

### 2.7 M

displaced people living in northwest Syria

### 1.6 M

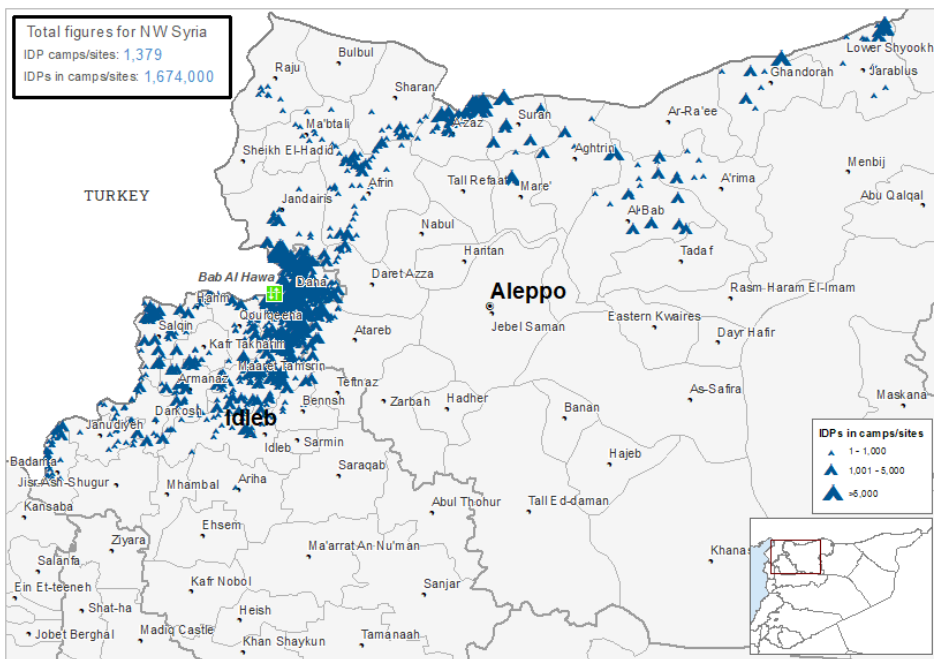
displaced people living in IDP sites

### 21,282

confirmed COVID-19 cases

### 4,760

SYP to USD exchange rate on 17 March



Source: CCCM Cluster, IDPs Sites Integrated Monitoring Matrix (ISIMM), February 2021  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations

### US DOLLAR VERSUS SYRIAN POUND TREND (2021)



As of 26 March 2021

### HIGHLIGHTS

- Bombardment on 21 March impacted a hospital, killing seven and injuring 14. It also affected areas close to IDP camps in the Qah area and the Bab Al Hawa border crossing, reportedly killing three civilians, destroyed trucks used to carry humanitarian supplies and relief items for at least 25,000 people, damaged NGO warehouses and offices, and caused the suspension of a variety of humanitarian operations.
- A humanitarian worker was killed on 18 March when caught in the crossfire of an altercation between armed actors.
- The Syrian Pound devaluated significantly during the reporting period, with new historical lows of 4,760 SYP/USD reached on 17 March.
- Funding gaps in water and sanitation services, which have been ongoing for five months, affecting some 3 million people. Further gaps are expected to compound with the existing gaps in the upcoming months.

## SITUATION OVERVIEW

**Ongoing hostilities:** People continue to endure conflict across northwest Syria. On 21 March, airstrikes and bombardment affected the Sarmada area not far from the Bab Al Hawa border crossing with Turkey, which are inhabited by a large number of civilians (particularly IDP camps) and are also a main centre for many NGOs and their warehouses. These airstrikes affected a logistics centre near the Bab Al-Hawa crossing and two gas facilities. Bombardment also affected the Qah area in northern Idlib. Airstrikes also hit Kafr Shalaya in southern Idlib. On 22 March, several missiles impacted Sarmada again, mainly impacting a fuel market. Shelling also continued to occur in frontline areas on a daily basis.

On the same day, missiles impacted a hospital run by an NGO in the city of Atareb in the western countryside of Aleppo. The NGO reports that seven patients were killed (including five men and two children) and that 14 people were injured (including medical staff and five women). The hospital is out of service and had been providing an average of 3,650 out-patient medical services per month, and 177 general, orthopedic, and urologic surgeries each month, along with emergency and obstetrics services.

The bombardment that affected the Qah area on 21 March also occurred in an area with IDP camps. Local sources reported that two civilians were killed in these incidents. In the airstrikes and bombardment that impacted the Sarmada area on the same day, one civilian was killed, according to local sources. The bombardment of civilian areas that house a large number of IDP camps is of grave concern.

The shelling and airstrikes hit close to the Bab Al Hawa border crossing, which has a high density of IDP camps and is the main route to transport humanitarian supplies into Idlib, and for the UN to northern Aleppo. The attacks on 21 March led to losses of critical supplies by humanitarian organizations and the suspension of aid deliveries. This comes at a time where the needs in northwest Syria have never been higher and funding is already constrained. Specific impacts to the humanitarian operation included:

- 64 trucks were partially damaged and another four completely destroyed by the strikes on a private logistics hub in Sarmada. While the vehicles were privately owned, they belonged to the main company used for UN transshipments. There was no humanitarian cargo on board at the time of the strike.
- Airstrikes near an NGO warehouse resulted in fires that reportedly destroyed relief items intended for some 25,000 people, including NFI kits, hygiene kits, kitchen sets, and soap.
- At least five NGOs temporarily suspended operations, including WASH and FSL distributions and work at medical centres.
- A building housing several NGO offices sustained slight damage, as well as two warehouses, a medical centre, and the office of another humanitarian organization.

In an unrelated incident to the above developments, local sources reported that one humanitarian worker was killed, and five civilians injured (including one woman) when they were caught in the crossfire of a conflict between armed individuals in Idlib Governorate on 18 March.

Overall, the UN Human Rights Office (OHCHR) verified that from 24 February to 23 March, at least 16 civilians were killed (including one woman and four children) and at least 70 civilians were injured (including four women and six children) as a result of the shelling and airstrikes in northwest Syria. In addition to these hostilities, the prevalence of explosive hazards continue to take a toll on civilian lives. Four incidents of improvised explosive devices (IEDs) and four incidents of explosive remnants of war (ERW) in northwest Syria resulted in civilian casualties, with at least 11 civilians killed (including one woman and four children) and 13 civilians injured (including two women and three children). Many more IEDs and ERWs were also reported within communities and public spaces and later neutralised.

**COVID-19:** According to WHO, the number of new confirmed COVID-19 cases in northwest Syria continued to decline during the reporting period. 105,298 tests have been conducted to date, with 21,282 cases confirmed as of 26 March – 11,576 cases in the Idlib area and 9,706 in northern Aleppo governorate. A total of 637 COVID-19 associated deaths have been reported to date with an overall fatality rate of 3 percent in northwest Syria. The percentage of current cases among medical healthcare workers are 7.3 percent, encompassing nurses, doctors and midwives, while a further 5.3 percent are auxiliary workers in the health sector. Some 10.5 percent of all COVID-19 cases are in IDP camps.

Critical funding gaps remain in the COVID-19 response and risk disrupting vital response services, in particular the referral system for patient transportation, manning points of entry with Infection Prevention Control and screening measures, and

essential health services such as hospitals and primary health centres across the northwest in the coming months. Ongoing prioritization exercises aim to maintain the minimum operational activities required to minimize transmission rates. Since the last Situation Report, one additional COVID-19 Community-based Treatment Centre (CCTC) was opened in the city of Al Bab. As of 26 March, there were 25 active CCTCs (with 1,111 beds) in northwest Syria along with 12 hospitals that treat COVID-19 (with 234 intensive care unit (ICU) beds and 926 regular beds).

Further planning for a vaccination roll-out plan remains ongoing. The initial request to secure vaccines for some 20 percent of the population (855,000 people) through the COVID-19 Vaccines Global Access Facility (COVAX) facility was accepted in February and an initial batch of the AstraZeneca vaccine was pledged during the reporting period. Phase one of vaccination roll-out for northwest Syria, in priority order of precedence, will include health care workers, high-risk population groups (with associated chronic co-morbidities) and other cluster front-line workers (depending on availability).

**SYP devaluation:** The value of the Syrian Pound (SYP) against the US Dollar has continued to weaken significantly in the last few months. Following the issuance of a new 5,000 SYP banknote in February, the exchange rates reached new historical lows in northwest Syria reaching 4,760 SYP/USD on 17 March. As of 24 March, the SYP was over 250 percent weaker than at the same date last year and has devalued some 27 percent against the USD in the last month. The most recent wave of devaluation is a continuation of the economic turbulence that has been affecting the Syrian people across the country, particularly since late 2019. The devaluation of the SYP and economic turbulence over the past year has significantly eroded people's ability to meet their basic needs, no longer being able to afford bread, fuel and other vital commodities. This also results in people engaging in harmful practices to survive, including child labour and other forms of exploitation.

**Wind incidents, flooding and winterisation:** In March, heavy winds across northwest Syria resulted in damage to 88 IDP sites. According to the CCCM Cluster, from 11 to 24 March, some 1,521 tents were damaged as a result of the heavy winds, with families forced to temporarily move in with relatives and neighbours in the IDP sites. The heavy winds increased the need for tent replacements, food, and plastic sheets, compounding with existing needs caused by the flooding incidents and winterisation needs in recent months. Since the last situation report on 24 February, the CCCM also reported on flood incidents impacting 15 IDP sites that led to the destruction of 607 shelters and partial damage to 1,475 shelters.

Due to the lack of better heating and shelter materials, many people in northwest Syria also rely on burning unsafe materials for heat, which can cause fires or be unsafe for breathing. From 24 February until 23 March 2021, the CCCM reported fire incidents affecting 18 IDP sites, leading to one death and one injury as well as the destruction of 23 shelters, mainly due to malfunctioning or misused heating or cooking stoves.

**Population movements:** More than 2.7 million people remain displaced in northwest Syria. According to the CCCM Cluster, more than 18,623 displacements were tracked in February, with departures principally occurring from Dana, Idlib and Afrin. The main locations where displaced people had arrived to include Dana, A'zaz and Maaret Tamsrin sub-districts. Some people may have been exposed to multiple displacements. According to the CCCM Cluster, more than 2,478 IDP returnees returned to their homes or to previous places of displacement during the same period, mainly arriving to the Ariha, Ehsem and Mhambal sub-districts.

## FUNDING

The Syria Cross-border Humanitarian Fund (SCHF) started the year with US\$16.8 million and to date the support of seven donors has brought the total available amount to \$98 million. This new funding has allowed the SCHF to prepare a funding allocation which is expected to be launched by 31 March. In line with the SCHF and guiding principles adopted for 2021, the allocation will cover interventions aimed at the most urgent needs and gaps for the next 12 months. The allocation will be organized around three main objectives:

- Allocation Strategic Objective 1 (ASO1): Upgrading of IDP sites to ensure safe and dignified living conditions for the most vulnerable people in northwest Syria, with a focus on appropriate preventive measures to alleviate the effects of flooding and prepare for winter.
- Allocation Strategic Objective 2 (ASO2): Life-saving humanitarian assistance and protection to the most vulnerable people with an emphasis on underserved areas with high severity of needs.
- Allocation Strategic Objective 3 (ASO3): Enhance resilience of affected communities through the provision of livelihoods opportunities.


The needs in northwest Syria remain unabated yet there is a concern that due to the global economic situation funding may reduce in comparison to 2020. Additional funding is needed to meet the increasing humanitarian needs caused by the deteriorating economy, COVID-19, continued impact of previous displacement, and current conflict. As of 25 March, the

2020 Syria Humanitarian Response Plan (HRP) was 58 per cent funded out of a US\$3.82 billion the total requirement.

Resource mobilization efforts have also been ongoing since the beginning of the year, with the Senior Official's meeting in February and the Brussels conference in March. Donors are encouraged to pledge and disburse their regular contributions as early as possible, especially since the level of funding required to respond to the needs are not expected to decrease in 2021 and the current indicative ask for the 2021 HRP is estimated to be \$4.2 billion, pending finalization of the plan.

Further information on the SCHF activities and contributing donors can be found at: <https://pfb.unocha.org/>

## KEY PRIORITIES & RESPONSE ACTIVITIES


 **Camp Coordination and Camp Management:** Fire incidents in tents continued on a regular basis in March. From 24 February until 23 March 2021, CCCM reported fire incidents affecting 18 IDP sites, leading to one death and one injury as well as the destruction of 23 shelters. On 03 March, a flood incident impacted 15 sites, with some 607 tents destroyed and some 1,475 tents partially damaged along with the IDPs' belongings. High-speed wind incidents were also prevalent and affected 88 sites during the period leading to 1,521 shelters being damaged.

**18,623**  
*new displacements in February*

The CCCM continued to closely cooperate with OCHA and other clusters, including the Shelter/NFI, WASH, Logistics and Early Recovery Clusters, on the response to these incidents. In addition, the CCCM Cluster regularly coordinates with actors on the ground, such as NGOs and Site Monitoring Teams (SMT), to monitor and follow up on the provision of assistance. The Cluster's Fire Mitigation and Response Taskforce also met in February to discuss the incidents, challenges and possible solutions.

Due to the context of largely self-settled sites and subsequent lack of camp management systems, monitoring and collecting information as part of its coordination response are essential aspects of the CCCM Cluster's priorities. The Cluster closely monitors **1,379 active IDP sites hosting 1,673,680 IDPs**. Of these, 80 percent are women and children and some 23,660 IDPs are reported to be persons with specific needs. **Coordinating and disseminating operational information on IDP sites** in a timely manner are key priorities for the CCCM Cluster to analyse trends and quickly identify IDPs in need of assistance.

The CCCM Cluster tracked some 18,623 recent displacements in February. The number of displacements for February were lower than in previous months, possibly due to the ongoing security situation. The top three shelter types for new arrivals in February were reported as being solid-finished houses (65%), self-settled sites (15%), and unfinished/damaged houses (15%), with just 5 percent of new arrivals staying in planned camps. For new arrivals, the top three reported needs were cash (40%), winterization (18%), and shelter (14%).

 **Education: Provision of continued learning in a safe environment** in northwest Syria remains the key priority for the education sector, especially due to the impacts of the security situations and COVID-19. Where most schools are operating either fully or partially, partners are continuously prioritizing COVID-19 mitigation measures such as providing additional learning spaces, sterilisation and awareness raising. Winterisation of learning spaces is also a top priority during the winter as only 45 percent of schools in northwest Syria are supported with heaters and heating. Due to hostilities in the area and one unverified conflict incident affecting a school in Ariha on 21 March, all schools in Ariha were suspended for one day on 22 March and switched to distance learning. As the trend of blended learning (i.e. combination of physical and distance learning) continues due to the COVID-19 pandemic, the provision of **support to education personnel and teacher incentives, internet provision and training for teaching and learning** continue to be a key priority.

**238,481**  
*children benefited from heaters and heating in schools*

### Food Security and Livelihoods:

Delivery of food assistance, bread distribution, and livelihoods programs in northwest Syria continued over the reporting period. **Lifesaving and livelihoods programmes** are essential to scale up support to local communities on agricultural production along with technical assistance on small-scale food production and assets, while boosting food processing as part of the target population's income generating activities.

Since 15 January, **the Cluster lead agency and partners implemented two livestock vaccination campaigns in northwest Syria**. The Peste des Petits Ruminants (PPR) vaccination campaign was concluded and vaccinated some

**160,600**  
*new IDPs received food assistance as emergency*


988,703 sheep and goats, benefiting some 26,129 households in all accessible locations of northwest Syria. The Newcastle Disease (ND) vaccination campaign, targeting up to 75,000 households with ND vaccinations for 2.2 million chickens is expected to be completed at the end of March. As of 11 March, the ND vaccination campaign had vaccinated 1,629,301 chickens against ND, benefiting some 35,162 households in 505 communities of northwest Syria and training 778 village focal points.

The top livestock priorities for 2021 are long-term support for local animal feed production and fodder Barley production to ease animal feed shortages and systematic large-scale vaccinations of cattle against Foot-and-Mouth Disease (FMD), vaccinations against Sheep & Goat Pox and annual revaccination of cattle against Lumpy Skin Disease (LSD) by September 2021.

From 23 February to 23 March, FSL Cluster partners provided **food assistance to 160,643 newly displaced people and returnees** in northwest Syria, which included 31,373 emergency food baskets, 37,932 ready-to-eat (RTE) rations, 7,034 cooked meals and 1,689,660 USD multi-purpose cash grants (MPCG) to 84,304 beneficiaries. Additionally, **2.25 million beneficiaries received bread bundles** by FSL Cluster partners, and more than **1.3 million beneficiaries** received bread for 30 percent of their bread needs through the food baskets provided by FSL Cluster partners in December 2020.

The Cluster lead agency has 122,136 RTEs available with its partners and warehouses in northwest Syria, which is enough to provide food assistance to 610,815 IDPs. Since February, the Cluster lead agency has provided an additional 5 kg of rice as a top-up to the regular food assistance to households with 7 and more family members. The **main priority on food assistance is to provide regular food assistance to 1.3 million people in northwest Syria**. From April until the end of July, one bar of soap will be added to the food baskets being distributed to 270,000 households.

The FSL Cluster has been organising and leading eight meetings on a regular basis each month: the FSL Cluster partners meeting, three Area Coordination Groups (ACGs), Livestock Technical Working Group (LTWG), Agriculture Technical Working Group (ATWG), Bread and Bakery Coordination Group (BBCG), and COVID-19 focal points group meetings. The cluster also organised the FSL Strategic Advisory Group (SAG) monthly meeting and two ad-hoc workshops on 2021 FSL priorities in addition to SO3 activities meeting.

 **Health:** While the current pace of COVID-19 spreading in northwest Syria is slow, with 118 new cases reported from 25 February to 26 March, there remains a risk of a new rise in positive cases. As of 26 March, out of a total of 105,298 samples tested by RT-PCR in northwest Syria (57,737 in Aleppo and 47,561 in Idleb), there were **21,282 confirmed cases of COVID-19** (9,706 from Aleppo and 11,576 from Idleb governorates) and 19,353 (90.9%) have recovered. To date, 18,977 (89.2%) cases developed mild symptoms, 1,228 developed moderate/severe symptoms, and 1,067 cases were asymptomatic. The total number of cases from IDP camps were 2,234 (10.5%).

**21,282**  
confirmed COVID-19 cases

Active screening was initiated by the EWARN team in mid-February, screening 665 cases at 25 sites (10 health facilities, 4 camps and 11 communities). The infection rates amongst health care workers (physicians, dentists, nurses, midwives, pharmacists and medical technicians) were found to be acceptable compared to 2020 and registered 1,850 (8.7%) cases out of all confirmed cases; another 870 (4.1%) cases were noted amongst other staff working in healthcare facilities and community health workers.

During the time period when confirmed COVID-19 cases were increasing rapidly, Risk Community and Community Engagement (RCCE) activities were crucial to creating a break in the spread of the virus and for maintaining high levels of awareness against COVID-19 in the community. To avoid a potential rapid increase in COVID-19 positive cases again, physical distancing, active screening, contact tracing, follow up with confirmed COVID-19 cases, and other community-based activities should continue at the same pace until vaccinations have been performed in all communities in northwest Syria. Meanwhile, coordination is ongoing between local authorities, and Cluster partners in order to mitigate potential resistance to the roll-out of the COVID-19 Vaccines Global Access (COVAX) vaccine campaign by preparing accountability to affected populations' (AAP) videos, posters, and other informational content related to COVAX.

The National Deployment and Vaccination Plan (NDVP) for northwest Syria was approved and the health cluster lead agency granted Emergency Use Listing (EUL) for the AstraZeneca vaccine produced by the Serum Institute of India vaccine. The vaccination campaign is expected to begin by the end of June or in early July. The first doses are expected to be delivered by May 2021. Data collection of priority groups, registers, standard operating procedures development and training material for the campaign are all ongoing, as was the first draft of the COVAX vaccination campaign plan and budget. The vaccination roll-out plan was designed by the COVID-19 Taskforce and includes service delivery, cold chain and logistics, demand generation and communication, prioritization, targeting and COVID-19 surveillance, monitoring and


evaluation, proof of eligibility/validation, proof of vaccination, monitoring of coverage amongst at-risk groups, and safety (including injury prevention and AEFI detection and response). Health care workers and high-risk population groups (with associated chronic comorbidities), in addition to other cluster frontline workers (depending on availability) should be prioritized in phase one of the vaccination roll-out for northwest Syria.

Even though COVID-19 response remains a priority, it is crucial that non-COVID-19 related lifesaving responses not be neglected and to maintain access to health services by people in need. However, prioritization is ongoing, and some of the COVID-19 facilities are expected to either be discontinued or remain functional at minimum capacity, in case a new spike in COVID-19 positive cases are recorded. The prioritization of the CCTCs and COVID-19 designated hospitals, was performed based on criteria set forth by the COVID-19 Taskforce. Six out of 15 CCTCs were considered critical as they are the only available centres serving the camps with high-density populations. An assessment for the 29 physical rehabilitation centres in northwest Syria was also registered. Currently, 25 active CCTCs (with 1,111 beds) remain in northwest Syria, while 12 hospitals that treat COVID-19 with 234 intensive care unit (ICU) beds and 926 regular beds remain functional. More details can be accessed via the [COVID-19 Monitoring Dashboard](#).


Psycho-Social Support (PSS) counselling sessions, via MHPSS helplines, is continuing voluntarily due to the lack of funding while Face-to-Face PSS Counselling via 15 Psycho-Social Workers (PSWs) at the CCTCs was suspended temporarily due to the non-functionality and closures of many CCTCs as a result of lack of funding.

The Cluster lead agency organized a training for the DHIS unit on mortality registration and international cause of death (ICD). The unit is linking with the EWARN team on daily updates on COVID-19 related mortalities. IPC (Infection Prevention and Control) specialized training was also delivered to eight CCTCs covering 312 medical and non-medical staff.

Beyond the COVID-19 health response, some 429 reproductive health (RH) kits were distributed to health facilities providing RH services in northwest Syria. These facilities included basic emergency obstetric and newborn care (BEmONC), comprehensive emergency obstetric and newborn care CEmONC, primary health care (PHC) with Reproductive Health (RH) outpatient and mobile clinics which serve some 1 million beneficiaries in six months. Cluster partners that deliver RH services were supported with 74 specific kits to treat sexually transmitted infections in addition to family planning supplies to cover the needs for some 47,100 women and 4,000 men in the coming three months.


 **Nutrition:** According to data from monthly nutrition surveillance and admission into programmes for treatment of acute malnutrition, **the nutrition situation continues to deteriorate across northwest Syria with a 55 percent increase in cases of severe acute malnutrition (SAM)** in February 2021 compared to January 2020. Chronic malnutrition (stunting) which affects one-third of children aged 6-59 months also increased by 5 percent during the same period. Trend analysis indicates that women and girls are disproportionately affected by malnutrition, with malnutrition among pregnant and lactating women (PLW) reported to be five times higher than it is among children aged 6-59 months. Similarly, the odds of being wasted are consistently higher in girls compared to boys which is possibly attributed to preferential feeding practices and gender dynamics. Since the start of 2021, some 304,200 children aged 6-59 months and PLW have been reached by nutrition cluster partners with lifesaving nutrition services including flood response and COVID-19 related activities.

**304,200**  
women and children reached  
with lifesaving nutrition  
services

 **Protection:** In February, Protection Cluster partners delivered **2,826 protection interventions** to IDPs and affected host community members in seven communities within four sub-districts in Idleb, reaching 2,072 individuals. Services were mainly related to Psychological First Aid (PFA) and Psychosocial Support (PSS), in addition to the dissemination of basic messaging on Gender Based Violence (GBV) prevention and awareness raising activities on Child Protection (CP) such as the prevention of family separation. Protection Cluster partners delivered activities under the emergency response model, including to families affected by the flooding and ongoing hostilities. Protection Cluster partners continued to engage affected communities via **outreach modalities** to provide PFA and identify households and individuals in vulnerable situations that require specific interventions and support. The **GBV Sub Cluster (GBV SC) and the Reproductive Health Working Group** conducted **two joint workshops** for their partners in Idleb and Aleppo to enhance the coordination and referrals amongst their partners and ultimately contribute to **enhancing the response for survivors of sexual violence**. The GBV SC and the Cash Working Group's joint task force have finalized **standard operating procedures for referrals of GBV survivors into multipurpose cash assistance** in a safe way. Following extensive consultations with partners, the **GBV Monitoring and Evaluation toolkit developed in 2020 has been revised** based on lessons learned, with the aim to better mainstream crosscutting issues such as Protection against Sexual Exploitation and Abuse (PSEA), AAP and disability and diversity considerations. Thirteen Protection Monitoring Task Force (PMTF) partners conducted **807 (346 females and**

**2,826**  
protection interventions  
delivered

**461 males) Key Informant Interviews (KIIs)** in Idleb and Aleppo governorates covering seven districts, 18 sub-districts, and 125 communities on general protection trends.

 **Shelter and Non-Food Items:** In February, more than **230,000 individuals received NFI assistance** in the form of NFI kits, kitchen sets, mattresses, jerry cans, carpets, solar lamps, tarpaulins, blankets and seasonal assistance such as fuel and stoves, or through multi-purpose cash transfers. **The shelter needs of over 51,000 people were addressed** during the same month, including the provision of emergency shelter, shelter rehabilitation and transitional shelters. Moreover, some 51,000 individuals were reached with infrastructure improvements in IDP sites such as roads and drainage.

**1.51 million**


*People reached with winterization assistance*

The SNFI Cluster's interactive [Progress and Coordination Dashboard](#) was updated for 2021. Four new pages have been added, containing information on planned activities, stock status, geographical coverage and demographic information of the beneficiaries reached including age and gender, female headed households and beneficiaries with disabilities.

The SNFI Cluster aims to contribute to the most urgent life-saving winterization interventions, through the provision of timely winterization supplies as well as cash-based programming where possible. The Cluster is active in the coordination of the winterization response to ensure that plans are implemented in an efficient and timely manner to target close to 1.5 million people in need. From October to February, SNFI Cluster partners surpassed this target and **reached over 1.51 million individuals with winterization assistance**. The main activities included fuel distribution, and cash assistance for winter NFIs.

The SNFI Cluster is leading the Technical Working Group (TWiG) on Floods Planning and Response and is actively coordinating with other relevant clusters (CCCM, ERL and WASH). Ongoing activities include analysing best practices for the flood response as well as discussions surrounding different drainage systems. The TWiG plans to produce guidelines on several flood mitigation measures in the Syrian context based on lessons learned, experience and cultural background.

The SNFI Cluster partners are also actively responding to the needs of the population that has been affected by the recent floods. As of the end of February, **over to 7,600 NFI kits have been distributed and over 2,700 tents have been installed to replace destroyed ones**. More tents are expected to be distributed throughout the month of March. Cluster partners also **distributed 25,000 blankets and 16,000 mattresses** as single items.

 **Water, Sanitation and Hygiene:** In January and February, 1,491,212 people were reached through improved access to water systems through rehab repair of water systems, 1,477,781 IDPs were reached through improved access to life-saving WASH activities 1,115,634 IDPs were reached through water trucking services, 1,012,888 IDPs were reached through solid waste management, and 884,510 IDPs were reached through sanitation services and facilities. Furthermore, 205 schools, 96 camps, 6 collective centres and 42 health facilities were supported with different WASH services.

**1.48 million**


*reached through improved access to life-saving WASH activities*

Despite the WASH Cluster's efforts to phase out costly and short-term activities such as water trucking, 70 per cent of IDPs in camps in northwest Syria continue to rely on WASH partners to provide trucked water on a daily basis. The Cluster continues to advocate for funding to support the connection of camps to existing piped water systems, which would dramatically improve the quantity and quality of lifesaving water services, while substantially reducing costs. The WASH Cluster is also in the final stage of proposing new wastewater treatment methods to be implemented in northwest Syria, regarding which a specific meeting was held with Cluster partners and methodologies were discussed. The Cluster then shared the final document and conducted a briefing session with partners.

Access to safe water through piped systems remains a challenge, with only 125 (65%) out of 209 systems in Idleb and 136 (56%) out of 241 systems in Aleppo currently functioning. Meanwhile, 15 percent of the stations in Aleppo and 16 percent of the stations in Idleb are running without being chlorinated. Without electricity, partners continue to operate these water stations through diesel generators, with the **cost of fuel accounting for an estimated 30 percent of the total WASH cluster expenditure**. Further support is needed for the repair and rehabilitation of water stations and networks in order to connect these stations to electricity grids and improve service delivery while at the same time reducing the cost. The WASH Cluster is advocating for the inclusion of connections to electrical grids and managing electricity bills to ensure that communities have improved access to water via networks, as water stations will be operating at maximum capacity.

The Dana, Azaz, Idleb, Albab, Maaret Tamesrin, Daret Ezza, Afrin and Atareb sub-districts continue to be the most significant hotspots for waterborne diseases, while the Dana, Maaret Tamesrin, Afrin, Azaz and AlBab sub-districts have the highest number of leishmaniasis cases. Prevention measures have been implemented in the last three to four months, however, the hosting period of the disease is usually between six to eight months and therefore a decrease in cases is expected around May to August 2021. As the spring season approaches, further efforts are needed to ensure that Indoor Residual Spraying activities are implemented for more control over the number of leishmaniasis cases. Failing to secure funds will lead to a dramatic increase in the cases especially with the high density of people in northwest Syria.


Efforts to unify the water systems are also ongoing, with a new tool added to assess the efficiency of water systems to help direct funds properly. Furthermore, water systems assessment have been harmonized in northwest Syria and shared with partners.

 **Logistics:** The Logistics Cluster continues to prioritise **the maintenance of unimpeded physical access to northwest Syria** through reliable transshipment services and the provision of up-to-date information on logistics capacity and physical access. An update to the road conditions map, with inputs from partners, can be found [here](#).


**1,347**  
*trucks of UN assistance  
transhipped from  
1 February to 15 March*


In February, **1,047 trucks of UN assistance, carrying 23,368 metric tonnes** of FSL, Shelter, WASH and Health sector items were transhipped via Bab Al-Hawa, while another **300 trucks carrying 6,848 metric tonnes** of FSL, Shelter, WASH and Health sector cargo were transhipped between 1 and 15 March. The full overview of Logistics Cluster transshipment achievements in 2021 can be found [here](#).

## OPERATIONAL GAPS & CHALLENGES

 **Camp Coordination and Camp Management:** Although IDP sites are usually a last resort option, there are currently 1,379 IDP sites listed in the CCCM database. The majority of these IDP sites are self-settled (1,249 sites). The CCCM Cluster continues to monitor these sites to identify gaps and facilitate the coordination of multi-sectoral services.

In February, the CCCM Cluster reported on fire incidents that impacted 31 sites with the most affected sites located in Dana and Maaret Tamsrin subdistricts. **Urgent needs included tents, NFIs, food and winterization.** As a result of these incidents, many IDPs lost NFIs, furniture and personal belongings. The Cluster also observed a gap in fire extinguishers, as less than 10% of the affected sites were equipped with fire extinguishers.

 **Education: Lack of funds continues to inhibit providing adequate education support.** The biggest funding gap remains in the support to teacher incentives allowing teachers to continue teaching. According to the information provided by education authorities, **one in three teachers in northwest Syria have been working without pay for over a year.** In addition, due to the impact of COVID-19 and schools not being able to operate fully, the demand for providing blended learning, access to internet and digital devices for learning purpose remains high. The establishment and expansion of new learning centers and WASH facilities, to respond to consequences of the conflict and the current COVID-19 situation, continued to be a gap that need to be addressed. During the winter, winterisation of learning spaces has also been identified as a prioritised gap despite the continuous efforts made by Cluster partners to provide heating.

 **Food Security and Livelihoods:** The FSL Cluster has identified that the bread production is not evenly distributed across northwest Syria, as some critical gaps remain in areas with a high number of IDPs (as in Dana, Idleb, Salqin, and Atareb sub-districts) only partly assisted by local bread production. Improvements in bread production capacity are reported in the Afrin, Jarablus and Ghandorah subdistricts in northern Aleppo governorate, where most of the population meet the daily minimum requirement.

**On livelihoods, farmers are highly constrained by the** lack of agricultural inputs, increased prices, and limited access to high quality of the seeds - **especially the Syrian wheat varieties that usually provide a high yield.** The negative impacts of the critical economic situation, COVID-19 and the winter season are the main drivers **compounding food insecurities** for most people in northwest Syria.



On livestock, the **limited availability of pasture and high costs of animal feed** present a major challenge to all livestock owners. Given the scale of the problem, current funding levels do not permit significant upscaling of mitigation measures such as increased planting of fodder and on-farm animal feed production. As the marketing of agricultural production is one of the main issues that farmers have been facing, the FSL Cluster has recommended purchasing the local wheat variety from farmers to be used in wheat cultivation and bread production in the next season.



**Health:** Due to a lack of funding, eight COVID-19 Community-based Treatment Centers (CCTC) remain deactivated in northwest Syria, which are critical for triage and case detection as they are the first contact points in the community. The RCCE activities are facing similar problems due to a lack of funding, leading to a 30 percent decrease in the number of community health workers in northwest Syria since early 2021. The COVID-19 central hotline desk was also closed in late February. **These factors are expected to affect the COVID-19 awareness raising activities and will likely jeopardize the needed efforts to mitigate any potential community resistance of the COVID-19 vaccine.**

**The growing insecurity, the deterioration of living conditions, and economic hardships of individuals and families inside northwest Syria are some of the main reasons for the increasing cases of depressions that may result in suicide.** An important contributing factor is the lack of job opportunities among young people. In the first half of March, four young men committed suicide due to poor living conditions and economic problems. There is also a need to support and standardize school mental health interventions through intra-cluster collaboration and to ensure funding availability when the COVID-19 situation permits safe returns to in person learning at schools.



**Nutrition:** The poor living conditions, unsanitary environments, increased morbidity from flooding and the burning of unsafe materials for heat or cooking are elevating the risks of further deteriorating the nutrition situation. The recent flooding also increased access challenges to the affected locations by the Rapid Response Teams (RRT). Due to the spread of COVID-19, several mothers have been refusing the use of Mid-Upper Arm Circumference (MUAC) tapes to screen their children for acute malnutrition. **Nutrition Cluster partners are also faced with funding constraints** which limits the number of RRT available to deploy to inaccessible locations and scale-up the response.




**Protection:** The Protection Cluster continues to monitor potential protection issues given the intermittent ground-based strikes happening on an almost daily basis, mainly affecting areas near the frontlines by the M4 highway. On 21 March, **artillery shells impacted a hospital in Atareb**, in Aleppo governorate, with more than 20 casualties reported including five medical staff. **Civilians across Syria continue to be killed or injured** by attacks from IED incidents in populated areas and ERW incidents leading to increased security concerns and further displacement. Concerns remain for vulnerable individuals, mainly displaced children, older people, and persons with disabilities in the environment of hostilities. Temporary family separations have been reported, and lack of temporary residential care for unaccompanied and separated children have also been reported. Some GBV actors in northwest Syria have introduced one-time emergency cash assistance to survivors in support of the GBV case management action plan; however, assistance often remains inadequate to cover all of the needs and survivors in many instances still need multiple rounds of Multi-Purpose Cash (MPC) or other forms of cash and livelihood assistance to help them transition from relief to recovery. This is provided on a minimal scale by other humanitarian actors/ non-protection specialists. GBV SC partners currently support 37 functional Women and Girls Safe Spaces (WGSS) across northwest Syria but high demand for more WGSS is evident and was confirmed in recent SCHF Third Party Monitoring reports. A growing gap has been seen as several GBV projects and WGSS in northwest Syria have had to close due to limited funding. Some **US\$3.7 million is needed annually to sustain the existing WGSS**, while some **US\$6.3 million is needed annually for the additional WGSS required**. CP interventions require children to complete cycles and care plans to be effective; however, underfunding during the current year is translating into the direct inability of child protection actors to reach child survivors and children at risk of protection concerns. **Funding gaps are increasingly leading to the interruption or discontinuation of CP activities** requiring continuity, predictability, and full cycles to be completed and effective, compounded with lack of essential services, MHPSS services, livelihood, cash intervention, youth empowerment, and direct specialized services targeting persons with specific needs. Due to negative parenting and coping mechanisms, based on new attitudes resulting from war, Protection Cluster partners have reported increasing concerns regarding domestic violence, child labour, child marriage, and child recruitment.



**Shelter and Non-Food Items:** The need for infrastructure support in northwest Syria remains significant, especially for sites that have been established by the IDPs themselves. Improving infrastructure in camps and IDP sites is essential to avoid future flooding that happens regularly, especially during the winter.

Given the limitations of tents as the primary emergency response option in situations of protracted displacement, the SNFI Cluster continues to advocate for a range of alternative emergency shelter options ('improved shelter units') including RHUs,

self-built shelter options, and Temporary Dignified Shelters constructed with locally available materials. These options represent a principled and appropriate humanitarian shelter response to protracted displacement and continue to be a major advocacy focus of the SNFI Cluster.

 **Water, Sanitation and Hygiene:** The WASH Cluster has been facing a **funding crisis for the past five months, leading to unprecedented gaps in the continuity of services.** Due to a lack of funding, WASH Cluster partners have seen a rapid increase in the gaps reported in the last five months, which are expected to compound with gaps that will to appear in the next two to three months. The service gap currently stands at **3 million people in need WASH assistance** (mostly in host communities) across 739 locations (128 communities and 554 camps/informal settlement). These gaps include 1.4 people in need of water system rehabilitation/operational support, 632,000 IDPs in need of water trucking support, approximately 1 million people in need of sewerage rehabilitation or construction, 681,000 latrines and showers needing construction or maintenance, 1.2 million people in need of solid waste management support, and 1.4 million people in need of hygiene kits support.

In Idleb alone, 1.7 million people (68 percent of people in camps and 50 percent in communities) are fully dependent on water trucking. At least **70 percent of wastewater disposed was found to be untreated and 50 percent of sewerage systems were found to be non-functional.** In a recent WASH Cluster household level surveys have shown that **78 percent of people stated that they did not have access to sufficient water during the previous month.** Meanwhile, only 49 percent of camp populations have access to both soap and water and handwashing facilities, while 22 percent of camp populations have no soap at all and 18 percent have no handwashing facilities.

The lack of WASH services is already exacerbating the ability of humanitarian actors and affected populations. Cases of water-borne diseases such as diarrhoea are currently higher than in previous years and are expected to increase significantly with the reductions in WASH services being experienced. 76 percent of the population are estimated to be women and children, while 25 percent are estimated to be persons with specific needs. These groups are particularly vulnerable to any reduction in the level of WASH services and are likely to face increased protection risks as a result.

The WASH Cluster Field facilitators complemented recent assessments by looking at the quality and accountability of WASH responses across 410 IDP sites in the last two months. Field facilitators observed that average water consumption stands at 26 litres per day, however, 78 percent lack enough water storage capacity for at least one day; 18 percent of the assessed sites had no chlorination; on average 55 people were found to be sharing one latrine (with this rate reaching 171, 175 and 187 in some locations); 1,428 latrines require rehabilitation and an additional 6,700 latrine units are needed at a ratio of 25 people per latrine; 100 percent of the sites have ongoing desludging activities which resulted from the preparation and mitigation measures of the cluster to flooding; 43 percent lack access to complaint and feedback mechanisms; 8 percent of the sites did not know which agency was providing the services; and 94 percent those assessed stated that the IDPs at the site were consulted during the project design phase.

A total of **\$61 million is required to cover part of the gaps for the coming 6 months,** which includes \$13 million for the restoration of water stations, extension and operational support of networks for 1.45 million people, \$4.8 million for emergency water trucking for 632,000 people, \$1 million for solid waste management for 1.2 million people, \$8 million for two rounds of hygiene kits for 1.7 million people, \$23.8 million for latrine construction and maintenance of latrines for benefitting 681,376 people, and \$10.4 million for other WASH activities and services (desludging, sanitation networks, hygiene promotion, water storage tanks, WASH in schools, WASH in health facilities, staffing and admin, etc.).

 **Logistics:** The ongoing COVID-19 movement restrictions continue to impede the cluster's ability to implement logistics trainings.

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