.000.000
# of relevant authorities and partners trained on International Refugee protection principles and standards.	3.080
# of Syrian refugees (men, women, boys and girls) provided with psycho-social support.	91.925
# of community centers established or supported	11
# of partner, government and UN Staff trained on SGBV prevention and response and referral mechanisms	1.500
# of children and youth participating in targeted programmes	103.500
# persons undergo refugee status determination or other in-depth screening	30.000
# persons submitted for resettlement or humanitarian admission	10.000
# of refugees, partners and other organizations' staff trained on counter trafficking and referral mechanisms	1.000

Protection - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	59.059.314	29.256.600	19.035.216	10.767.498	59.059.313

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Protection in Turkey			
Agency	Total	Jan-Jun	Jul-Dec
IOM	3,480,000	1,740,000	1,740,000
UNFPA	400,000	200,000	200,000
UNHCR	96,593,188	48,296,594	48,296,594
UNICEF	17,645,439	8,822,720	8,822,719
Total	118,118,627	59,059,314	59,059,313

G. Education response

Lead Agencies	UNHCR, UNICEF		
Participating Agencies	IOM		
Objectives	<ol style="list-style-type: none"> 1. Ensure access to formal and non-formal education for Syrian refugee children in camps and non-camp settings. 2. Increase the quality of education for Syrian refugee children in a safe and secure learning environment, in camps and non-camp settings. 		
Requirements from January to June 2014	US\$29,229,068		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$13,811,349	US\$13,519,319	US\$1,898,400
Total 2014 indicative financial requirements	US\$62,219,416		
Contact Information	Shannon Kahnert, kahnert@unhcr.org Felicia Mandy Owusu, owusu@unhcr.org Brenda Goddard, goddard@unhcr.org Gemma Bennink, gbennink@unicef.org		

1. ACHIEVEMENTS AND CHALLENGES

Access to and the quality of education in camps and host communities remain critical issues in need of urgent interventions. Many Syrian children living in Turkey have now missed up to three years of education and are running the risk of becoming a lost generation.

For the school year 2012- 2013, the average enrolment rate for children, both boys and girls, in primary schools in camps was 60per cent. Estimates indicate that only approximately 14per cent of school aged children outside of camps are attending school. Schools outside of the camps are generally organized and run by municipalities and/or NGOs. In non-camp settings, the lack of schools and transportation to schools presents significant obstacles. Language related barriers and the lack of formal documentation may prevent enrolment in Turkish schools. The availability of qualified teachers remains a challenge both in and out of camps. Female and male Syrian teachers are working in schools both inside the camp as well as informal Syrian schools in urban areas, but are working on a voluntary basis. In all camps there are a number of vocational training courses, including language courses. NGOs have begun to provide vocational and language training in urban areas for non-camp refugees. Opportunities for extra-curricular activities also exist in the camps, whilst in non-camp settings these remain limited. Access to education for children with disabilities remains a significant challenge.

UNHCR facilitated focus group discussions with camp management, teachers, principals, students and parents on education, focusing on the main reasons for school drop-out and why children do not attend school in the camp. Lack of accreditation was one of the main reasons for drop-out. Early marriage was also given as a reason why some girls leave school, while for boys, some work to support the family.

Other participants cited cultural and psychosocial reasons for non-attendance to school. It has been noticed that both boys and girls have similar school enrolment rates and in some of the camps girls have higher enrolment rate.

The adoption of a revised Syrian curriculum, following authorization from the GoT, has expanded access and sustainability of education. As noted, the lack of certification and accreditation however is perceived to be one of the biggest obstacles for school attendance, and UNICEF is currently discussing short and long-term solutions for the recognition and certification of learning achievements with the Ministry of National Education (MoNE).

UNICEF has purchased educational materials, tents, prefabricated schools, and furniture and supplies for newly built schools. UNHCR has procured stationary items to support education the camps and encourage children to enrol into schools. In addition, UNICEF has provided training to camp teachers, and introduced teacher incentives and support mechanisms. Moreover, UNICEF carried out a back-to-school campaign and funded intensive Turkish language courses for students between high school and university. Child Friendly Spaces where recreational and extra-curricular activities are being conducted for children and adolescents have been established in most camps through TRC.

2. NEEDS AND PRIORITIES

Population group	Total expected number of children	Total expected number of school-age children	Total expected number of pre-school (3-5)age children	Targeted children for education interventions
Camp	159,000	103,350	23,850	127,200
Host Communities	636,000	413,400	95,400	305,280
Total	795,000	516,750	119,250	432,480

Based on the following assumptions: 53per cent of the population is children (0-18 years) and of that 65per cent is expected to be of school-age (6-17 years), and 15per cent are pre-school age (3-5).

The availability of schools and educational materials is a priority in ensuring access to education. Space needs to be identified and prefabricated schools built where appropriate. There is also a high need for learning materials to be provided to all students. Campaigns and targeted community-based activities need to be undertaken to promote school enrolment, attendance, and retention, in camps as well as non-camp settings. Cash support is needed for the most vulnerable families in non-camp settings, to encourage school attendance and to discourage parents from sending their children to work. Opportunities for vocational training and extra-curricular activities will need to be expanded in parallel. The impact of war on children is enormous, affecting children's well-being and consequently school attendance. Recreational activities to address and alleviate such

hardships need to be provided and links between the schools and the Child Friendly Spaces should be established. In order to increase school attendance in non-camp settings, transportation support for children needs to be provided to be able to go to school.

The availability of trained and qualified teaching staff is critical in ensuring quality education. Support and incentives for teachers need to be provided as teachers do not receive any salary, which severely affects their availability and motivation. Teachers and teaching personnel require training and a local system should be set up for ongoing support, including psychosocial and material. Teachers need strengthened skills to deal with the psychosocial impact of war on students, and need to know where to refer severely traumatized children. There is an acute need for literacy and catch-up classes for children whose education was interrupted by war.

3. RESPONSE STRATEGY

Recognizing that education is a central child protection response, the education response strategy will focus on ensuring that Syrian refugee children have access to formal and non-formal education both in camps and in host communities, as well as increasing the quality of education. The marked increase in Syrians living in non-camp settings has created an additional need to provide education and learning opportunities for Syrian children outside camps. Increased resources will be used to create access to quality education in non-camp settings.

In the camps, UNICEF will establish temporary learning spaces and procure prefabricated classrooms. Outside the camps, this will be done in several ways: by using the space in the Turkish schools, refurbishing existing schools, increasing the capacity of schools inside the camps to receive non-camp children, as well as by establishing new prefabricated schools targeting Syrian children, which could also benefit Turkish children in the future. In situations where WASH facilities are not provided in schools, UNICEF will work together with municipalities and governorates to provide adequate WASH facilities in all refurbished schools and pre-fabricated schools. WASH interventions in schools will also include teacher training in hygiene awareness and promotion, and the provision of soap to schools as required. UNICEF will also provide school-feeding in schools in non-camp settings and set up a system to provide cash support to the most vulnerable families. UNHCR and UNICEF will also coordinate to provide education materials to school-aged children. UNHCR and UNICEF will continue to support vocational training for adolescents and youth, extra-curricular activities, catch-up and language classes and ensure there are classes for children with disabilities in the schools, supporting these classes with material assistance, staffing and funding. Considering the vulnerability of children aged 3-5, UNICEF will also provide training and materials for pre-school educators and children in camps and host communities. Materials will include Early Childhood Development kits, which offer young children access to play, stimulation and early learning opportunities. IOM will also provide transportation for children from camps to schools and for children in host communities. UNICEF and UNHCR will conduct awareness-raising and outreach to encourage increased school enrolment of school-aged children.

In order to strengthen the quality of education for Syrian children, UNICEF, in collaboration with the education authorities and partners, will provide periodic, relevant and structured training for teachers and teaching personnel, additionally setting up a support and coaching system for teachers and teaching personnel. In the absence of salaries, UNICEF will continue to provide teachers with cash incentives. In coordination with the authorities, a monitoring system will be set up, not only to monitor school attendance and performance, but also to teacher's performance.

As part of its project with the MoFSP and AFAD, UNHCR will support social workers and child development specialists to work with the refugee community to identify the educational needs of the refugees and to assess why refugee children may not be attending school. Social workers and child development specialists will work with boys, girls and their parents to improve access to education and reduce drop-out. The project will focus on the inter-linkages between child protection and education, by identifying and addressing protection threats that may prevent children from attending school, including GBV, child labour, early marriages, recruitment of children into armed groups, and discrimination of disabled persons.

UNHCR will support NGOs to expand Child Friendly Spaces in municipalities hosting Syrian refugees, through which refugee children living in urban areas will be provided educational support in the form of catch-up classes, personal development of children programmes, and educational and instruction games.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Ensure access to formal and non-formal education for Syrian refugee children in camps and non-camp settings									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1.1 - Pre-school, primary, secondary and high-school education, enrolment and retention of Syrian children in camps and non-camp settings supported, including children with specific needs.	127.200	305.280	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	5.973.748	2.311.349	3.111.349	551.050	"UNICEF, UNHCR (with AFAD, MoNE and NGOs)"
Output 1.2 - Educational facilities constructed or refurbished, educational materials provided to Syrian children in camps and non-camp settings.	127.200	305.280	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	13.738.720	7.800.000,00	5.938.720	-	"UNICEF, UNHCR (with AFAD, MoNE and NGOs)"
Output 1.3 - Life skills, language training and vocational training for Syrians in camps and non-camp settings supported.	60.000	120.000	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	2.485.850	-	2.485.850	-	"UNICEF, UNHCR (with AFAD, MoNE and NGOs)"

Output 1.4 - Measures ensuring accreditation and recognition of school certificates of Syrian children put in place or supported.	119.250	286.200	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	883.350	-	-	883.350	"UNICEF, UNHCR (with AFAD, MoNE and NGOs)"
Total					23.081.668	10.111.349	11.535.919	1.434.400	
Objective 2. Increase the quality of education for Syrian refugee children in a protective learning environment, in camps and non-camp settings.									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 2.1 - Measures to improve capacity of teachers and quality of teaching taken or supported.	2.757	5.993	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	5.096.350	3.700.000,00	1.182.350	214.000	"UNICEF, UNHCR (with AFAD, MoNE and NGOs)"
Output 2.2 - Education monitoring system for Syrian children in camps and non-camp settings established or supported.	127.200	305.280	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	250.000	-	-	250.000	"UNICEF (with AFAD and MoNE)"
Output 2.3 - Syrian children and youth in camps and non-camp settings are supported with recreational, social and extra-curricular activities	127.200	305.280	-	"Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey"	801.050	-	801.050	-	"UNICEF, UNHCR (with AFAD, MoNE and NGOs)"
Total					6.147.400	3.700.000	1.983.400	464.000	

Sector indicators	Target
# of Syrian children enrolled in primary, secondary and high school in camps and non-camp settings.	432.480
# of Syrians in camps and non-camp settings, participating in vocational, language and life skills trainings.	180.000
# of educational facilities constructed / refurbished and accessible by Syrian children in camps and non-camp settings	30
# of teaching and learning materials provided to Syrian children in camps and non-camp settings	432.480
# of qualified teachers trained or supported	8.750

Education - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	29.229.068	13.811.349	13.519.319	1.898.400	32.990.348

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Education in Turkey (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
IOM	700,000	500,000	200,000
UNHCR	24,274,020	10,106,370	14,167,650
UNICEF	37,245,396	18,622,698	18,622,698
Total	62,219,416	29,229,068	32,990,348

H. Basic Needs and Essential Services response

Lead Agencies	UNHCR		
Participating Agencies	IOM		
Objectives	<ol style="list-style-type: none"> 1. Adequate shelter solutions are available for refugees in camps and urban areas. 2. Population has sufficient basic and domestic items. 3. Population lives in satisfactory conditions of sanitation and hygiene. 		
Requirements from January to June 2014	US\$60,855,140		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$28,335,700	US\$32,399,600	US\$119,840
Total 2014 indicative financial requirements	US\$134,259,380		
Contact Information	Shannon Kahnert, kahnert@unhcr.org Felicia Mandy Owusu, owusu@unhcr.org		

1. ACHIEVEMENTS AND CHALLENGES

Since January 2013 UNHCR has been assisting Syrian families accommodated in 21 camps with the provision of cooking facilities, including 34,760 hotplates, 39,500 mini-fridges and 36,260 cupboards, in coordination with AFAD and TRC. UNHCR has also provided a total of 8,000 kitchen sets including cooking pots, pans, and kitchen utensils to Syrian families. Some 18,500 tents were given to accommodate refugee families in camps; some to new arrivals and others for the replacement of the damaged tents. A total of 240,000 high thermal blankets are being provided to Syrian refugees as part of the winterization programme. UNHCR also procured 16,000 jerry cans, 40,000 sleeping mats, 80,000 medium blankets and 5 rub halls to address urgent needs. In addition, 518 wheelchairs were procured for persons with disabilities. Clothing (jeans and t-shirt) for some 65,000 children (age 2-17) were distributed in camps and 150,000 items of winter clothing will be provided.

IOM has been assisting Syrian refugees in the camps through distribution of essential non-food items (to date, 55,606 refugees have benefited from NFIs distributed through the TRC). Around 36,170 beneficiaries are using facilities provided to enhance WASH conditions in the camps through 25 container showers and water closets and nine dishwashing facilities established in the camps.

In coordination with the local authorities and AFAD, IOM provided four air conditioning units to health facilities serving Syrian refugees in Kirikhan where over 25,000 Syrian refugees are estimated to live.

A key challenge remains establishing harmonized vulnerability criteria as the majority of new arrivals are in need and detailed registration and vulnerability data is not available. Many non-camp refugees are not registered and therefore have not received NFI assistance. This remains

a challenge as their numbers exceed those in camps. It has been reported that one out of four non-camp Syrians is living in sub-standard conditions, therefore in need of NFI or cash assistance.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	300,000	100,000
Non-camp	700,000	200,000
New arrivals	450,000	450,000
Total	1,000,000	750,000

Although the total number of people in camps remains stable, new arrivals are transferred whenever space becomes available. All new arrivals are provided with NFIs and shelter including tents and containers. Although the GoT has indicated that the construction of new camps is not foreseen, the trend in arrivals has not decreased significantly, and it is therefore likely that more people will be accommodated in the camps. Ninety per cent of new arrivals in 2014 will be targeted and supported with basic NFI assistance should funding be available for Turkey through this document.

Over 300,000 non-camp refugees have been registered so far by the GoT. Although most of them are living in host communities or have rented apartments, they have not been provided with NFIs. The AFAD survey has indicated that one out of four non-camp refugee lives in inadequate conditions or in an open area. Therefore there will be a need to closely liaise with local authorities to identify these extremely vulnerable refugees and provide them with support to meet their basic needs. UNHCR has shared criteria for assessing vulnerabilities and persons with special needs with AFAD, which highlighted the need to target assistance in order to ensure that refugees do not have to resort to negative coping mechanisms such as child labour and survival sex. Non-camp refugees are exhausting their resources and struggling to make ends meet. Basic needs interventions are therefore being planned for 2014 to provide urgent support to vulnerable non-camp Syrians.

As refugees have lived in the camps for over two years now, hygiene conditions in some of the camps are moving below standard and will need to be enhanced in order to bring them back up to an acceptable level. To this end, water and sanitation improvements will be made including repair of drainage, maintenance of communal washing centres including hygienic toilets and hand washing facilities for children in schools. Guidance on WASH standards will also incorporate protection principles to ensure that facilities contribute to the protection of women, boys and girls in the camps.

Priorities

Based on a desk review, coordination meetings and feedback from the field, the basic need priorities will be as follows:

- Cover basic needs through provision of bedding, kitchen sets and hygiene materials.
- Cover some of the shelter and NFI needs of vulnerable persons identified throughout the year based on referral from local authorities and partners.
- Support the Government in providing shelter solutions for camp and non-camp Syrians.
- Cover winter needs for new arrivals in the camps and non-camp Syrian refugees through the provision/enhancement of shelter.
- Maintenance of water, sanitation and hygiene (WASH) services in camps.

3. RESPONSE STRATEGY

Ensure that new arrivals are provided with essential NFIs

As the GoT is managing the overall response to the Syria crisis, no joint inter-agency assessment was undertaken by UN agencies. Based on a desk review, observation and reports from agencies field staff and continuous discussion with AFAD, it is confirmed that the majority of refugees arrive in Turkey with few or no personal possessions and have no means to sustain themselves with basic needs. In addition to the above, according to the AFAD survey and profiling exercise, about 62 per cent of the refugees living out of camps live together with seven people in very crowded conditions in almost all provinces of Turkey. It is therefore paramount to ensure that these refugees are reached and provided with essential NFIs.

New arrivals in the camps are provided with household items including cooking facilities, dignity materials, blankets, mattresses. Almost all families in camps are provided with basic household items. This means provision of kitchen sets, bedding and clothing almost upon arrival. By receiving these essential NFIs, families are able to settle in new environments and gain a sense of normality.

UNHCR will provide support for continuous maintenance of existing WASH facilities and emergency preparedness planning capacity for AFAD key staff. UNHCR will also provide WASH services for people with special needs. Hygiene promotion and capacity building of refugees will be conducted. UNHCR will ensure continued coordination and monitoring in camps.

Support non-camp Syrians with shelter solutions

So far no assistance has been provided for non-camp Syrians with regard to rent subsidies and improving their living conditions. Taking into consideration their increasing numbers this has become a major objective for the GoT as well as UN agencies. UNHCR and partners will closely work with AFAD to identify the best way to provide shelter improvement including cash assistance.

Coordination with NGOs and local authorities

Several registered international and local NGOs have been providing NFIs and cash assistance in many provinces including Hatay, Gaziantep, Urfa and Kilis. UN agencies under the lead of UNHCR will ensure that effective coordination take place with the above partners to avoid duplication and to make sure that geographical areas are targeted equally. Concretely, coordination mechanisms will be established in camps under the leadership of camp managements and in non-camp locations to provide assistance to Syrian refugees. In order to reduce duplication of activities, a mapping of what agencies are doing in the provinces and governorates will be conducted and updated on a regular basis.

Age, Gender and Diversity (AGD) will be mainstreamed throughout the objectives of this sector. In this regard, as part of its response strategy, UNHCR will aim at undertaking focus group discussions (FGDs) and participatory assessment with non-camp refugees to understand their priorities and needs for NFIs. Therefore, FGDs or individual interviews will be carried out to target the topline trends in different needs of women, girls, boys and men and whether they face different barriers to accessing aid, to determine needs and whether the distributed goods met their basic needs. This participatory approach will be essential in ensuring that provision of NFIs will match the full range of different needs and vulnerabilities.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Adequate shelter solutions are available for refugees in camps and urban areas									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Emergency shelter is provided to Syrians in the camps and GoT is supported in providing shelter solutions for camp and non-camp Syrians.	100.000	-	-	Identified camps among 21 camps in Turkey	9.474.850	9.474.850			UNHCR (with AFAD)
Output 2 - Vulnerable households receive shelter assistance or grants	-	185.000	-	South East region and all provinces hosting Syrian refugees	10.083.850	2.000.000	8.083.850		UNHCR, IOM (with AFAD)
Total					19.558.700	11.474.850	8.083.850		

Objective 2. Population has sufficient basic and domestic items									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Household goods provided to camp, urban and newly arriving Syrians	100.000	700.000	-	Identified camps among 21 camps in Turkey South East Region with focus on Gaziantep, Urfa and Hatay	23.021.050	9.737.000	13.284.050	0	UNHCR, IOM (with AFAD)
Output 2 - Vulnerable households in camps and host communities supported with winterization needs	100.000	700.000	-	Syrian camps in the region, with focus on camps with new arrivals South East Region with focus on Gaziantep, Urfa and Hatay	2.000.000	2.000.000	0	0	UNHCR, IOM (with AFAD, Partners and NGOs)
Output 3 - Individual/family support provided to vulnerables referred by the local authorities, partners and NGOs.	-	10.000	-	South East region and all provinces hosting Syrian refugees	914.850	914.850	0	0	UNHCR (with AFAD, Partners and NGOs)
Total					25.935.900	12.651.850	13.284.050	0	

Objective 3. Population lives in satisfactory conditions of sanitation and hygiene									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Community sanitary facilities / latrines constructed	300.000	380.000	-	Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey	6.300.850	1.427.000	4.873.850	0	UNHCR, IOM (with AFAD)
Output 2 - Hygienic supplies or sanitary materials provided	100.000	700.000	-	Syrian refugee camps in the South-east of Turkey Provinces that host Urban Syrians in Turkey	9.059.690	2.782.000	6.157.850	119.840	UNHCR (with AFAD)
Total					15.360.540	4.209.000	11.031.700	119.840	

Sector indicators	Target
# of persons receiving shelter grants	185.000
# of persons receiving material support (blankets, bedding, kitchen sets, cooking facilities, jerry cans etc.)	800.000
# of sanitary facilities constructed or supported	52
# of persons provided with winterization items (high thermal blankets, electric heaters, plastic sheeting, winterization kits)	800.000

Basic Needs and Essential Services - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	60.855.140	28.335.700	32.399.600	119.840	73.404.240

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Basic needs and essential services in Turkey (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
IOM	7,000,000	4,250,000	2,750,000
UNHCR	127,259,380	56,605,140	70,654,240
Total	134,259,380	60,855,140	73,404,240

I. Health response

Lead Agencies	UNHCR, WHO		
Participating Agencies	UNICEF, UNFPA, IOM		
Objectives	<ol style="list-style-type: none"> 1. Coordination for equitable emergency health response, streamlining of decision making, monitoring and information management in partnership with local authorities and other actors 2. Continuation and strengthening of essential and equitable PHC services for Syrian refugee women, girls and boys and men in Turkey 3. Strengthening communicable diseases surveillance and response, including immunization, to mitigate morbidity and mortality among affected and displaced population 4. Strengthening health promotion, protection and intervention, including MCH and reproductive health services 5. Support effective management of non-communicable diseases and mental health services, including core SGBV services for Syrian refugee women, girls and boys and men in Turkey 		
Requirements from January to June 2014	US\$35,612,750		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$12,416,200	US\$16,320,550	US\$6,876,000
Total 2014 indicative financial requirements	US\$62,535,500		
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1. ACHIEVEMENTS AND CHALLENGES

AFAD reported that since the beginning of the crisis almost 1.6 million outpatient services were provided to Syrians in the camps, of which about 300,000 cases were referred to hospitals in various towns. Reportedly as of October 2013, more than 28,000 surgical operations were performed and 6,100 births were recorded in the hospitals. Supported state health response is in place and well-established.

UN agencies provide the requested technical support (including various technical guidelines, protocols and tools) to health partners to support the response of the Turkish health system (for example, list of the national reference laboratories, leishmaniasis protocols, health/hygiene kits, equipment and supplies, environmental and mental health guidelines, health assessment tools, chemical safety and training materials on chemical exposure and trauma care; health indicators; EWARN for communicable diseases; list of health education materials in Arabic and English; training service providers on emergency RH and SGBV). The mapping of health sector organizations providing assistance to Syrians in Turkey along the Turkey-Syria border has been conducted. The health sector agencies have provided technical support and assistance for development of

EWARN framework for communicable diseases along Turkey-Syria border. All received requests for assistance with supplies were met by UN agencies.

In order to ensure continuity of essential public health programmes and health services to the refugee population, the following priorities have been identified:

- **Health Coordination**
- **Primary health care services**
 - Prevention and control of communicable diseases and immunization
 - Mother and child health care and reproductive health
 - Mental health and psychosocial support, including for survivors of SGBV.
 - Chronic and non-communicable diseases
 - Emergency preparedness

There is a clear need for health coordination, information management and technical support due to the increasing number of health NGOs along Turkey/Syria border. The limited overall funding of health sector through the RRP5 challenged the planned implementation.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	300,000	300,000
Non-camp	700,000	700,000
Turkish and non-Turkish children under 5 years old (polio response)	1,300,000	1,300,000

Higher number of patients are requiring mental health and psychosocial support. The demand for access to health care is high, especially for psychosocial support. According to a survey carried out by AFAD, almost 55% of refugees report the need for psychological assistance. Few NGOs are currently working to support the health of refugees in a variety ways, including through the provision of mental health and psychosocial support services in some urban locations.

According to AFAD survey, access to medicines remains one of the few challenges for both categories camp and non-camp refugees. 55% of non-camp refugees and one third of camp population have difficulties in obtaining required medicines.

The AFAD survey showed that about 10% of refugees report problems with non-communicable diseases (NCD), including hypertension, diabetes, cancer, asthma, and renal failure.

Clinically micronutrient deficiencies and anaemia have been observed among children and pregnant and lactating women in the camps. There is most likely a need for supplementary feeding programs particularly for children under age five, as well as pregnant and lactating women.

The risk of outbreaks of epidemic-prone communicable diseases including tuberculosis cases is increasing. The EWARN for communicable diseases needs further support for refugees and the host community. Vaccination coverage for all antigens decreased considerably by the end of 2012 in Syria. This highlights the importance of further strengthening the immunisation programme to reach all refugees in Turkey. Following the reports of confirmed 13 polio cases in the Syrian Arab Republic on November 11, 2013 and as a part of the global and regional responses, WHO/UNICEF will provide immediate life-saving interventions to assist Turkish health authorities in vaccinations, surveillance, social mobilization, technical assistance and quality monitoring in high risk provinces.

According to AFAD survey, one third of pregnant Syrian women (13% of total women refugee population) are registered with complications and in need of RH services. Breastfeeding practise among refugees is still low. Reproductive and MCH health services (including SGBV) will be supported and strengthened through the current health structures and community facilities.

Since January 2013 there has been a move to strengthen the UN presence (UNHCR, WHO, UNICEF, UNFPA, IOM) in southern Turkey to support health coordination, existing relief operations and to monitor the trends on the Turkey-Syria border, such as health care provision through primary

and secondary care clinics and mobile facilities, delivery of essential medicines and medical supplies, need assessment, technical capacity support, etc. There are substantial technical and coordination gaps and health sector support requirements along Turkey-Syria border.

3. RESPONSE STRATEGY

Health sector activities will focus at the following:

1. Coordination for equitable emergency health response, streamlining of decision making, monitoring and information management in partnership with local authorities and other actors;

All necessary health information materials (situation reports, bulletins, who does what, where and when (4W), media reports, and progress reports) will be prepared and distributed. Five hundred health facilities will be covered through a coordination platform.

2. Continuation and strengthening of essential and equitable PHC services for Syrian refugees, including essential life-saving medicines and other medical supplies;

Based on mapping a priority of health facilities will be supported, including camp and non-camp health facilities are strengthened, including replacement of tent health clinics by containers to improve the quality of services. The foremost requirement is the integration of Syrian health professionals for service provision inside and outside the camps, with almost up to 3,000 health workers to be trained, integrated and supported.

3. Strengthening communicable diseases surveillance and response, including immunization, to mitigate morbidity and mortality among affected and displaced population;

Supporting the GoT in its efforts to develop an Early Warning and Response System (EWRS) to detect, assess, report and respond to health events and public health risks in line with the International Health Regulations (IHR) and the EU communicable disease surveillance system. Immediate life-saving polio vaccination activities will take place through three rounds of planned campaigns in high-risk provinces. Routine vaccination would be accelerated by increasing assistance with cold chain system and its necessary components.

4. Strengthening health promotion, protection and intervention, including MCH and reproductive health and psychosocial support services, including for survivors of SGBV;

Technical support for strengthening of safe-motherhood programs, Integrated Management of New-born and Childhood Illness (IMNCI), Basic and Comprehensive Emergency Obstetric Care and Essential New-born Care, family planning programs will be provided respectively through training and provision of medical equipment, supplies, hygiene, health/RH kits, service manuals and health education materials. Refugee children under five and their mothers are monitored to access a standard package of maternal, child health and new-born care services, including immunization. RH services will be ready to link and meet GBV program needs. Medical facilities inside and out of the camp be used to assist in outreach and information dissemination on available services for survivors of SGBV, as well as to provide information on the health consequences of SGBV.

5. Support effective management of non-communicable diseases and mental health services.

Further support and contributions to the efforts of the GoT will take place to provide effective, appropriate, efficient community based practice and referral services for persons with disabilities (including mental health) and NCD. Up to 1 million Syrian refugees will have access to mental health and psychosocial support services. Up to 100 health centres will be equipped with needed rehabilitative services and NCD and GBV services get strengthened accordingly. Lactating and pregnant women and children will receive nutritional support.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Coordination for equitable emergency health response, streamlining of decision making, monitoring and information management in partnership with local authorities and other actors									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Health service delivery supported	300.000	700.000	Health sector organizations and health care structure in Turkey	Refugee hosting provinces	787.050	78.500	78.500	630.050	“UNICEF, UNHCR (with AFAD, MoNE and NGOs)”
Output 2 - Strategic decision making is informed and coordinated	300.000	700.000	Health sector organizations and health care structure in Turkey	Refugee hosting provinces	589.600	66.000	51.000	472.600	“UNICEF, UNHCR (with AFAD, MoNE and NGOs)”
Output 3 - Planning and Strategy Development are in place	300.000	700.000	Health sector organizations and health care structure in Turkey	Refugee hosting provinces	552.100	41.000	63.500	447.600	“UNICEF, UNHCR (with AFAD, MoNE and NGOs)”
Output 4 - Contingency Planning and Preparedness	300.000	700.000	Health sector organizations and health care structure in Turkey	Refugee hosting provinces	551.050	53.500	53.500	444.050	“UNICEF, UNHCR (with AFAD, MoNE and NGOs)”
Total					2.479.800	239.000	246.500	1.994.300	

Objective 2. Continuation and strengthening of essential and equitable PHC services for Syrian refugee women, boys, girls and men in Turkey, including essential life saving medicines and other medical supplies, for filling gaps and unmet needs in the heal

Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Camp and non-camp based health and PHC facilities supported and strengthened	300.000	700.000	Up to 500 health facilities	Refugee hosting provinces	13.141.600	717.500	10.837.850	1.586.250	WHO, UNFPA, UNHCR
Output 2 - Capacity building support to PHC staff is provided	300.000	700.000	Up to 3,200 health workers	Refugee hosting provinces	250.000	-	-	250.000	WHO, UNFPA, UNHCR
Total					14.422.050	842.500	11.012.850	2.566.700	

Objective 3. Strengthening communicable diseases surveillance and response, including immunization, to mitigate morbidity and mortality among affected and displaced population									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Early Warning and Response System is supported.	300.000	700.000	-	Refugee hosting provinces	225.000	90.000	60.000	75.000	WHO
Output 2 - Capacity support to field epidemiology staff is provided	300.000	700.000	11 epidemiology centres	Refugee hosting provinces	275.000	105.000	70.000	100.000	WHO
Output 3 - Improved laboratory capacity	300.000	700.000	11 provincial laboratories	Refugee hosting provinces	125.000	37.500	60.000	27.500	WHO
Output 4 - Strengthened cold chain and vaccination	300.000	700.000	4,500,000	Three rounds will be implemented of polio and MMR, targetting a total of 6 million children between 0-59 months including Syrian and Turkish populations.	2.075.000	1.987.500	60.000	27.500	WHO, UNICEF
Total					2.700.000	2.220.000	250.000	230.000	

Objective 4. Strengthening health promotion, protection and intervention, including MCH and reproductive health services									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Available MCH, sexual and reproductive health care, including obstetric care and family planning	300.000	700.000	-	Refugee hosting provinces	3.267.500	1.050.000	1.075.000	1.142.500	WHO, UNFPA
Output 2 - Population and health staff have access to health promotion and education materials	300.000	700.000	-	Refugee hosting provinces	375.000	50.000	175.000	150.000	WHO, UNFPA, UNICEF, IOM
Output 3 - Children under five and mothers (including lactating mothers) are monitored with access to maternal, child health and newborn care services	300.000	700.000	-	Refugee hosting provinces	500.000	107.500	107.500	285.000	WHO, UNFPA, UNICEF
Total					4.142.500	1.207.500	1.357.500	1.577.500	

Objective 5. Support effective management of non-communicable diseases and mental health services									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Mental Health and psychosocial interventions supported	300.000	700.000	-	Refugee hosting provinces	190.000	92.500	40.000	57.500	WHO, IOM, UNFPA
Output 2 - Health centres equipped with needed rehabilitative services	300.000	700.000	Up to 100 centers	Refugee hosting provinces	4.249.850	4.174.850	50.000	25.000	WHO, UNHCR
Output 3 - People with disability benefit from rehabilitative services	300.000	700.000	-	Refugee hosting provinces	67.500	12.500	25.000	30.000	WHO
Output 4 - Health facilities providing NCD services are strengthened	00.000	700.000	Up to 100 centers	Refugee hosting provinces	3.757.350	3.627.350	35.000	95.000	WHO, IOM, UNFPA, UNHCR
Output 5 - Vulnerable population receive nutrition support	100%	100%	Lactating and pregnant women and children	Refugee hosting provinces	3.603.700	0	3.303.700	300.000	UNICEF
Total					11.868.400	7.907.200	3.453.700	507.500	

Sector indicators	Target
# of health and other coordination meetings conducted	50
# of camp and PHC facilities strengthened	500
% of people covered by assisted immunisation campaigns (polio, measles, etc.)	100%
# of health staff trained on IMNCI, BEmOC, ENC, MISP	4.000
# of health staff trained on mental health and psychosocial assistance	3.000

Health - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	35.612.750	12.416.200	16.320.550	6.876.000	26.922.750

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Health in Turkey (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
IOM	450,000	225,000	225,000
UNFPA	8,900,000	4,450,000	4,450,000
UNHCR	35,663,100	21,576,550	14,086,550
UNICEF	10,067,400	5,513,700	4,553,700
WHO	7,455,000	3,847,500	3,607,500
Total	62,535,500	35,612,750	26,922,750

J. Food response

Lead Agencies	WFP		
Participating Agencies	FAO, UNHCR		
Objectives	<ol style="list-style-type: none"> 1. Prevent the loss of lives and livelihoods through the provision of humanitarian food assistance to registered Syrians in Camps and if requested by the Government, to vulnerable Syrians outside of the camps. 2. Contribute to the livelihoods of the families living in the refugee camps by improving the awareness on diet at family level and by providing know-how for horticulture production with limited land and water which will be crucial at the time of returning to Syria. 		
Requirements from January to June 2014	US\$63,738,380		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$63,488,380	US\$0	US\$250,000
Total 2014 indicative financial requirements	US\$127,476,760		
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1. ACHIEVEMENTS AND CHALLENGES

In October 2012, WFP started an Electronic Food Card Programme in partnership with the TRC whereby beneficiaries are provided with one electronic card per household, uploaded with 80 Turkish liras (approximately US\$40 per person) per family member per month redeemable in selected shops to procure food commodities excluding junk and luxury food items, tobacco and alcohol. The ration is sufficient to support a well-balanced diet of at least 2,100 kcal per person per day. The programme is implemented in close coordination with local camp managers and AFAD.

WFP monitoring results show that Syrians in WFP/TRC supported camps are generally food secure, with 90per cent having acceptable food consumption scores and undertaking low levels of negative coping strategies. As of the end of September, WFP had distributed over US\$30 million through the e-food card programme in Turkey resulting in a positive economic impact on local host communities, as 100per cent of the funds transferred to beneficiaries are spent in shops that are owned, managed and run by local retailers.

Under RRP5, WFP was requested by the Government to scale up assistance to reach all Syrians in camps, however, due to funding constraints, WFP was only able to provide assistance in fourteen of the camps reaching approximately 115,000 Syrians (60per cent of the current camp population).

In response to the primary challenge of inadequate funding currently constraining WFP/TRC programme expansion, AFAD proposed to cost-share the food ration to Syrians in all camps whereby, the WFP/TRC e-food card transfer would reduce from 80 to 60 Turkish liras and AFAD would allocate 20 Turkish liras to the AFAD e-card for food purchases, thereby ensuring that beneficiaries will continue to receive 80 Turkish liras worth of food entitlement every month. WFP and TRC must ensure pre-requisite requirements are in place for a proper implementation of the programme expansion with new cost-sharing arrangements and, therefore, would only be able to consider commencing its implementation in January 2014.

In order to conduct the WFP-pilot for food assistance outside of camps, there will have to be a funding commitment by the Turkish Government or the international community to support a large-scale programme of assistance outside camps following the pilot. Similarly, the FAO-planned horticulture activities inside and outside camps were unable to be implemented under RRP5 due to insufficient funding.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	300,000	300,000
Non-camp	700,000	4,000
Total	1,000,000	304,000

Provision of food assistance in camps (and if requested by the Government to vulnerable Syrians outside of camps) is considered to be a Priority 1 Objective, as it is life-saving and prevents immediate risk of harm to health. Under RRP6, it is expected that there will be 300,000 Syrians in camp from January to December 2014, and this entire population is expected to be vulnerable and will be assisted with a monthly ration of 60 Turkish liras per person from WFP (see more below on voucher value). In addition, WFP will assist some of the most vulnerable Syrians, living outside of camps in Turkey, with a pilot programme, if requested by Government. This population will also be selected based on need and only households that are highly vulnerable to food insecurity will be targeted.

3. RESPONSE STRATEGY

Food Assistance

Populations in camps

In conjunction with AFAD and in line with needs, WFP and its partner TRC will seek to provide assistance to the full estimated camp population of 300,000 refugees during 2014 with the existing modality of electronic food card assistance.

Beneficiaries will receive a food assistance entitlement of 80 Turkish liras per person per month through a cost-sharing agreement with AFAD whereby: 60 Turkish liras will be allocated to beneficiaries' WFP/TRC e-food card and an additional 20 Turkish liras from AFAD for food purchases will be allocated through AFAD's own delivery mechanisms.

Throughout 2014, WFP, TRC and AFAD will continue working with shop owners to ensure fair prices and availability of quality food items in the shops in the camps or their vicinity where refugees redeem their e-vouchers.

While this RRP reflects the total needs of camp populations, the Government has so far met the food assistance needs in camps where WFP is not operating. A close working relationship will be required to ensure that donors, the Government, WFP and TRC can ensure continued and uninterrupted assistance based on the requirements set out in this RRP.

Populations outside camps

WFP and the Government are in ongoing discussions about the potential provision of food assistance for vulnerable Syrians living outside of camps in Turkey. The Government has specifically advised WFP that the primary focus of WFP support should be to populations inside camps. Nonetheless, given the dynamic nature of the crisis and the evolving nature of needs, WFP stands ready to support the Government should assistance at this level be requested. This RRP includes a pilot programme which would allow WFP to support the Government with technical assistance and to trial a modality of assistance that could be scaled up if adequate funding was made available. In order for WFP to provide assistance outside camps, a detailed targeting exercise would need to be undertaken to assess the number of food insecure households and to determine which households are the most vulnerable; to this end, a needs assessment has been budgeted as part of this pilot. However, technical details in relation to the design of the programme have not yet been determined.

Micro Gardening

The FAO micro-gardening project aims at improving refugees' diet through a holistic approach that takes into account production, preparation and composition of nutritious food. The Ministry of Food, Agriculture and Livestock and more specifically its Department of Training, Extension and Publication and AFAD are the main partners.

Links will be established with relevant Ministries, and the project will draw on the national knowhow and expertise from Government services from Department of Training and Extension at central and provincial level (MFAL), i.e. to prepare the training module(s), training of trainers, management of the Demonstration and Training Centre (s) and for the training of the beneficiaries.

Activities will be planned in consultation with UNHCR and WFP in order to ensure the full complementarity. Finally collaboration will be established with the camp management to ensure the supervision and daily maintenance of activities.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. Prevent the loss of lives and livelihoods through the provision of humanitarian food assistance to registered Syrians in Camps and if requested by the Government, to vulnerable Syrians outside of the camps									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Food assistance provided to Syrians in camps and cash injected in local economies and host communities through a food assistance programme that links the redemption of vouchers to local shops or through shops installed in camps by local retailers.	300.000	-	-	In all camps hosting Syrian refugees	63.488.380	63.488.380	-	-	WFP, Turkish Red Crescent Society and AFAD
Output 2 - Food assistance provided to the most vulnerable population outside of camps based on the findings of a Food Security Vulnerability Assessment.	-	-	-	Pilot area with high concentration of vulnerable Syrians, TBC	0	0	-	-	WFP, TBC, Turkish Red Crescent Society and AFAD
Total					63.488.380	63.488.380	0	0	

Objective 2. Contribute to the livelihoods of the families living in the refugee camps by improving the awareness on diet at family level and by providing know how for horticulture production with limited land and water which will be crucial at the time of returning to Syria

Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1- Training modules on "GAP for small scale and microgarden systems" and "nutrition, healthy diet and food safety" developed and implemented.	-	-	2.000	Gaziantep, Hatay, Kilis and Saniurfa	250.000	-	-	250.000	FAO, AFAD, Ministry of Agriculture
Total					250.000			250.000	

Sector indicators	Target
# of Syrians inside camps that receive food assistance	300.000
# of Syrians outside of camps receiving food assistance	0
# of Syrian families that receive horticulture training	2.000

Food - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	63.738.380	63.488.380	0	250.000	63.738.380

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Food in Turkey (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
FAO	500,000	250,000	250,000
WFP	126,976,760	63,488,380	63,488,380
Total	127,476,760	63,738,380	63,738,380

K. Livelihoods for Host Communities and Syrian Populations response

Lead Agencies	UNDP, UNHCR		
Participating Agencies	FAO, IOM, UNFPA		
Objectives	<ol style="list-style-type: none"> 1. The most vulnerable host communities benefit from improved access to quality essential services and access to livelihood opportunities, thereby ensuring that an increased number of refugees benefit from community-based protection. 2. Syrian refugees living in camps and in host communities benefit from access to livelihood opportunities 3. Restoration of the agricultural livelihoods of rural communities hosting Syrian refugees through the provision of short-term subsidies for key agricultural inputs and capacity development in good agricultural practices. 		
Requirements from January to June 2014	US\$8,778,000		
Prioritized requirements (Jan-Jun)	Life-saving or preventing immediate risk of harm	Preventing deterioration of vulnerabilities	Capacity-Building or Resilience
	US\$0	US\$5,028,000	US\$3,750,000
Total 2014 indicative financial requirements	US\$17,770,000		
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1. ACHIEVEMENTS AND CHALLENGES

With the majority of the Syrian refugees living in urban settings, it has become a priority to assess their socio-economic situation and to develop targeted urban livelihood programmes. As part of the RRP6 process, UN agencies will work to strengthen the coping mechanism of Syrians both in camp and non-camp settings and to support affected host communities focusing on livelihood assistance.

The majority of Syrian refugees have no legal right to work in Turkey, which represents an obstacle to addressing their livelihood needs. Nevertheless, important developments occurred with regard to the health sector: in July 2013 the Ministry of Health amended the 'Regulation on Procedures and Principles for Employment of Foreign Health Personnel in Turkey' in order to facilitate employment of Syrian health professional service providers in the camps.

Furthermore, vocational classes are taking place in several camps aimed at building the capacity of refugees and strengthening their self-reliance, with a growing number of students enrolled. These courses are given in several disciplines e.g. computer, hairdressing, sewing, Turkish and English language, and are proven to be beneficial to camp residents also in terms of income generating activities for refugees. UNHCR supported the existing vocational training centres inside the camps by providing some of the needed items to ensure continuity of the projects.

There are two main groups of host communities impacted by the Syrian crisis from an economic perspective: those who lost their jobs and livelihoods (e.g. with decreased border trade and closed factories) and are indirectly affected from social and economic perspectives, and those who host the Syrian refugees in their houses. Both groups are increasingly affected by the current and protracted situation. Smallholder families farming within 5 km of the Syria border in Gaziantep, Hatay, Kilis and Saniurfa Provinces have lost more than half of their annual household income as a result of the Syria crisis.

It has been observed that there will be more challenges in the context of social life, economic, social and health services, particularly women's situation in and out of the camps; increased GBV cases, including early and forced marriages, survival sex, religious marriages as second wives, and child labour. This is because most of the families are headed by women and the unavailability of employment and livelihood opportunities makes them vulnerable to all the above.

In addition to the social challenges, economic concerns arise as refugees are working informally in the region making the job market more competitive, which sometimes results in tense relations between the host community and the refugees. Information on the impact of host communities is mostly anecdotal since no formal assessment has been made to estimate the social and economic impact on host communities.

2. NEEDS AND PRIORITIES

Population group	Population in need	Targeted population
Camp	300,000	
Non-camp	700,000	5,000 (1,000 families)
Turkish Nationals in Host Communities		20,000 (4,000 families)

The projected Syrian population in Turkey by the end of 2014 is 1.0 million; the projected Syrian urban population is around 700,000. This increases the social and economic pressure on the Turkish host communities, which is already estimated to be significant. Therefore the need to release the pressure on the Turkish communities, by developing targeted strategies, is urgent to ensure continued community-based protection.

To date, no comprehensive assessment of the refugees' socio-economic situation has been conducted, which is crucial in order to develop a relevant, targeted, and efficient response strategy. To this end, an assessment study needs to be carried out aimed at understanding the challenges refugees face, their skills, knowledge and resources, as well as the needs of the market in order to form the basis for urban livelihood programmes.

Regarding host communities, a study that assesses the impact of the crisis, including social, economic (low paid and informal workforce), and health (RH services, maternal and child health services) consequences has not yet been conducted (with the exception of FAO study that focuses mainly on the agricultural/rural sector). The available information on the impact on host community is mostly anecdotal and received from the Government. Therefore to assess the need for and the scale of the interventions, a preliminary assessment will have to be conducted. On the other hand, both the GoT and the business community (from Southeast Anatolia) increasingly mention the impact on the livelihoods of the host communities as well as the social/basic services they receive such as water and social services.

3. RESPONSE STRATEGY

UNHCR will continue to support vocational training courses and related activities across the camps through the provision of vocational training materials and facilitating the sharing of good practices across camps.

UNHCR will aim at building on good practice in the camps in respect of supporting access to skills and vocational training activities for the non-camp refugees. It is envisaged that among others, such programmes will be carried out in community centres with the support of identified NGO partners. UNHCR will prioritize women and youth in such programmes and empower them to increase their access to knowledge, resources, and therefore strengthen their self-reliance.

UNHCR will also expand its partnerships with NGOs to provide community outreach for the non-camp Syrians to identify persons with special needs or at risk, and to design programmes and livelihoods protection models for them, using an AGD approach to ensure refugees are able to participate in identifying needs and responses. Focus group discussions will be conducted with women, men and refugee youth. This participatory approach will be essential in defining their skills as well designing tailor made activities which will match the full range of different needs and competencies.

Short term response to increase the income of Turkish families/communities hosting Syrian populations

It is expected that in 2014 the Syrian urban population will increase significantly, increasing the demand for continued hosting by Turkish families as well as public services. The host communities already face economic pressure with increased household size, jobs losses and reduced opportunities for employment due to the crisis. To address this issue, livelihoods and social protection models such as cash-for-work, or conditional cash transfers as well as short-term grants to small and medium-sized enterprises (SMEs) will be designed to respond to the short-term needs of host communities.

Opportunities generated to create new livelihoods for the host communities and Syrian refugees and for rehabilitation of social infrastructure

To respond to the demand communicated by the GoT, public works related to rehabilitation/upgrade of social infrastructure will be undertaken to both increase the quality of public services provided for both Turkish and urban Syrian populations, but also to create opportunities for employment. Larger scale livelihood initiatives will be critical to address the lost livelihoods and social/public service provision.

These initiatives will be designed to complement the work of UN Agencies. IOM, in coordination with local authorities will look at livelihood assistance for Syrian refugees and their host communities. Several activities will also be designed to empower refugee and local women. Separate and combined empowerment trainings on gender equality, violence against women, maternal and child health, and communication skills will be developed and conducted in the region by experts from Syria and Turkey.

Recovery and rehabilitation of smallholder agricultural production and marketing in the impoverished Syria border areas of Turkey.

Priority will be given to improve farm incomes through reduced agricultural input costs and increases in crop and livestock production. Household income generation for affected farming families will be enhanced through increased opportunities in food processing, packaging, storage and marketing. Additionally, the capacity of stakeholders will need to be built with targeted programmes to financially and environmentally sustain the project's interventions.

4. SECTOR RESPONSE OVERVIEW TABLE

Objective 1. The most vulnerable host communities benefit from improved access to quality essential services and access to livelihood opportunities, thereby ensuring that an increased number of refugees benefit from community-based protection									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Short-term initiatives supported to improve the livelihood and income of the Turkish communities and families hosting urban (out-of-camp) Syrian populations	-	-	-	2,000 Turkish families in communities hosting Syrian citizens	1.800.000	-	1.800.000	-	UNDP, IOM, Local Governorates, Municipalities and Employment Agencies
Output 2 - Opportunities created to support new livelihoods for the host communities and for rehabilitation of social infrastructure	-	-	-	2,000 Households in host communities that are affected in social and economic terms from the Syrian crisis and the Syrian population influx	3.000.000	-	1.000.000	2.000.000	UNDP, Municipalities, Employment Agency, Governorates and relevant local offices of government agencies relating to social infrastructure
Output 3 - Community needs assessed to determine the impact of the Syria crisis on host communities	-	-	-	Up to 2,000 Host communities households that are affected from the Syrian crisis	250.000	-	-	250.000	UNFPA
Total					5.050.000		2.800.000	2.250.000	

Objective 2. Syrian refugees living in host communities benefit from access to livelihood opportunities.									
Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1- Opportunities created to support new livelihoods for Syrians living in host communities	-	1,000 households of Syrian refugees living in host communities	-	South East region and all provinces hosting Syrian refugees	728.000	-	728.000	-	"IOM , UNHCR, local authorities and partners"
Total		1,000 Households			728.000	0	728.000	0	

Objective 3. Restoration of the agricultural livelihoods of rural communities hosting Syrian refugees through the provision of short-term subsidies for key agricultural inputs and capacity development in good agricultural practices.

Output	Targeted population by type (individuals)			Location(s)	Detailed requirements				Partners
	SYR in camps	SYR in urban	Host communities		Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	
Output 1 - Short-term initiatives supported to improve the livelihood and income of the Turkish communities and families hosting urban (out-of-camp) Syrian populations	-	-	1,500 households	Gaziantep, Hatay, Kilis and Saniurfa; TBC with AFAD	1.500.000	-	1.500.000	-	FAO, AFAD, Ministry of Agriculture
Output 2 - Opportunities created to create new livelihoods for the host communities and for rehabilitation of social infrastructure	-	-	1,500 households	Gaziantep, Hatay, Kilis and Saniurfa; TBC with AFAD	1.500.000	-	-	1.500.000	FAO, AFAD, Ministry of Agriculture
Total					3.000.000		1.500.000	1.500.000	

Sector indicators	Target
# of host community families that have increased incomes with UN intervention	2.000
# of Syrian refugees living in host communities with increased access to livelihoods	1.000
# households in host communities with improved farm incomes	2.000

Host Communities and Livelihoods - Summary Requirements					
	Requirements Jan-June 2014				Indicative requirements Jul-Dec 2014
	Total requirements (US\$)	Life-saving or preventing immediate risk of harm (US\$)	Preventing deterioration of vulnerabilities (US\$)	Capacity Building / Resilience (US\$)	Requirements (US\$)
SECTOR GRAND TOTAL	8.778.000	0	5.028.000	3.750.000	8.992.000

5. SECTOR FINANCIAL REQUIREMENTS PER AGENCY

Livelihoods for Host Communities and Syrian Populations in Turkey (US\$)			
Agency	Total Jan-Dec 2014	Jan-Jun 2014	Jul-Dec 2014
FAO	6,000,000	3,000,000	3,000,000
IOM	1,200,000	600,000	600,000
UNDP	9,000,000	4,500,000	4,500,000
UNFPA	500,000	250,000	250,000
UNHCR	1,070,000	428,000	642,000
Total	17,770,000	8,778,000	8,992,000

L. Turkey Financial Requirements Summary

TABLE 1: COUNTRY FINANCIAL REQUIREMENTS PER AGENCY

Agency	Total 2014	Jan-Jun 2014	Jul-Dec 2014
FAO	6,500,000	3,250,000	3,250,000
IOM	12,830,000	7,315,000	5,515,000
UNDP	9,000,000	4,500,000	4,500,000
UNFPA	9,800,000	4,900,000	4,900,000
UNHCR	284,859,688	137,012,654	147,847,034
UNICEF	64,958,235	32,959,118	31,999,117
WFP	126,976,760	63,488,380	63,488,380
WHO	7,455,000	3,847,500	3,607,500
Total	522,379,683	257,272,652	265,107,031

TABLE 2: COUNTRY FINANCIAL REQUIREMENTS PER SECTOR

Sector	Total	Jan-Jun	Jul-Dec
Protection	118,118,627	59,059,314	59,059,313
Education	62,219,416	29,229,068	32,990,348
Food	127,476,760	63,738,380	63,738,380
Health	62,535,500	35,612,750	26,922,750
Basic Needs and essential services	134,259,380	60,855,140	73,404,240
Host communities and Livelihood assistance	17,770,000	8,778,000	8,992,000
Total	522,379,683	257,272,652	265,107,031

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