Humanitarian Fund (HF) in Turkey

1st Standard Allocation Strategy Paper

March 2017
I. Introduction

- This allocation paper is issued by the Deputy Regional Humanitarian Coordinator (DRHC), in consultation with the Clusters and Advisory Board of the HF in Turkey, to set the funding priorities for the 2017 1st Standard Allocation.
- A total amount of USD 20 million is available for this allocation including up to 4 million set aside for Iraq based partners.
- This paper outlines the allocation priorities and rationale for the prioritization to support the priorities of the Syria 2017 HRP.
- This allocation paper also provides strategic direction and guidance for the allocation process.

THE HUMANITARIAN RESPONSE PLAN

AT A GLANCE*

*The 2017 Humanitarian Needs Overview (HNO) has been developed by UN agencies and partners and underpins the 2017 HRP. The Government of Syria has expressed its reservations over some of the HNO findings. This applies throughout the document.

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE 1</th>
<th>PEOPLE IN NEED</th>
<th>OPERATIONAL PRESENCE: AVERAGE NO. OF SECTORS’ REACH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide life-saving humanitarian assistance to the most vulnerable people</td>
<td>13.5M</td>
<td></td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 2</td>
<td>PEOPLE TARGETED</td>
<td></td>
</tr>
<tr>
<td>Prevent, mitigate and respond to protection risks and support the protective environment in Syria in accordance with international law, IHL, HRL</td>
<td>9M</td>
<td></td>
</tr>
<tr>
<td>Direct assistance</td>
<td></td>
<td></td>
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<tr>
<td>STRATEGIC OBJECTIVE 3</td>
<td>SERVICE DELIVERY</td>
<td></td>
</tr>
<tr>
<td>Increase resilience and livelihood opportunities and affected people’s access to basic service</td>
<td>12.8M</td>
<td></td>
</tr>
<tr>
<td>REQUIREMENTS (US$)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$3.4B</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PEOPLE IN NEED IN BESIEGED AND HARD-TO-REACH AREAS

- 0.97M living in UN declared besieged areas**
- 3.9M in hard-to-reach areas

**“The UN uses the term “besieged” as per a number of UNSC resolutions on the situation in the Syrian Arab Republic (see: UNSC Res. 1624, 2139, 2165, 2191, 2254, 2258). The use of the words siege/besieged is not endorsed by the Government of Syria.”

INTERNALLY DISPLACED PERSONS

- 6.3M
- 1M Palestinian Refugees
- 95% of Palestinian refugees (430,000 individuals) remaining in Syria are in need of humanitarian assistance

PEOPLE LIVING WITH PERMANENT DISABILITIES

- 1 out of 5 people are in need of special assistance

United Nations Office for the Coordination of Humanitarian Affairs (OCHA)
Coordination Saves Lives | www.unocha.org
I. Allocation Strategy and Rationale

II. Situation Overview

Six years into the crisis, the humanitarian situation in Syria continues to deteriorate. Over half of the country’s population has fled their homes: 4.8 million people have sought refuge in the region and beyond, and 6.3 million people are internally displaced. 13.5 million people are in need of some form of assistance. Millions of people have fallen into poverty, forced to take risky choices and facing increased protection risks. In 2017, with no end to the conflict in sight, humanitarian needs are expected to continue to grow in scale, severity, and complexity.

Syrians themselves, through state national institutions, local authorities, civil society, and humanitarian non-governmental organizations continue to be the main responders to the humanitarian crisis in Syria. Complementing their efforts, humanitarian organizations have mounted one of the largest humanitarian responses in the world. As the conflict endures with crippling consequences for now destitute households, people’s resourcefulness alone is inadequate to counter deprivation that – for millions– is only mitigated by humanitarian assistance.

Evolution of People in Need (PIN) in Syria

Humanitarian needs are becoming more severe and complex
Due to the conflict, and despite ongoing relief efforts, millions of Syrians face mounting difficulties in meeting their basic needs. A growing number of Syrians are forced to make negative and risky choices to cope. Since October 2015, it is estimated that the number of people unable to obtain the basic food required to meet their needs has risen from 6.3 million to 7 million. Consistent access to safe water for many Syrians remains a big challenge, in some areas. As a result, water has become an expensive commodity for which many families spend over ¼ of their income in purchasing it. One in three children are now out of school and a further 1.4 million are at risk of dropping out. Overall, an estimated 13.5 million people in Syria require some form of humanitarian assistance.

Life-threatening needs among crisis-affected populations and communities are a growing concern
An estimated 5.7 million people live in areas where the level of need is considered critical due to the combined impact of: (i) the intensity of conflict including acts by entities designated as terrorist by the UNSC; (ii) ratio of IDPs to host communities; (iii) scarcity of services; and (iv) prices of basic commodities, affected -in part- by unilateral coercive measures. These areas remain priority for the provision of multi-sectoral life-saving and life-sustaining humanitarian assistance. Of these, approximately 974,080 people (42 per cent of them children) live in 16 UN-declared besieged locations where movement of people and commodities is prevented, including humanitarian assistance. In these locations, the denial of civilians’ basic rights, including freedom of movement and adequate access to food, water, and health care, results in unnecessary suffering and preventable death. A further 3.9 million people in need live in hard-to-reach areas, where humanitarian organizations are unable to reach affected people in a sustained and predictable manner.

1 The UN uses the term “besieged” as per a number of UNSC resolutions on the situation in the Syrian Arab Republic.
Gender

Conditions for women have deteriorated significantly in some areas in Syria, with high exposure to violence, displacement, poverty and growing unemployment in part fueled by the impact of unilateral coercive measures, amongst other factors. Estimates indicate the female ratio of the population has increased from 49 per cent to 51 per cent, rising up to 57 per cent among IDPs. The crisis has forced many young men to flee the country to seek economic opportunities elsewhere. Women are shoudering much of the economic burden and striving to ensure livelihoods for themselves and their families. In addition, women face particular protection problems and increased restrictions on their mobility – in some areas - due to insecurity and lack of male family members who can accompany them to services. Moreover, the humanitarian situation has an impact on existing gender roles, influencing vulnerable groups’ (such as the disabled, the elderly, and chronically ill) access to assistance due to physical, social and cultural barriers.

Protection

Since the onset of the conflict in 2011, hundreds of thousands of people have been killed. Some 30,000 people suffer conflict-related trauma injuries every month, roughly 30 per cent of whom develop permanent disabilities. Parties to the conflict repeatedly breach international humanitarian law (IHL) and international human rights law (IHRL). In some instances, attacks appear to directly target civilians and civilian infrastructure, are indiscriminante, or breach other IHL rules protecting civilians. Tens of thousands of Syrians are missing since the conflict began, thousands in circumstances suggesting forcible displacement. Others have been subject to torture and other forms of ill treatment in detention. The Islamic State of Iraq and the Levant (ISIL) and affiliated groups use suicide bombs in civilian areas outside its control, while in ISIL areas of influence, public beheadings, physical mutilation, the sexual enslavement of women and girls, indoctrination and forced recruitment of children continue unabated. Persistent and extreme violence, forced displacement, family separation, lack of civil documentation, and an increase in poverty, further limiting coping mechanisms, have extended the scope and severity of protection threats faced by people in Syria.
III. Allocation Strategic Priorities

The strategic objectives for the 1st Standard Allocation 2017 build upon the humanitarian community's efforts in 2016 and reflect the complexity of the humanitarian situation in Syria today. Under the framework of the 2017 HRP, the humanitarian community aims to provide up to nine million people in need with direct assistance and 12.8 million people in need with improved access to basic social services. Specifically the Allocation will fund projects that support the achievement of the HRP Strategic Priorities, namely:

Objective one: Provision of life-saving humanitarian assistance ensuring that needs-based, multi-sectoral humanitarian assistance reaches the 5.7 million people living in areas with the highest severity of need.

Objective two: Enhance the prevention and mitigation of risks and to respond to protection needs related to a violent and protracted crisis, including by promoting international law, IHL and HRL.

Objective three: Increase resilience and livelihood opportunities as well as improve affected people’s sustained access to basic social services and to bolster household- and community-level resilience to shocks.

Programming under this Allocation should adapt to the particular vulnerabilities and access opportunities of individuals and communities to reduce risk of exposure to violence and strengthen resilience. Projects achieving the highest gender marker code signifying that the project has made significant efforts to address gender concerns or the principal purpose of the project is to advance gender equality will also be prioritized.

In addition to the above, the allocation will take into account severity of need as per map above, Clusters that were underfunded in 2016 (see table below) and throughout we would like to underscore the humanitarian community’s joint commitment to support and reinforce the response capacity of national humanitarian actors and therefore priority will be given to projects submitted by national NGOs.

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Requirements</th>
<th>Funded</th>
<th>Unmet</th>
<th>% Unmet</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDUCATION</td>
<td>200.2</td>
<td>99.2</td>
<td>101</td>
<td>50%</td>
</tr>
<tr>
<td>FOOD SECURITY</td>
<td>1238.9</td>
<td>512.7</td>
<td>726.2</td>
<td>41%</td>
</tr>
<tr>
<td>EARLY RECOVERY</td>
<td>148.5</td>
<td>54</td>
<td>94.5</td>
<td>36%</td>
</tr>
<tr>
<td>WASH</td>
<td>252</td>
<td>74.2</td>
<td>177.8</td>
<td>29%</td>
</tr>
<tr>
<td>NUTRITION</td>
<td>51.2</td>
<td>13.8</td>
<td>37.4</td>
<td>27%</td>
</tr>
<tr>
<td>HEALTH</td>
<td>440.8</td>
<td>113.6</td>
<td>327.2</td>
<td>76%</td>
</tr>
<tr>
<td>PROTECTION</td>
<td>236</td>
<td>47.7</td>
<td>188.3</td>
<td>20%</td>
</tr>
<tr>
<td>SHELTER NFI</td>
<td>525.5</td>
<td>68.1</td>
<td>457.4</td>
<td>13%</td>
</tr>
<tr>
<td>CCCM</td>
<td>25.4</td>
<td>2.1</td>
<td>23.3</td>
<td>8%</td>
</tr>
</tbody>
</table>

Syria Humanitarian Response Plan (HRP 2016) Funding by Cluster

<table>
<thead>
<tr>
<th>Cluster</th>
<th># of beneficiaries</th>
<th>Reserve</th>
<th>Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>33</td>
<td>2.8 M</td>
<td>1.2 M</td>
</tr>
<tr>
<td>Food Security</td>
<td>16</td>
<td>.4 M</td>
<td>.4 M</td>
</tr>
<tr>
<td>Water Sanitation and Hygiene</td>
<td>16</td>
<td>.7 M</td>
<td>.4 M</td>
</tr>
<tr>
<td>Camp Coordination/Management</td>
<td>16</td>
<td>1 M</td>
<td>.4 M</td>
</tr>
<tr>
<td>Protection</td>
<td>16</td>
<td>21 k</td>
<td>.4 M</td>
</tr>
<tr>
<td>Education</td>
<td>n/a</td>
<td>6 M</td>
<td>.1 M</td>
</tr>
<tr>
<td>Emergency Shelter and NFI</td>
<td>16</td>
<td>.2 M</td>
<td>.3 M</td>
</tr>
<tr>
<td>Nutrition</td>
<td>n/a</td>
<td>.7 M</td>
<td>.1 M</td>
</tr>
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IV. Cluster Allocation

**Shelter / NFI Cluster – $2.5 million**

The issues related to the current situation are threefold: firstly, the **reduced access** (due to lack of authorizations and/or security constraints) to certain areas in Northern Syria (i.e. Al Bab, Raqqa, Hassake) limits the geographical scope and impact of the intervention;

Further, the **competing priorities** faced by the S/NFIs members when responding to sudden multiple emergencies while also carrying out their regular programmes, take a toll on their resources and capacity; Finally, almost 6 years into the Syrian crisis **over 60% of the Shelter interventions are still emergency based.** In order to provide more durable Shelter solution to the IDPs and concur in establishing a conducive environment to a safe integration in and/or return to the targeted area, resources should be directed towards medium and long term Shelter interventions.

The priorities are therefore oriented towards addressing the aforementioned issues. Namely, the Cluster aims to:

- Prioritize assistance provided in areas with limited coverage;
- Support the establishment of SNFI Rapid Response Mechanism;
- Encourage the development of Medium and Long Term Shelter solutions;

In light of the above, from an operational perspective, the Cluster recommends funds to be allocated to the following activities:

- **Rapid Response S/NFIs mechanism and Contingency NFI stock**;
- **Medium and Long Term Shelter Interventions**;
- Priority should be given to projects aimed to be **implemented in areas that received less coverage in the past**;

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<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
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</table>
| Medium and Long Term Shelter Interventions | Idleb, Aleppo, Ar Raqqa, Al Hasakeh and Hama Governorates | - Medium Term: Support and provision of transitional housing solutions to mid-long term IDPs or returnees (rental assistance, rehabilitation of buildings and ensuring minimum standard of conditions in unfinished urbanization projects)  
- Long Term: Support to sustainably repair/rehabilitate housing and related community/public infrastructure and facilities., incl. support to owners/tenants/host families |
| Establishing Emergency Response Mechanism | Idleb, Aleppo, Ar Raqqa, Al Hasakeh and Hama Governorates | - Funding the contingency stock of core NFIs and Supporting the set-up of Rapid Response Teams |
WASH Cluster – $2.7 million

More than 5 years of conflict is having a negative impact on the sector that has not been adequately addressed through humanitarian aid that mainly focuses on the most obvious physical problems. This gap will only increase with the lack of sustained and comprehensive support. Based on the pattern of achievements vis-à-vis targets, water and solid waste seem to be more on track compared to sewage disposal and treatment. On the other hand, support to sustained services should go hand in hand with the repair/rehabilitation of water systems.

The lack of chlorination infrastructure is an anomaly that has to be rectified and the costs are not expected to be substantial while the positive effect this would have on water quality is critically important. Rehabilitation of systems with sustained operations and maintenance activities should continue to be a priority because it is cost-effective. Provision of emergency services to IDPs and the highly vulnerable population in the form of access to safe water, hygiene items, sanitation and solid waste management will be an ongoing priority.

The suspension of support by some of the major donors to major cluster INGO members is creating a critical gap that cannot be easily absorbed. Donors as well as the cluster are exploring possibilities of continued support to avoid such critical gap.

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<tr>
<th>Priority</th>
<th>Location(s)</th>
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</table>
| Emergency WASH services for camps, collective centres and host communities | Idleb, west Aleppo, Afrin, Jarabulus and Menbij locations listed as hard to reach or besieged. Existing informal settlements with high WASH risk factors. | • Direct safe water provision.  
• Distribution of WASH NFI such as water containers, aqua tabs, and hygiene items.  
• Emergency sanitation and solid waste management.  
• Hygiene promotion activities. |
| Comprehensive rehabilitation and support to O&M of existing WASH infrastructure | Locations showing a combination of high concentrations of IDPs, high levels of need (based on the infrastructure survey data) | • Structural/civil and electromechanical repairs.  
• Adding new water sources (if needed).  
• Extending coverage through an existing system.  
• Support to operations and maintenance components including fuel, water purification chemicals, fast moving spares, fuel for standby generators and stipends to operators and technicians.  
• On the job refresher capacity building to operators and technicians.  
• Re-establish a cost-recovery system to support sustainability. |
| Support leishmania prevention measures | Hama, Aleppo and Idleb governorates | • Indoor Residual Spraying (IRS).  
• Training of staff.  
• Sensitization of people. |
Education Cluster – $1.9 million

In Syria 5.82 million children and youth from pre-school to secondary school-age and an additional 270,000 education personnel, are in need of education assistance. An estimated 1.75 million children and youth from the school-year 2015/16 are out-of-school and 1.35 million are at risk of dropping out. Schools and learning environments are unsafe, overcrowded and under-resourced. One in three schools are damaged, destroyed, inaccessible or used as collective shelters or other purposes. The formal education system has lost a total of 150,000 education personnel, including teachers. Indiscriminate attacks on schools continue to take place killing and injuring students and education personnel, damaging and destroying schools.

With HF funding the cluster aims to provide education in areas that have been systematically neglected and provide education services (rather than just supplies or ad hoc support) to these areas. All but one of the prioritized locations are besieged, hard to reach, militarily encircled or camps/settlements. All the non-besieged areas have a severity ranking of between four and six, with nearly 60 percent having a severity ranking of six.

It is imperative to provide educational support that brings children to their expected learning level by providing a protective and productive education environment. Learning spaces should provide sufficient water, sanitation, light, ventilation and heat. Adequate numbers of furniture, teaching tools, text books, teaching/learning supplies, recreational kits, fire buckets/blankets/extinguishers, first aid kits, etc. should be supplied. Education personnel should be adequately trained, supported, coached and remunerated. Communities and parents should be encouraged to be active supporters of learning spaces and their children’s education. Education programs should focus on modalities that focus on condensed learning such as catch-up classes, accelerate learning and literacy/numeracy and ideally lead to pathways to formal education. PSS, back to learning campaigns and parent, teacher and community associations that promote involvement in education, should be integrated into all education services. To promote equal access to education services activities should be designed to be as inclusive as possible.

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<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
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<tbody>
<tr>
<td>Safe and equitable access to non-formal education for crisis-affected children 5 to 17</td>
<td>Camps and informal settlements: Jarabulus (rural areas) &amp; Alghandoora; Jarabulus; Aleppo Aghtrin, Mare’, Suran &amp; Azaz; Azaz, Aleppo Besieged, militarily encircled and hard to reach areas:</td>
<td>• Provide children with catch-up classes, accelerate learning, literacy and numeracy • Provide teachers and education personnel with teaching resources, kits and guides. • Provide children learning supplies and materials including recreational kits • Provide textbooks for children • Establish temporary learning spaces (tent, caravan), or cost effective classroom construction • Depending on the contest it may be relevant to diversity learning spaces to reduce the effects of bombardments, exposure to risks while traveling to school, etc. • Provide a protective learning environment (utilities, heating, furniture, WASH, minor rehab, running costs) • Support or establish school-based governance and accountability mechanisms (PTAs, School Councils) to support school operations Conduct Back-to-Learning (BTL) campaigns (media outreach, awareness raising activities, community mobilization) • Train teachers and education personnel on Education in Emergencies (EiE) and national/INEE Minimum Standards, child-centered and protective pedagogy and psychosocial support and referral mechanisms • Provide teachers and education personnel with incentives</td>
</tr>
</tbody>
</table>
According to the FSL Humanitarian Needs Overview (HNO 2017), assessments and data from 2016 indicate a total of 9 million people are in need of food, agriculture and livelihoods-related assistance. This includes an estimated 7 million food-insecure people and a further 2 million people at risk of food insecurity. Within this 9 million people in need, an estimated 5.1 million people are in need of livelihoods/agriculture assistance. Furthermore, it is estimated that an additional 2 million people may be newly affected by the crisis.

The combination of several negative factors have led the FSL Cluster to prioritize the support to agriculture and livelihoods but also to strengthen the response at community level in terms of infrastructure rehabilitation and value chain support. Scarce availability and access to quality inputs; insufficient support to agriculture production; insufficient knowledge or support for best agricultural; uncertainty about storage capacity and marketing opportunities; risks of planted crops losses; farmers inability to make a sufficient livelihood from agriculture activities; risk of adopting negative coping strategies as cash crops planting, selling of productive assets (livestock and land) unemployment.

The priority is therefore to strengthen and sustain the agriculture/livelihoods activities at HHs and Community level by the provision of quality inputs, knowledge transfer (trainings and workshops), financial support, storage, infrastructure rehabilitation (bakeries, mills, olive mills, storage, etc.), marketing opportunities and income generating initiatives. Building and support of local/community social initiatives such as Women associations, Farmers unions, Cooperatives and Associations of farmers/producers are also areas to be considered where the social and cultural environment allows.

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<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
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</table>
| Livelihoods Income generating activities | All accessible areas focusing on agro-ecological zones for the agriculture/livestock activities, cereal and vegetable production; Hard to reach and besieged areas as per the recently revised list | • Training on both agriculture and livestock  
• Agricultural/livestock inputs & equipment distribution (cereals production, vegetable production, backyards kits, etc.)  
• Cash/vouchers programmes linked to agriculture inputs  
• Animal treatments and vaccinations  
• Provision of start-up kits for jobs in the agriculture support services (food processing, etc),  
• Establishment/strengthening of community based initiatives (associations, women groups, cooperatives, farmers unions, producers); |
| Community level livelihoods protection | All accessible areas focusing on agro-ecological zones for the agriculture/livestock activities, cereal and vegetable production; Areas where productive infrastructures where destroyed or damaged; Hard to reach and besieged areas as per the recently revised list | • Rehabilitation of services and infrastructure also utilizing cash for work (bakeries, mills, nurseries, irrigation infrastructures, etc..);  
• Prevention/preparedness/disaster risk reduction including fire risk reduction for crops at the last stage before harvesting Income generation activities, early warning activities  
• Technical workshops for technical groups within the community and ToT;  
• Animal vaccination, irrigation services, mobile veterinary service, mobile technical assistance; |
<table>
<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
</tr>
</thead>
</table>
| **Livelihoods**                              | All accessible areas focusing on agro-ecological zones for the agriculture/livestock activities, cereal and vegetable production; Hard to reach and besieged areas as per the recently revised list | • Training on both agriculture and livestock  
• Agricultural/livestock inputs & equipment distribution (cereals production, backyards, etc..)  
• Cash/vouchers programmes linked to agriculture inputs  
• Animal treatments and vaccinations  
• Provision of start-up kits for jobs in the agriculture support services (food processing, etc),  
• Establishment/strengthening of community based initiatives (associations, women groups, cooperatives, farmers unions, producers); |
| Income generating activities                 |                                                                             |                                                                                                                                                                                                                       |
| Provision of quality inputs                  |                                                                             |                                                                                                                                                                                                                       |
| Assets protection (livestock)                |                                                                             |                                                                                                                                                                                                                       |
| Support the income generating activities at HHs and Community level |                                                                             |                                                                                                                                                                                                                       |
| **Community level livelihoods protection**   | All accessible areas focusing on agro-ecological zones for the agriculture/livestock activities, cereal and vegetable production; Hard to reach and besieged areas as per the recently revised list | • Rehabilitation of services and infrastructure also utilizing cash for work;  
• Prevention/preparedness/disaster risk reduction including fire risk reduction for crops at the last stage before harvesting Income generation activities, early warning activities  
• Technical workshops for technical groups within the community and ToT;  
• Animal vaccination, irrigation services, mobile veterinary service, mobile technical assistance; |
| Rehabilitation of key damaged infrastructures, protection of fields/crops from hazards |                                                                             |                                                                                                                                                                                                                       |
| Provision of essential/extension services and knowledge transfer |                                                                             |                                                                                                                                                                                                                       |
Protection Cluster – $2.4 million

Syria has witnessed a significant deterioration in the humanitarian and security situation across the country. Chronic human rights violations occur in the context of widespread insecurity and disregard for international humanitarian law; the conflict is characterized by the absence of effective protection for large numbers of civilians. In addition, the conflict, which has negatively impacted on the effectiveness of protection institutions, and social and family protection networks and structures, has increased the vulnerability of specific groups.

Access to undertake sustained protection interventions remains challenging, primarily due to increasing insecurity, administrative obstacles and limited capacity/presence on the ground. It is a key priority to increase specialized protection services and expand protection monitoring and enable the strengthening of communities ability to cope on their own through community-based protection interventions in areas of Syria and in communities that are hard to reach, besieged or where no protection actors currently operate.

The Child Protection Sub-Cluster’s focus will be on expanding community-based child protection mechanisms to improve protection of children from violence, abuse and exploitation. Partners will provide immediate structural and mobile psychosocial support for children and care givers while strengthening sustainable community-based support mechanisms to prevent family separation and address the needs of unaccompanied boys and girls.

GBV is ever present in the life of women and girls in Syria and yet specialized services for GBV survivors and interventions for women and girls are limited. For this allocation the GBV Sub Cluster will prioritize underserved areas and ex ISIL areas, promoting the provision of GBV services out of women and girls safe spaces as well as mobile team. In line with HRP Programs with a focus on girls programming will be prioritized. Increasing the GBV response coverage requires also investment in quality and strengthening referral systems through SOPs roll out. Lastly based on the achievements of the Aleppo emergency response, the Sub Cluster aims at supporting partners in preparedness and promoting effective way to respond to different new emergencies using the GBV SC emergency response model.

<table>
<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
</tr>
</thead>
</table>
| Populations at risk are protected from the consequences of the conflict through tailored protection activities | All besieged and hard to reach communities that are under-served (information accessible via the 4Ws and through consultation with the Cluster Coordinators); and areas preparing for Raqqa displacement as per the WoS Raqqa Plan. | - Protection monitoring  
- Specialized protection services/activities, including:  
  - Legal counselling and information services, including providing advice on civil documentation or housing, land and property.  
  - Community-based protection services, including establishing community centres to provide case management, referrals and PSS support; mobile protection outreach teams; activities to strengthen communities’ resilience and self-protection strategies.  
- Mobile emergency response preparedness Capacity-building, specifically with local authorities |
| Improve the resilience of the affected communities by increasing their access to sustained community-based child protection services. | Raqqa, Aleppo, Idlib, Hama and Homs governorates | - Provision of specialised child protection services through case management, targeting interventions aimed at addressing vulnerabilities related to child labour, family separation, child recruitment and child marriage  
- Expand or strengthen existing structured psychosocial support interventions targeting children, caregivers and teachers through community outreach and safe spaces  
- Strengthen the capacity of community members to prevent and respond to child protection issues  
- Awareness raising on child protection concerns, including prevention of family separation, PSS self-care, ERW, worst forms of child labour |
<table>
<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
</tr>
</thead>
</table>
| Survivors have access to GBV response services and measures are in place to reduce risks of GBV, including during new displacement and with increased geographic coverage by cluster members | Information on service gaps confirmed through sub cluster 4W Raqqa, Aleppo, Idlib, Hama and Homs governorates | • Expansion of GBV services, through clinics, Women and Girls Safe Spaces, community centers and mobile units, with a focus on survivor centered psychosocial support/case management  
• Adolescent girls focused GBV programming  
• GBV emergency response package is timely implemented during new displacement or in besieged and hard to reach areas  
• Strengthening of referral system through SOPs and CMR protocol roll out support within service focused programs (not standing alone capacity building programs) |
| Mine action services in Syria are expanded by strengthening capacity of Syrian partners. | Hard to reach besieged locations, and areas with limited or no mine action activities. Information on services gaps confirmed through sub-cluster 4Ws. Hazard data collection as above, | • Survey and data collection on hazardous areas, accidents and casualties and the impact of explosive hazards on besieged and hard to reach areas.  
• Risk education, with an emphasis on joint programming with other sectors where appropriate.  
• Marking and clearance activities in areas that are accessible to international actors. |
Formal / informal settlements and collective centres are a refuge of last resort for the IDPs in northern Syria. There are now over 360,000 individuals who have residing in IDP sites in Northern Syria (planned camps, informal tented settlements, transit camps, and collective centres). Essential service providers continue to provide life-saving services, but are now straining under the increasing population and the proliferation of new informal settlements. Gaps even in these essential services are growing; 10% of residents of these informal settlements do not have full access to potable water, 18% do not have access to proper sanitation, 29% do not have access to full access to regular food, and nearly half of IDP sites no longer have a dedicated NFI/shelter focal point.

While service provision struggles, the need continue to increase. Each month there are typically 30,000 more individuals who flee into the governorates with the largest IDP population. Typically, the population of these informal tented settlements increases by almost 3% each month with peaks around during large sudden displacements. There are genuine concerns that the fighting in Aleppo and Ar Raqqa governorates could cause these numbers to spike. Whole of Syria displacement scenarios estimate that as many as 400,000 may become displaced in this upcoming wave of fighting, many of which will be forced to flee to camp like settings.

The CCCM members have identified the following key priorities for the first allocation.

- Site Infrastructure: Repair, Maintenance, and Installation
- Strengthening the Shelter Situation in IDP Sites
- Establishing Planned IDP Sites with Formal Management Structures
- Addressing Persistent Gaps in IDP sites with accountable management.

<table>
<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
</tr>
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</table>
| Site Infrastructure: Repair, Maintenance and Installation | Idleb: Dana, Harim, Salqin, Jisr-al-Shugur, Aleppo: Afrin, Azaz, Jarablus, Menbij | • Restoration of disused critical infrastructure and installation of multi sectoral spaces  
• Installation of key infrastructure such as gravelled access roads, fencing, lighting, fire-breaks and WASH infrastructure  
• Structural repairs and maintenance of the key infrastructure with protection mainstreamed and solid vulnerability criteria  
• Establish and support participatory approaches though gender balanced IDP Committees  
• Weatherization of key infrastructure |
| Strengthen the Shelter Situation in IDP Sites | Idleb: Dana, Harim, Salqin, Jisr-al-Shugur, Aleppo: Afrin, Azaz, Jarablus, Menbij | • Tent Replacement in IDP Sites  
• Installation of Tent Insulation for all weathers.  
• Tent Repair in IDP Sites  
• Transition to semi-permanent/ more durable shelters in long-standing IDP sites with clear vulnerability criteria.  
• Structural repairs to Collective Centres |
| Establishing Planned IDP Sites with Formal Management Structures | Idleb: Dana, Harim, Aleppo: Jarablus, Menbij | • Site planning and camp set up for new waves of displacement.  
• Opening of temporary transit centres  
• Registration and reception of new IDPs.  
• Direct management of IDP sites |
| Addressing Gaps in IDP sites with accountable management | Idleb: Dana, Harim, Salqin, Aleppo: Afrin, Azaz. | • Providing temporary sector specific activities in camps with accountable management such as food provision, hygiene kit delivery, increased water provision, teacher stipends.... |
In 2016, the health situation in Syria continued to deteriorate. Attacks on health facilities and services continued unabated throughout 2016. During this year, there have been reports of up to 105 verified attacks on hospitals and health care centres across Syria, with 14 health care workers killed and 40 injured. Attacks on health care, risk the lives of health care workers and their patients, destroy health infrastructure, resulting in the closure and disruption of life saving services, affecting the entire vulnerable population in the area.

Critical shortages in the availability of staff, drugs and medical supplies, and damaged infrastructure have seriously disrupted the provision of life-saving healthcare. Over the course of 2016, 3.5 million people are expected to need surgical and trauma services, including 3.2 million emergency consultations, 300,000 surgeries and 180,000 war-wounded cases. Moreover reproductive health care needs to be strengthened. Local and regional health services are highly fragmented with no clear referral pathways for those in need of specialized medical care. Lack of basic utility services, including electricity, fuel, safe drinking water and basic sanitation services, have increased the vulnerability to disease outbreaks.

Although the levels of acute and chronic malnutrition reported among children under five are within the acceptable levels based on the World Health Organization classification in accessible locations, the situation is not promising for besieged and hard to reach locations. According to the recent SMART surveys the level of stunting was found to be clearly deteriorating compared to the national levels. These findings are potentially reflecting a longer term inadequate dietary intake, repeated infections as well as poor feeding practices. Additionally poor levels of Global Acute Malnutrition were recorded among women of child bearing age, which could further deteriorate and trigger a vicious cycle of intergeneration transmission of under-nutrition and poverty.

The Health and Nutrition Clusters will prioritize:

- Rehabilitation, and fortification of damaged health facilities
- Procurement and provision of drugs and medical supplies in Hard to reach areas.
- Package of essential health services within a local/regional network approach;
- Trauma care and associated disability and mental health issues
- Deliver quality, life-saving, curative services for at least 60% of SAM and MAM cases in all children under five, and pregnant and lactating women (PLW);
- Provide access to programmes preventing malnutrition (including blanket supplementary feeding programmes (BSFP) to children U2, vitamin A and micronutrient supplementation, deworming and infant and young child feeding (IYCF)), for at least 80% of vulnerable people and integration of nutrition response with other sectors.
- Establishing and maintaining surveillance/ Early Warning Alert and Response Network.
- Strengthen linkages and advocate for programs that address the underlying causes to the nutrition crisis.

<table>
<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
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</table>
| Provide life-saving and life-sustaining humanitarian health assistance with an emphasis on those most at risk and in need. | Besieged and HTR areas Idleb, Hama, Aleppo, Al hasakeh & Latakia governorates | Scaling up provision of physical rehabilitation services at facility level  
Strengthening of medical referral system |
<p>| Provide life-saving and life-sustaining humanitarian health | Besieged and HTR areas Idleb, Hama, Aleppo, Al | Piloting, validation and scale-up of an Essential Primary Health Care Package. |</p>
<table>
<thead>
<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
</tr>
</thead>
</table>
| assistance with an emphasis on those most at risk and in need.         | hasakeh & Latakia governorates                                               | • Strengthening procurement and provision of essential medicines and medical supplies and equipment.  
• Strengthening and expanding the communicable disease surveillance and response system. (EWARNs)    
• Scaling up and supporting provision of mental health services at the community and health facility level.  
• Strengthening management and primary and secondary prevention of non-communicable diseases. |
| Provide life-saving and life-sustaining humanitarian health assistance with an emphasis on those most at risk and in need. | Besieged and HTR areas Idleb, Hama, Aleppo governorates                   | • Strengthening comprehensive care for trauma and injuries through provision of phased trauma management and care for associated disability.  
• Strengthening provision of EMONC Services. |
| Improve access to basic services and livelihoods by supporting community resilience, institutional and response capacity | Besieged and HTR areas Idleb, Hama, Aleppo governorates                   | • Rehabilitating and reinforcing health facilities, including physical structure, equipment/supplies to provide safe and secure environments for health service delivery.  
• Training, retaining and increasing the capacity of health care providers and community health care workers. |
| A- Scale up and strengthen lifesaving preventive nutrition services focusing on appropriate infant and young child feeding as well as joint programming with other sectors | Sub-districts in Aleppo, Idleb and Hama, accessible sub district from Gaziantep cross border | • Scale up Infant and young child feeding (IYCF) – E strategy  
• Distribution of multiple micronutrient to children under 2 years & PLW  
• Strengthen community based interventions through capacity building  
• Strengthen reporting and monitoring of nutrition activities  
• Capacity building of other sectors partners on nutrition such as food security, protection, CCCM and WASH |
| B- Improve equitable access to quality lifesaving curative nutrition services and Strengthening robust evidence based system for Nutrition | Sub-districts in Aleppo, Idleb and Hama, accessible sub districts from Gaziantep cross border | A)  
• Scale up Infant and young child feeding (IYCF) – E strategy  
• Distribution of multiple micronutrient to children under 2 years & PLW  
• Strengthen community based interventions through capacity building  
• Strengthen reporting and monitoring of nutrition activities  
• Capacity building of other sectors partners on nutrition such as food security, protection, CCCM and WASH |
|                                                                        | Besieged and hard to reach areas including: Doma, Kafr Batna,Misraba, Kafr Laha, Talbeseh. |                                                                                           |
| B)                       | Sub-districts in Aleppo, Idleb and Hama, accessible sub districts from Gaziantep cross border | B)  
• Strengthen systematic screening and referral for malnutrition treatment  
• Capacity building of health staff & community health workers on community management of acute malnutrition (inpatient and outpatient)  
• Integration of CMAM management in PHCs  
• SMART surveys  
• Establishment of nutrition surveillance system |
Early Recovery Sector – 1.5 million

Throughout the past years, living conditions among the majority of the Syrian population have deteriorated considerably across the country, but the severity of deterioration varies between regions according to the intensity of conflict. In parts of the country, shifting conflict lines have subjected populations to heightened levels of insecurity, rendering many areas inhabitable and precipitating large IDP movements to relatively safer havens strained to cope with an influx of people and additional pressures on resources and infrastructure. While millions have sought refuge in areas less affected by active fighting, a large part of the population remains in increasingly desperate conditions in areas highly affected by conflict.

The prolonged nature of the crisis is negatively and dramatically impacting the lives and livelihoods of the majority of the Syrian population with increased levels of poverty, unemployment, recurrent displacement, and loss of assets. The basic and social and services are limited and/or overstrained either due to damaged infrastructure or to increased number of displaced in host communities. The deterioration of inter/intra-communal dynamics and coping mechanisms is further straining social cohesion.

The priorities are: 1) to create a conducive environment for the implementation of labour-intensive schemes; (2) the rehabilitation and the restoration of disrupted livelihoods complemented by social protection schemes.; (3) the support to the Resilience of individuals and communities, particularly focussing on the restauration of power generating systems for electricity generation. Electricity production, transmission and distribution are not only heavily affected by on-going hostilities but also faced serious shortages in spare parts for adequate operation and maintenance. While the national electricity generating capacity stood at 4,800 MW in 2011, damage to electricity generating facilities has reduced the country's effective generation capacity to 2200 MW in 2016. Currently 11.8 million people are in need of such services. On average, residents of cities suffer from blackouts for 16 hours per day, while people in rural areas witness power outages up to 18 hours per day.

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<tr>
<th>Priority</th>
<th>Location(s)</th>
<th>Recommended activities</th>
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</table>
| Implementation of labour-intensive schemes | Rural Damascus, Idleb, Hama, Al Hasekeh, Aleppo, Hama | • Establish and implement Cash-for-Work and labour-intensive schemes for debris and solid waste management and rehabilitation in shelters, affected neighbourhoods and host communities.  
• Establish and implement Cash-for-Work and labour-intensive schemes for the restoration and rehabilitation of damaged infrastructure in relatively stable areas, areas of return and hosting communities |
| Rehabilitation and restoration of disrupted livelihoods complemented by social protection schemes | Rural Damascus, Idleb, Hama, Al Hasekeh, Aleppo, Hama | • Support socio-economic recovery of micro- and small-scale enterprises through grants, loans and assets replacement with particular focus on small business. |
| Support to the Resilience of individuals and communities | Rural Damascus, Idleb, Hama, Al Hasekeh, Aleppo, Hama | • Electricity and energy sources repair and rehabilitation |
V. Eligibility for Funding

- Only partners that have passed the OCHA HF Capacity Assessment and “Due Diligence” requirements and are active members of the Clusters are eligible to submit proposals for funding.
- Eligible Partners may only submit a maximum total of 2 Project Proposals across all clusters. Partnerships between new and existing HF partners are strongly encouraged in line with the HF’s capacity development objectives.
- Partners can submit integrated multi-sector projects between no more than two interlinked clusters such as Shelter and CCCM. Please note that multi sector projects in camps fall under the purview of the CCCM Cluster. Please consult relevant cluster coordinators in case of joint submissions.
- Minimum Project Budget is US$ 300,000 per proposal and maximum is determined by the Partner Ceiling and Cluster Allocation.
- Partner ceilings are determined by the risk level (please see HF Operational Manual Page 11-12) and amount of funding organisation can apply for is ceiling amount minus the funded secured from HF so far (including all allocations up to date).
- Partners who reached their funding ceiling may apply under this allocation ONLY in partnership with other HF national partners who have not reached their ceiling and provided that the contracting partner is the partner who has not reached the ceiling. This is to support the capacity building of smaller NGOs.
- Proposals of partners with 2 or more outstanding reports that are overdue by 3 months or more on the submission date (2nd April 2017) will not be considered for funding unless the delay in reporting is caused by project revision process on the GMS or other GMS related issues.

VI. Gender Marker

1. The HF allocations will utilise the Inter Agency Steering Committee (IASC) Gender Marker to promote gender mainstreaming. This is a self-applied coding system that checks the extent to which gender equality measures have been integrated into project design. It recognizes that differences between women, men, boys and girls need to be described and logically connected through three key sections of a proposal:
   a. The need assessment (context/situation analysis),
   b. The activities and the outcomes.
   c. When this is done, a project is more likely to meet the different needs of men, women, boys and girls and contribute to greater equality.

2. In all clusters, HF funding will prioritize projects achieving the highest gender marker code signifying that the project has made significant efforts to address gender concerns or the principal purpose of the project is to advance gender equality. Only projects which scores Gender 2A and 2B will be considered for the funding. Exceptions to this requirement must be defended with the intent to build awareness and capacity to ensure the project can achieve the required gender marker during the project period.

3. The gender marker is only one tool used to promote gender equality. The HF encourages the use of participatory approaches, involving affected communities (male and females) in needs assessment, implementation and monitoring and evaluation, fielding gender balanced assessment and monitoring teams, developing gender indicators and ensuring programming tools (surveys, strategies, objectives) are gender sensitive.

4. For more information or guidance, please contact the cluster gender focal points or Inter-agency Gender Advisor (GENCAP/IASC), April Pham at phamnt@who.int or Wihad Wiess, HF Gender Focal Point and Programme Officer at wiess@un.org. Please also consult the following link for a specific tip sheet for each cluster. The tip sheet includes a form to assist teams in reviewing project Gender Marker codes. These and other resources are available in four languages (including Arabic) at:

http://www.humanitarianresponse.info/themes/gender/the-iasc-gender-marker
There is also a link to the gender E-learning course “Different needs, equal opportunities: Increasing effectiveness of humanitarian action for women, girls, boys and men,” which all humanitarian staff are encouraged to take. It is being hosted by UN Women’s Training Centre eLearning-Ca and can be accessed by all via the following link: https://trainingcentre.unwomen.org/course/view.php?id=35.

You will need to register online on the web-site - but as mentioned - it is available to all. The course is available in English and French and takes approximately 2 hours to complete. To gain a certificate, participants need to complete the Introduction section, one of the Cluster Theme sections and the Conclusion section.

VII. Project Proposal Preparation and Submission

Proposal Preparation

1. All project proposals should be submitted via Grant Management System (GMS) by Sunday, 2nd April 2016 Midnight - Turkish time. Any submission after this date will not be accepted. GMS registration is obligatory for all eligible partners prior to the project proposal submission with due diligence component is approved. GMS is a web-based platform that supports the management of the entire grant life cycle for the HF.  https://cbpf.unocha.org/

2. Projects in Besieged and Hard to Reach locations (B&HTR) must list location and beneficiary numbers down to community level on the GMS, proposals that do not will be rejected.

3. Projects in Besieged and Hard to Reach locations (B&HTR), should also indicate an alternate target location should access to the proposed location prove not possible during project implementation.

4. Once you complete your registration on the GMS, please login to CBPF GMS Support portal and read instructions on how to submit a project proposal. http://gms.unocha.org/content/partner

5. Project proposals should be prepared in line with the strategic objectives of the HRP and the Allocation Paper. This needs to be supported by clear log frames with outcomes, outputs, SMART indicators and detailed activities. (Please refer to Annex 22 for a sample Project Proposal Template).

6. Organisations should consult with relevant cluster coordinators during the proposal preparation phase.

Budget Preparation

7. All project proposals must have a detailed budget outlining all the project related expenditures under relevant budget lines. Please refer to Operational Manual Annex 21 Project Budget Template and Annex 9 Budget and Due Diligence Checklist for further details.

8. Budget proposals must reflect the budget breakdown of the planned costs and clearly outline units, quantities and percentages. Partners should not use lump sum amounts and provide bill of quantities (BoQs) including list of items and costs per item to total the unit cost for the planned expenditure.

9. Provide a budget narrative (as an essential component of the budget) that clearly explains the object and the rationale of any budget line. For example, shared costs, large/expensive assets, and costs/equipment required to support the regular operation of the implementing partner, are clear cases where the provision of details will be necessary in the budget narrative.

10. For further guidance on budgeting (eligible and ineligible costs, direct or indirect costs) please also refer to the Operational Handbook for CBPF pages 35-39.
Start date and eligibility of expenditure

11. The HFU will liaise with the implementing partner to determine the start date of the project. The earliest possible start date of the project is the date of signature of the grant agreement by the partner. The agreed upon start date will be included in the grant agreement. If the signature of the grant agreement occurs after the agreed upon start date, the date of the signature of the grant agreement takes precedence. The DRHC can then sign the grant agreement.

12. Upon signature by the DRHC, the HFU notifies the partner that the project has been approved, and sends the agreement for counter signature. Once the partner has countersigned, the agreement will be sent to OCHA FCS Finance Unit in New York for the final signature. Eligibility of expenditures will be determined by the date of implementing partner’s signature of the grant agreement.

VIII. Timeline

<table>
<thead>
<tr>
<th>Phase</th>
<th>Step</th>
<th>What</th>
<th>Who</th>
<th>Key Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>The launch of the allocation paper</td>
<td>Allocation paper</td>
<td>DRCH, OCHA</td>
<td>17th March</td>
</tr>
<tr>
<td>5</td>
<td>Proposal Development Phase</td>
<td>PP Preparation</td>
<td>IPs</td>
<td>17th March to 31st March</td>
</tr>
<tr>
<td>6</td>
<td>Deadline for submission of project proposals</td>
<td>Full project proposals</td>
<td>IPs</td>
<td>2nd April Midnight</td>
</tr>
<tr>
<td>7</td>
<td>Strategic &amp; First Technical Review</td>
<td>Assessment PP feedback to IP meeting required</td>
<td>Cluster Coordinators and HFU</td>
<td>To be finalized 12th April</td>
</tr>
<tr>
<td>8</td>
<td>Partner adjustments</td>
<td>IPs address TR comments</td>
<td>IPs</td>
<td>To be finalized 17th April</td>
</tr>
<tr>
<td>9</td>
<td>Second Technical</td>
<td>Revised Project Proposals</td>
<td>TRCs, OCHA</td>
<td>To be finalized 21st April</td>
</tr>
<tr>
<td>10</td>
<td>Partner adjustments</td>
<td>IPs address TR comments</td>
<td>IPs</td>
<td>To be finalized 28th April</td>
</tr>
<tr>
<td>11</td>
<td>Final check and Financial Clearance</td>
<td>Final verification all comments addressed</td>
<td>OCHA</td>
<td>To be finalized 3rd May</td>
</tr>
<tr>
<td>12</td>
<td>Grant Agreement (GA) preparation</td>
<td>GA prepared Start date agreed with IP</td>
<td>OCHA</td>
<td>To be finalized 4th May</td>
</tr>
<tr>
<td>13</td>
<td>DRHC signs GA / Final approval</td>
<td>Based on final TRC clearance. Signature of GA collected</td>
<td>DRHC</td>
<td>To be Finalized 5th May</td>
</tr>
<tr>
<td>14</td>
<td>GA countersignature</td>
<td>Collect GA signature from IP</td>
<td>IPs</td>
<td>To be finalized 5th May</td>
</tr>
<tr>
<td>15</td>
<td>GA final clearance</td>
<td>GA cleared and signed</td>
<td>OCHA</td>
<td>To be finalized by 9th May</td>
</tr>
<tr>
<td>16</td>
<td>First disbursements are Processed</td>
<td>Payment request processed</td>
<td>OCHA</td>
<td>12th May</td>
</tr>
</tbody>
</table>
IX. Contacts and Feedback

Interested organizations should liaise with the respective sectors to ensure their proposed intervention is aligned to the Response Plan priorities and is properly coordinated with other stakeholders.

All correspondence should be copied to OCHA Humanitarian Financing Unit (HFU) (ochahfp@un.org).

Stakeholders (Clusters/Partners/Beneficiaries) who believe they have been treated incorrectly or unfairly during any part of the HF process or who wish to provide any other feedback can do so through the THF Feedback mechanism at ochathffeedback@un.org.